



Applied
Self-Direction

Bridging the Gap: Insights into Strengthening the Self-Directed Workforce

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Introduction

The ongoing direct care workforce shortage continues to create extraordinary challenges for older adults and people with disabilities who rely on support to live independently at home.¹ Self-direction offers a unique approach to alleviate strain on the professional direct care workforce by allowing people to receive high-quality services from individuals they know and trust, including friends and even family members.² As a result, self-direction has become an increasingly integral component of the Medicaid-funded home and community-based services (HCBS) landscape, with many states reporting record growth in their self-direction programs in the wake of the COVID pandemic.³

Detailed and high-quality data is reasonably accessible for the traditional agency-based HCBS workforce. The Department of Labor's Bureau of Labor Statistics,⁴ PHI,⁵ and other several organizations track key wage, demographic, and turnover information about this industry. However, less research exists about the workforce supporting self-direction, which includes a wide range of workers who may not necessarily consider providing home and community support to be a vocation. In addition, states continue to report challenges on how to effectively train and support employers in self-direction to recruit and retain staff.

No comprehensive dataset available on the self-direction workforce currently exists. As a result, much is unknown about what, if any, systemic issues impact this workforce. Without this understanding, there is no clear roadmap on how to identify best practices or address the challenges facing employers in self-direction and their workers.

The purpose of this paper is to provide clarity and understanding regarding the status of the self-direction workforce from the perspective of key stakeholders. To gather these insights, Applied Self-Direction first convened a virtual Executive Roundtable Series to bring together national experts and stakeholders for in-depth discussions. Building upon the themes and issues raised during the roundtable discussions, we then conducted a national survey among people who self-direct, representatives, and direct care workers to capture their experiences, concerns, and ideas to address workforce challenges in self-direction.

This white paper provides a summary of the roundtable discussions and survey results, including stakeholders' recommendations for policies and practices that can alleviate the

¹ <https://www.healthaffairs.org/doi/10.1377/hlthaff.2022.01351>

² <https://www.medicaid.gov/medicaid/long-term-services-supports/self-directed-services/index.html>

³ 2023 Self-Direction National Inventory

⁴ <https://www.bls.gov/oes/current/oes311120.htm#ind>

⁵ <https://www.phinational.org/policy-research/workforce-data-center/>

workforce shortage and facilitate quality hiring. While the Executive Roundtable Series included a myriad of perspectives, this paper is primarily a summation of the feedback of participants, representatives, and workers. All recommendations and perspectives included in this report were specifically provided by the Executive Roundtable participants and survey respondents.

It is our hope this paper will create a basis for further research and discussion within the national self-direction community on the unique needs of its workforce.

Executive Roundtable Series: Key Themes

The Executive Roundtable Series consisted of two 2-hour virtual sessions held in May 2023. The following is a high-level summary of the themes from these discussions.

Executive Roundtable 1: Policymakers and Practitioners

The first roundtable was comprised of self-direction policymakers and practitioners, including state and MCO personnel and representatives from Financial Management Services (FMS) entities. Key takeaways from their discussion were as follows:

- The workforce shortage has impacted both traditional agencies and self-direction, but self-direction has some advantages such as the ability to hire family members. However, self-directing participants still face significant challenges hiring and retaining workers.
- Low wages are a major contributor to workforce shortages. Other factors include lack of benefits, training requirements that create barriers, inefficient hiring processes, and misconceptions about caregiving roles.
- Strategies to address shortages include establishing worker registries, allowing family members to be paid caregivers, implementing pay parity between agency and self-directed workers, providing sign-on bonuses, and offering added benefits like mileage reimbursement.
- Self-direction provides flexibility and choice, but barriers like restrictive policies and workforce shortages limit its potential. Rethinking policies, funding models, training requirements, and pay could help address shortages.

"I think during the pandemic self-direction was a bit more poised to be slightly more okay because there were family members."

Executive Roundtable 2: Participants, Family Members, and Workers

The second roundtable focused on individuals with lived experience, including people who self-direct (participants), family members who support someone with self-direction (representatives), and paid workers hired by people who self-direct (workers). Key takeaways from their discussion were as follows:

- Recruiting and retaining workers is extremely challenging for people who self-direct. Many participants rely heavily on family members and are unable to use all of their authorized service hours.
- Lack of benefits and status for caregiving roles, slow and/or complex hiring/onboarding processes, and worker burnout and lack of support all also contribute to workforce shortages.
- Required trainings often create barriers to entry and offer little benefit for workers or participants. Peer mentoring and on-the-job training are most effective.
- Workers need training on boundaries and communication. Soft skills like empathy are more valuable than medical skills for most roles.
- Self-direction requires significant unpaid coordination by participants. Participants need training on how to be employers. Support brokers and peer mentoring provide useful assistance but remain underutilized, difficult to access, and inconsistent in quality.
- Adding status, benefits, and advancement opportunities would improve retention and recruitment.
- Solutions require acknowledging and addressing systemic issues and power imbalances. Funding participant-led advocacy and advisory entities, maximizing choice and flexibility, and investing in the disability community are critical to improving self-direction.

"The caregiving crisis has been very tough on me. My sister and I both have spinal muscular atrophy type two. It was really tough for us when my sister broke her femur and my dad didn't know whether to go to the hospital and be with her or whether to be at home and put me to bed."

"No amount of training of somebody coming into my house before they've ever met me is going to help me to be able to thrive in my home and in my community."

"I've done this a long time and hiring and firing my aides isn't the same as being an employer. I'm an unpaid manager who is also the customer, whose service also makes or breaks me, but I don't have control over most things an employer actually has to manage their employees."

"The real training is the training you get from, you know, the family or the person who you're working for. That's the training that really is valuable and counts."

National Survey of Self-Direction Participants, Representatives, and Workers

Informed by the above findings, Applied Self-Direction developed an online survey to gather additional insights from the perspective of self-direction participants, representatives, and their workers. Applied Self-Direction sought survey respondents across our extensive network, including dissemination to our audience of over 150 membership organizations representing stakeholders in self-direction, 5,000 e-newsletter subscribers, and partner organizations. In total, 691 people completed the anonymous survey, including 142 participants, 259 representatives, and 290 workers.

The following section summarizes the key findings from the survey.

Participant Perspectives

- **Satisfaction:** Over 71% of participant respondents are satisfied/very satisfied with self-direction, appreciating the freedom and flexibility. Approximately 15% are unsatisfied, citing workforce shortages and administrative burdens.
- **Hiring Challenges:** 75% of participant respondents find recruiting and hiring workers very difficult, though 60% can hire family/guardians. 26% of participant respondents frequently forgo care due to lack of workers, while 38% never encounter this issue.
- **Reverting to Traditional Services:** 54% of participant respondents will not revert to traditional agency services, though 45% have considered it, indicating mixed perspectives.
- **Last-Minute Shifts:** 43% of participant respondents regularly fill shifts last-minute due to lack of coverage, underscoring retention issues. Over 40% of respondents rarely or never face this predicament.
- **Hiring Process:** 70% of participant respondents report that it takes a week or longer to complete the hiring process from the date they decide to hire a worker to the date the worker starts. Nearly 20% of respondents indicate the hiring process takes 1-3 months, highlighting hiring delays.
- **Hiring Family Members:** Over 50% of participant respondents have hired family members, but almost 60% prefer to hire a mix of family and non-family members. 20% of respondents said they had no choice but to hire family members.

Representative Perspectives

- **Satisfaction:** Over 75% of representative respondents reported that the participants they support are satisfied with self-direction, valuing the resulting independence and customized care. 10% of respondents report participants being unsatisfied.

- **Hiring Challenges:** Over 80% of representative respondents acknowledge recruiting and hiring workers is very difficult. However, 65% have not considered reverting to a traditional agency model.
- **Lack of Care:** Nearly 50% of representative respondents said the participants they support sometimes lack care due to absence of workers. 46% of respondents never encounter this.
- **Last-Minute Shifts:** 45% of representative respondents regularly deal with covering shifts last-minute, pointing to retention struggles. However, 30% of respondents rarely or never face this dilemma.
- **Hiring Process:** 90% of representative respondents said the hiring process takes over a week to complete. Over 50% of respondents indicate 3-12 weeks, indicating substantive hiring delays.
- **Hiring Family Members:** Almost 60% of representative respondents said the participants they support have hired family members, but over 70% prefer to hire a mix of family members and non-family members. Almost 12% of respondents said the participant they support had no choice but to hire family members.

Worker Perspectives

- **Satisfaction:** 75% of worker respondents are satisfied working in self-direction. Only 7% of respondents are unsatisfied.
- **Hiring Challenges:** Over 50% of worker respondents acknowledged their participant employers' hiring challenges.
- **Lack of Care:** Over 45% of worker respondents reported their participant employers sometimes go without care due to lack of coverage. 45% of respondents said this has never happened.
- **Last-Minute Shifts:** 40% of worker respondents frequently receive last-minute requests to cover shifts, while nearly 50% of respondents rarely or never encounter this.
- **Hiring Process:** Nearly 80% of worker respondents said it took over a week to complete the hiring process, with more than 40% of respondents specifying 3-12 weeks, reflecting hiring delays.
- **Hiring Family Members:** Over 60% of worker respondents were family members of the participant, with over 60% of those paid family members identifying as a parent.

Benefits of Self-Direction

- **Freedom:** This is a vital benefit enabling independence and community participation. As one participant shared, "Because of self-direction services, I am able to live independently, participate in my community, and work."
- **Meeting Unmet Needs:** The ability to hire their own worker allows participants to address specific needs. One participant enthusiastically stated, **"Self-direction is the best thing that ever happened to me!"**
- **Benefits for Workers:** Workers find the personal experiences and skills gained through self-direction go beyond typical caregiving roles and are more "community and relationship driven".
- **Improved Quality of Life:** Responses point to the enhanced quality of life for participants. One respondent noted that self-direction enabled greater community participation and decreased negative behaviors.
- **Flexibility:** The freedom to choose their own team members and services is invaluable. As a representative shared, "Self-direction is providing choice, flexibility, and access to the community in meaningful ways."

"Caregivers work hard and provide life-sustaining assistance to those of us with disabilities. Because of self-direction services, I am able to live independently, participate in my community, and work."

"She is much, much happier, more active, and more independent than when she was with an agency. For example, her agency took her into the community approximately 3 times in the last year and a half she was with them. Most of the rest of her time with them she lay in bed, alone in her room, on her cell phone. In SDS, she is in the community daily. She attends work out classes, discussion and arts and crafts classes, and frequently visits and socializes in parks with friends and staff. She has attended and spoken out at a community forum gathering input on making her community more accessible to folks with disabilities, has gone geocaching, and to the local county fair, among many other activities. She has input into every activity in which she participates."

"Our son is happy with the flexibility of services and being able to choose his staff he wants. He is able to live and work where he wants with supports."

Challenges of Self-Direction

- **Workforce Shortage:** A common concern among participants is the difficulty in finding and retaining workers. As one stated, "The workforce shortage is the single biggest threat to my independence."
- **Administrative Burdens:** Many feel overwhelmed by administrative responsibilities, such as mandatory trainings, long hiring delays, complex applications, and technology/device requirements, and believe the administrative aspects of self-direction could be streamlined.
- **Compensation Concerns:** Respondents emphasized the need for fair wages, especially when "Caring for another human is a heavy responsibility." Many highlighted the lack of retirement benefits and consistent pay.
- **Lack of Opportunity for Advancement:** Many expressed concerns that there is no way to move up in the caregiving field and that the role is low in status and "high on stigma."
- **Scheduling Issues:** Some workers shared that self-directing participant employers do not offer enough hours to make the commitment worthwhile. One worker mentioned, "No one wants to work Fridays or weekends."
- **Physical and Emotional Strain:** The job demands on workers can be high, leading some to consider "leaving for less responsible positions."
- **Lack of Respect:** Some workers feel isolated and believe it's a "thankless job," often facing challenging interactions with the participants and their families.

"I love getting to choose staff and take care of scheduling, etc. However, it's really hard when you can't find people no matter how hard you look."

"We couldn't find a caregiver so my husband had to quit his job to become the caregiver."

"Self-direction, itself, is great. The tons of paperwork is a burden."

"Not enough hours with one participant to be full-time, so I need to travel a lot, but the cost of gas is very high."

"You can't pay people 1965 paperboy wages and expect 15 years of experience as a structural engineer in 2023."

"No job should have to depend on the sense of mission and the generosity of heart of the worker to substitute for fair wages."

"The vendor providing payroll services makes a lot of mistakes with my payroll. My employees are fed up with not getting paid. Some have left."

"We can't compete with Walmart, Amazon and Burger King. Defaulting into nursing homes is real and going without critical care is leading to serious health issues like skin breakdown, respiratory failure, and poor nutrition."

Advice for Participants

Recruiting Workers

- Post job listings regularly and across multiple platforms. See [Appendix I](#) for a list of suggested platforms.
- Organize creative engagement events or activities to identify prospective workers.
- Keep business cards with you and hand them out when you meet kind- and warm-hearted people in the community.
- Network at community events and distribute business cards to find eligible candidates.
- Engage your current workers to assist you in the search for additional staff support.
- See [Appendix II](#) for a detailed primer on hiring from one participant respondent.

"We once organized a "Care-a-Palooza" where potential caregivers competed in wheelchair races and obstacle courses. And who could forget our "Craziest Sock Contest" where we managed to find some footloose caregiving enthusiasts? But the real winner? Our "Karaoke for Compassion" night – because nothing screams "dedicated caregiver" like nailing a heartfelt ballad!"

"Network with staff of Fostered Youth transiting to adulthood programs, Domestic Violence Shelters, and Mental Health Therapists. Those staff may have insight to service recipients who are trustworthy and responsible, have a caregiving disposition, and looking for a job. They could offer the job opportunity to just those clients."

"I have gone to the pastor of my church for recommending members of my church as possible caregivers since they would be someone who believes the same way as I do, as well as some that he thinks can learn about my needs and that he would trust in his own home."

"I tell my direct care workers they need to find two people to replace themselves before they move on. Who better to screen and know if the person they're referring to can and will be good? This worked great in a college town!"

Retaining Workers

- Maintain a positive and respectful environment.
- Set clear expectations upfront.
- Ask for worker input to make them feel valued.
- Provide praise and convey appreciation for their work.
- Maintain open communication channels, like hosting group chats for all your employees.
- Allow workers some flexibility in scheduling to ensure shift compatibility. Get creative with scheduling to increase appeal.
- Play to worker strengths and treat them like important team members.
- Provide any extras you can, as permitted. See [Appendix III](#) for a list of suggested employee perks.

"Be personal with employees, treat them like you want to be treated. Good people are hard to find."

"I tell them they are doing a good job (if true) and how much I appreciate them making a difference in my life. Genuine praise goes a long way."

"Open communication is cliché but SO incredibly important and can make or break keeping caregivers."

Recommendations for States, MCOs, and FMS Entities

Supporting Participants to Recruit Workers

- Reconsider what is truly necessary for background check requirements, for example, fingerprinting was noted as a barrier.
- Streamline paperwork to expedite hiring.
- Better support information and assistance professionals, such as support brokers, to train participants in recruiting and interviewing workers.
- Utilize media to highlight the rewards of direct care work and the specific hiring needs via self-direction.
- Introduce caregiving in schools to spur early interest.
- Develop partnerships with local colleges to offer credits and incentives like tuition funds in exchange for direct care work hours.
- Host community recruitment fairs to bring together participants and prospective workers.

"Government makes caring for others seem hard with all the mandated requirements which scare away the good people who genuinely just want to help."

"Let people know these jobs exist and how you can change someone's life"

- Provide special work visas or incentives tied to direct care work.
- Offer free English classes, and in tandem, provide information about direct care work opportunities.

Supporting Participants to Retain Workers

- Consider eliminating mandatory training for workers in self-direction. Instead, allow participants to determine their training needs. Offer optional, on-demand online training for participants and representatives to use at their discretion when training workers.
- Develop step-by-step, plain language manuals explaining the hiring processes and timelines for participants and their new employees to reduce confusion.
- Ensure workers do not personally incur the cost of completing mandatory training or background checks.
- Create comprehensive program handbooks for participant employers using plain language.
- Organize networking groups for participants, representatives, and workers in self-direction to create relationships, exchange best practices, and reduce isolation.

"A lot of the rules that they say are set up to protect us don't actually protect us, they cause a lot of red tape, exhaust good workers who can go elsewhere, exhaust mediocre workers that could improve with good supports, and leave big loopholes to be treated badly."

"The bureaucracy to employ a worker is too cumbersome. A background check should be done within 48 hours, and paperwork should be less redundant. I am technically called the "employer," but am not allowed to see the results of a background check. I would like the option of not having to do a background check, and have the state trust that I know how to hire a safe and qualified worker better than most administrators."

"It's very isolating. It would be good if there were some kind of networking activities for those who self-direct, otherwise, they are ONLY WITH THEIR WORKER."

"We provide a lot of emotional support along with the physical. We truly care for the people we work with, and want to see them grow and be successful. Burnout and turnover are high. Ongoing support for direct care workers is needed to prevent burnout."

Policy Recommendations

- Raise wages.
- Offer full employment benefits for workers in self-direction such as healthcare, housing, childcare, and transportation support to aid recruitment and retention.
- Make budget authority available across self-direction programs to enable participants to provide higher wages as they see fit.
- Hold listening sessions with workers, participants, and representatives to understand challenges and get input on improvements.
- Reconsider Electronic Visit Verification (EVV) requirements
- Allow participants to hire family members and legally responsible individuals.
- Increase the availability of information and assistance support for participants and representatives.
- Work with provider associations to ensure workers in self-direction are treated as equals with access to join.
- Provide more flexibility for family to be paid to work over 40 hours when needed.
- Improve FMS provider responsiveness to address issues in a timely manner. Hold FMS providers accountable for payment delays unless reasonable justification is provided.
- Allocate more budget for hiring expenses.

"Workers are keeping participants alive, healthy, and increasing their quality of life, and that is a high-worth position. They deserve to be compensated reliably, offered benefits, allowed to work without being tracked, allowed to work more than 40 hours a week if they are needed because this is a human going without critical care."

"Just increase the salary."

"I made more when I first started this job then I do now. Almost 15 years. That is absolutely pathetic."

"It is hard work that takes a toll on your body, so health benefits are needed. This is one of the most important jobs out there because you're directly impacting someone's life to physically live every day and it's treated like worse than any other job."

"Workers need paid time off just like everyone else, but even more so. They need time for recovery and breaks. They need affordable healthcare. They deserve annual increases to keep up with the cost of living. They need transportation assistance. If EVV is required, they need to be supplied with useable devices and adequate service plans to clock in and clock out and approve their timesheets. The welfare cellphone plans are insufficient to meet their employment needs."

"Budget authority is key so we can pay more (yes with fewer hours) and be competitive."

Concepts to Embrace and Understand to Better Support Participants

- People self-directing should be treated as leaders, not passive recipients. Individuals can capably hire, set pay, train - treating them as responsible decision-makers fosters ingenuity and self-esteem.
- Understand that workers try their best and if mistakes occur, they are not trying to commit fraud.
- Each person self-directing creates multiple jobs, benefiting society and the workforce.
- Spending just a day in the lives of those impacted will provide immense perspective.
- Many rules meant to protect end up hindering with red tape which drives away quality workers.
- Unpaid family caregivers get exhausted managing care - stop calling it "natural support."
- Every dollar equates to quality of life- understanding this perspective could drive change.

"People with disabilities have diminished control over so many areas of their lives. Having control over such intimate decisions as which persons help in clothing and cleaning and housekeeping is about personal dignity—just what all people want and need."

"They do not need to protect us, their job is to make the system work, hold vendors accountable, and then if we make mistakes let us deal with it and move on."

"Be in our shoes for 48 hours. Enough said."

"They have no idea what life is like. They need to live it, like an internship. Spend a whole day with a family whose child needs 24-hour care, or who has autism, or can't communicate. That college degree doesn't mean a thing if you never experience life."

"Stop treating us like commodities others can make a profit from, and start treating us like responsible people who are capable of hiring, setting pay-rate within the budget we are given to support our needs, keeping records, training to our needs, etc. and you will discover a shift not only in this direct workforce crisis, but also in the ingenuity, self-reliance and self-esteem of people with disabilities."

"They don't understand that we're just families — not agencies. They have tons of paperwork on my daughter, in excruciating and humiliating detail, we are working our butts off, much of it unpaid, and all we get is local health officials accusing us of fraud — outright — at public meetings and mountains of inefficient paperwork."

"DSPs are fundamental to the economy because they allow us to work which expands the economy. It is not a welfare program! It increases the livability of the city or state. We will all need direct care workers at some point in our life, so let's get crackin'."

Worker Registries: Ineffective Resources?

- Only 27% of participant respondents said they had access to worker registries. Of that 27%, over 60% found them unhelpful.
- Only 17% of representatives had access to worker registries. Of that 17%, over 50% indicated registries were not helpful.
- Most respondents felt registries are ineffective, with thousands registered but not responsive.

"You can create all the registries you want, but they're only useful if those registered actually respond to inquiries."

Needed: Stronger Information and Assistance in Support of Self-Direction

There was an evident need expressed by respondents for more robust information and assistance structures to support participants and representatives in navigating the intricacies of self-direction.

- Approximately 50% of both participant and representative respondents desire greater access to one-on-one assistance.
- 80% of participant and representative respondents emphasized wanting access to a helpline or a dedicated contact available during scheduled office hours to respond to their questions in real time.

"I need more than 4 hours a month for Support Brokers."

Conclusion

This report synthesizes a breadth of insights from self-direction participants, representatives, paid workers, and other stakeholders. Their perspectives underscore that self-direction, when implemented effectively, holds the promise of providing greater choice, control and flexibility which directly translates to enhanced independence and quality of life for people with disabilities.

However, the findings also expose evident gaps in existing programs related to hiring, workforce retention, administrative burdens, availability of assistance, and more. Our findings make clear that self-direction programs have yet to achieve their full potential. By heeding these lived experiences and implementing the identified strategies around recruitment, retention, streamlining processes, building support structures, and removing barriers, key program officials can work to realize the full spirit and vision of self-direction.

While there is significant work ahead, these insights illuminate a path forward. By bringing to life the words directly from those impacted, we hope this report provides an invaluable roadmap to drive change and inspire future research to document the status of the self-direction workforce more completely.

Appendix I: Example Venues for Recruiting Workers from Participants

1. Websites to post job listings
 - a. www.facebook.com
 - b. www.care.com
 - c. www.sittercity.com
 - d. www.indeed.com
 - e. www.craigslist.org
 - f. www.nextdoor.com
 - g. www.linkedin.com
 - h. www.joinhandshake.com
 - i. www.glassdoor.com
2. Community venues to post ads and flyers
 - a. Colleges and nursing schools. Contact the area school faculty lounge
 - b. Churches and other religious institutions
 - c. Library
 - d. Grocery store
 - e. Coffee shops
 - f. Gyms
 - g. Any community venue where people with similar interest tend to visit
 - h. Job centers
3. Word of mouth, you may consider asking the following people for recommendations or referrals
 - a. Your current workers
 - b. Other disabled people and/or their family members
 - c. Former teachers or teacher's aides
 - d. Chairs of college academic departments in fields such as occupational therapy, physical therapy. Potential to provide academic credit for work.
 - e. High school counselors. Potential to connect with students preparing for Certified Nursing Assistant certification and jobs.

Appendix II: A Primer on Hiring from a Participant with 40 Years Experience⁶

I prioritize writing a good ad, so I ask people what they think of the ad (especially friends and strangers who are not disabled to help me suss out what makes a job more appealing), and I include a picture of myself with my ad. A photo helps weed people who are looking for light-duty work, eldercare (though, when my hair turns gray I suppose I will officially look like an elder), and childcare.

I make the ad short and include a link to a more detailed description and application. I use a very detailed application on Google forms with lots of yes / no / maybe / I don't know checkboxes. I set each field to be required to fill out, and I include a couple more pictures of me, me and my partner, our cat, etc.

I advertise on Craigslist in the Jobs Healthcare section. I used to put it in the Craigslist Gigs section until my care needs got too complicated. I don't want people who are afraid to learn new things or work hard.

I also advertise where I might find people with similar interests or cultural identities. I find a lot of people in Facebook groups for queers, punks, artists, activists, advocates, and people who share my hobbies.

There are also a lot of local employment groups/job boards on Facebook. I put my photo and job description and application link in all these places including on Nextdoor, in emails to friends / coworkers / family / neighbors / former and current PCAs / former housemates / older friends with college kids / local disabled people, and on flyers that I make and distribute to college and nursing school bulletin boards, local cafés, my anarchist coffeehouse, game stores, etc.

I have friends who are active in different religious/spiritual communities. When they are trying to hire someone, I encourage them to advertise at their houses of worship and sister houses of worship.

I don't include my email address or phone number. I only include the link to my application so I don't get a bunch of ridiculous resumes and people who are just applying willy-nilly.

⁶ To the anonymous survey respondent who provided this detailed response, thank you for sharing your wisdom and expertise. May your excellent advice help many others succeed!

Some people set up a temporary phone number (I can't remember if that's through Google) so they don't have to give out their personal number.

I text and phone the people I would like to meet, do an initial telephone screening, and then schedule to meet people in person.

I let them know ahead of time not to wear fragrances and that they must wear a mask that I'm happy to provide. 75% show up, though some have to reschedule occasionally.

I conduct a friendly and thorough interview. I always check references, and ask that the applicants make sure their references know I'm calling. I usually have to text the references first because nobody answers phone calls from unfamiliar numbers.

I've been doing this for 40 years. It's a lot of work, but it pays off to be as professional and courteous as possible, be clear about my expectations, be willing to compromise on some things in order to make it a good job for my employees, and make it an environment where they know they are valued.

Most of my workers give me 2 to 8 weeks' notice before they resign unless it's an emergency, and I never make them feel guilty for quitting. I encourage them to follow their dreams. Quite a few of them stay on my backup list, many refer their friends to me, and a few come back to cover for someone on vacation or because they need a short-term or long-term job again.

Appendix III: Example Employee Perks from Participants

- Host morale-boosting events, such as hang out nights for caregivers
- Assist with transportation expenses
- Provide gift cards
- Create a snack drawer for staff
- Offer weekend getaways
- Small, meaningful gifts on holidays and their birthday
- Buy a meal
- Provide free housing, if available
- Lend your vehicle
- Write recommendation letters
- Reimburse their CPR and background check costs after three months of employment
- Conduct annual check-ins to learn how to better support your workers
- Offer to bring their kids to work
- Be flexible with requests, as much as possible

"I give time off whenever requested, I offer regular raises that I pay out-of-pocket, there are always homemade cookies available, I support my workers' personal/academic/ professional goals, I give ongoing informal feedback (I no longer do formal evaluations because I just don't have time or energy), I provide food and community referrals and resources including social services referrals in times of crisis, I host occasional get-togethers, and I give birthday and holiday gifts."

"Every year for Christmas and Mother's Day, I bake a dozen cookies for my staff to show my appreciation for a job well done. I also show my staff respect by saying please and thank you and being clear about my expectations."