ACCELERATING IMPACT: Harnessing the Power of Human, Social, and Financial Innovation

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THE NETWORK FOR SOCIAL WORK MANAGEMENT
Harnessing Stakeholder Perspectives to Develop Competency-Based Engagement with Older Adults
Objectives

• Origins and purpose of the Positive Aging Initiative
• Justification for the Workforce of the Future Study
• Study design and findings
• Next steps
Ruth Irelan and Junior K. Knee
Purpose

• to improve health and well-being outcomes among older Oklahomans through collaborative research, policy development, and practice implementations designed to enhance the capacity of the Workforce of the Future and the housing, health, and social services infrastructure to promote the opportunity for all Oklahomans to age well.
A basic understanding of aging is relevant to....
Justification: Median Age in the USA

- 1900 = 22.85
- 1950 = 30.2
- 2000 = 35.3
- 2016 = 37.7
- 2030 = 39.5
Justification: Oklahoma Specific

14.8% 
& 
1.7% 

+ 

4% 
& 
0.8% 

= 

18.8% 
& 
2.5%
Justification: Current Outcomes

Oklahoma is ranked 47th in older adult health and well-being

- Able-bodied: 47th
- Early death: 45th
- Hip fractures: 48th
- Teeth extractions: 45th
- Geriatrician shortfall: 47th
- Low-care nursing home residents: 48th
- Nursing home quality: 47th
- Healthcare screenings: 46th
- Arthritis management: 48th
- Dental visits: 45th
- Depression: 47th
- Physical inactivity: 47th

Suicide rate:
18.4 deaths per 100,000 vs 33.6 in MT & 8.6 in NY
Nursing Home Snapshot

- Much above average
- Above average
- Below average
- Average
- Much below average
Justification: Current Workforce Capacity and Competencies

• <4% of social workers and psychologists specialize in geriatrics or gerontology
• 3% of medical students take 1 or more classes in geriatrics
• <1% of RNs, pharmacists, physician assistants, and physical therapist are certified in geriatrics or gerontology
• Others???
Knee Positive Aging Initiative:
Workforce Analysis, Research-led Workforce Enrichment, and Family Engagement Strategies to Strengthen Positive Aging in the State of Oklahoma

Introduction and Context
The Knee Positive Aging Initiative provides a platform to engage individuals and family members through evidence-based programs focusing on workforce enrichment, family engagement, and other initiatives that enhance the quality of life for Oklahomans.

Purpose Statement
The initiative seeks to strengthen knee aging through workforce development and family engagement by leveraging evidence-based practices and interventions targeted at improving the well-being of Oklahomans.

Guiding Research Questions
1. What are the key workforce challenges and opportunities in the field of aging in Oklahoma?
2. How can the initiative contribute to enhancing workforce development and family engagement in the state?

Methodology and Next Steps
Workforce of the Future
- Key stakeholders from various organizations will participate
- Engage with a diverse set of workforce development strategies

Family Engagement
- Develop a framework for family engagement
- Create a network for families to support each other

Key Accomplishments
- Leveraging evidence-based practices
- Developing a comprehensive plan for workforce development
- Enhancing family engagement strategies

Oklahoma Challenges
- Economic barriers
- Access to healthcare
- Workforce shortage

Oklahoma Strengths
- Strong community partnerships
- Access to educational resources
- Diverse workforce

Population Density
- Increase in population density in rural areas
- High unemployment rates in rural areas

National Workforce Capacity and Competencies
- Leadership
- Collaboration
- Innovation

By 2025, Oklahoma is projected to experience a 40% increase in its aged population.
Study Design: Part I

• Online Survey of Care Providers Concerning Core Competencies in Long-Term Care (Competencies Survey).
  • 63 distinct competencies rated on centrality to good care
  • How to support and sustain a strong workforce
  • Background questions
  • Key partner: LeadingAge Oklahoma
Care Domains with the Top 12 “Very Central” Ratings

- Domain I: Care relationships - 58%
- Domain II: Assess well-being - 25%
- Domain III: Plans of care - 0%
- Domain IV: Injury & autonomy - 8%
- Domain V: Environments of care - 0%
- Domain VI: Self-care - 8%
Top Rated Competencies

1. Preserve the dignity of the elder
2. Respect the right of an elder to have an opinion that differs with that of the care providers
3. Use the strengths of elders to enhance care relationships
4. Form and sustain a positive working relationship with an elder
5. Assess situations in which the elder experiences neglect and/or abuse
6. Minimize personal injury while providing care
7. Use positive words and phrases that strengthens the care relationship
8. Refrain from expressing negative emotions toward an elder & Assess situations in which the elder experiences exploitation, including financial
9. Engage the elder in a productive and collaborative relationship in the provision of care & Assess and show respect for how an elder’s culture, race, ethnicity, and faith may influence care preferences & Engage in risk prevention without reducing the dignity of the elder
Participant Background

• Four year college or graduate degree (69%)
• Nursing home, including skilled nursing facility, and other (86%)
• Administration (71%)
• Length of Time in Current Position and in Field
  • 6 months to 26 years in current position (47% for 6+ years)
  • 6 months to 39+ years in the field (84% for 6+ years)
• 75% white, 87% women, **70% ages 50-69**
Study Design: Part II

• Key Informant Stakeholder Interviews with Macro-level Policy Advisors
  • State Council on Aging and LTC Facility Advisory Board
  • 60-90 minutes
  • Principal workforce challenges now and into the future, key characteristics, core competencies, and solutions
• Key partners: Aging Services, Oklahoma Department of Human Services and Protective Health Services, Oklahoma State Department of Health
Emerging Theme: Education & Training

- Experiential learning for all administrators, staff, legislators, board members
- Up front and continuing education and training for all in gerontology
- Knowledge of aging
- Different disciplines shadowing each other
- How to adapt to various need levels
- Accessible and affordable training
- Specialty trainings/certifications
- Knowledge and competency based training
  - Interacting with people
  - Formal and informal assessments
- Ownership/investment in training

Realize and value that everyone has a story
Workforce of the Future Study Emerging Themes

- Key Characteristics
- Recruitment
- Retention Staffing, and Support
- Macro Considerations
- Interventions
- Education and Training
Next Steps

- Partnership Development
- Inter-Professional Development
- Social work Specific Academic Opportunities
- Dissemination
- Workforce Study Round II
- Family Councils, Social Service Directors, NH Precursors
What do people who work in these areas generally have in common?

- People who work with children
- People who operate heavy machinery
- People who work with veterans
- People who work in information technology
- People who work with trauma
- People who drive trucks
- People who work in child abuse prevention and intervention
An Aging Nation
Projected Number of Children and Older Adults

For the First Time in U.S. History Older Adults Are Projected to Outnumber Children by 2035

Projected percentage of population

22.8% Adults 65+
19.8% Children under 18
15.2%

Projected number (millions)

2016 '20 '25 '30 2035 '40 '45 '50 '55 2060
49.2 73.6 78.0 76.4 94.7 79.8

Note: 2016 data are estimates not projections.

Source: National Population Projections, 2017
www.census.gov/programs-surveys/popproj.html
Sources

- US Department of Commerce and Labor
- US Census Bureau
- Pew Research Center
- Oklahoma Department of Commerce
- America’s Health Rankings Senior Report (2019), United Health Foundation
- Nursing Home Compare
- Eldercare Workforce Alliance
- Positive Aging Initiative Workforce of the Future Study

For detailed citations/links, please contact Alisa.W.Cahill-1@ou.edu
Alisa West Cahill, LSW-Adm
Social Work Researcher
Knee Center Positive Aging Initiative
Knee Center for Strong Families
Alisa.W.Cahill-1@ou.edu