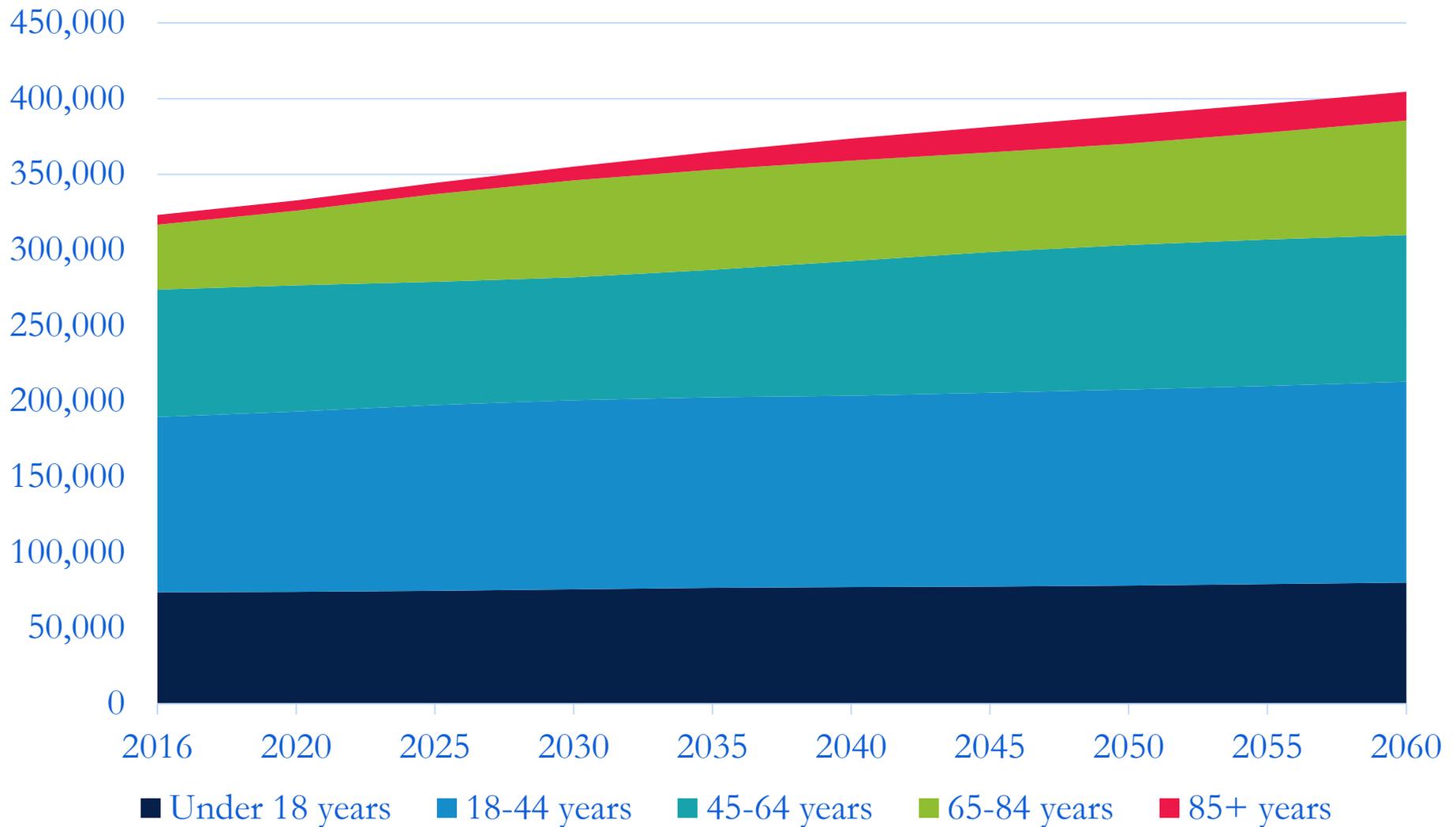# The Aging U.S. Population: The Potential of New Workers and New Roles to Achieve High-Value Care

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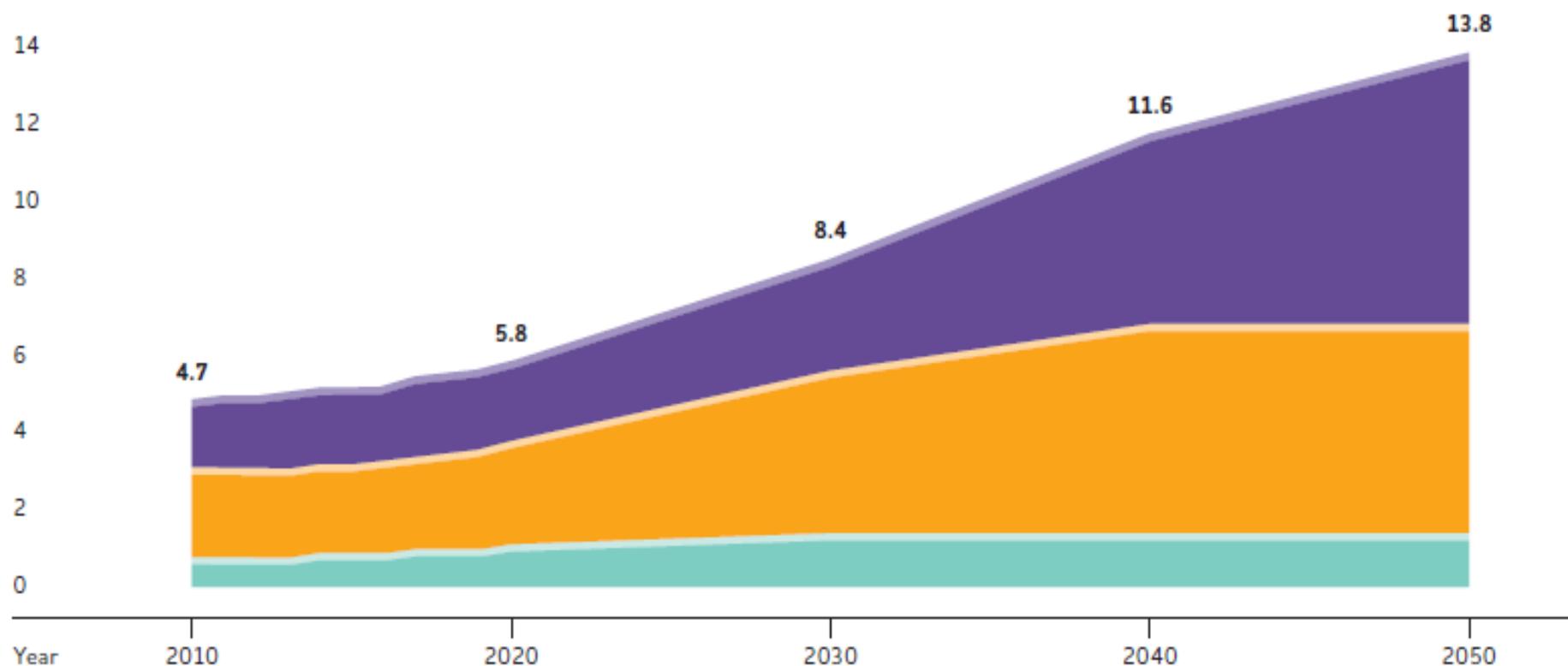October 2018

U.S. Population Projections (Thousands)

Legend: Under 18 years, 18-44 years, 45-64 years, 65-84 years, 85+ years

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Increasing Risk of Cognitive and Functional Loss

Projected Numbers of People Aged 65+ with Alzheimer's

Millions of people with Alzheimer's
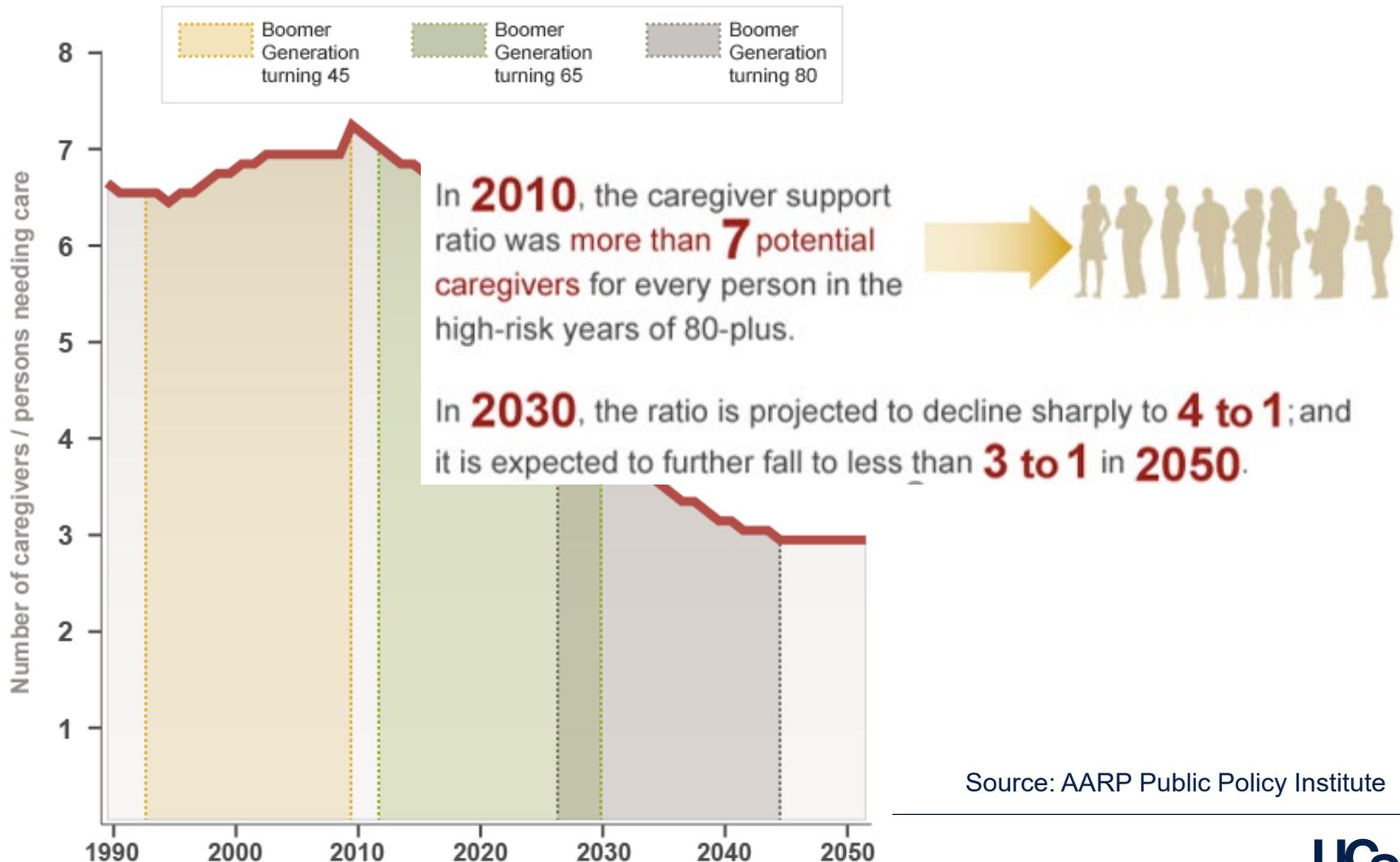
Ages 65-74 | Ages 75-84 | Ages 85+

4.7 · 5.8 · 8.4 · 11.6 · 13.8

Year: 2010, 2020, 2030, 2040, 2050

Created from data from Hebert et al.[A12, 31]

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Decline of Traditional Family Caregivers

Caregiver Support Ratio

In **2010**, the caregiver support ratio was **more than 7** potential caregivers for every person in the high-risk years of 80-plus.

In **2030**, the ratio is projected to decline sharply to **4 to 1**; and it is expected to further fall to less than **3 to 1** in **2050**.

Source: AARP Public Policy Institute

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Projected job/FTE growth: 2010-2030

Occupation	New jobs	Growth
RN (FTE)	132,869	73%
LPN (FTE)	166,242	70%
Nursing assistants (FTE)	534,548	68%
Home health/personal care aides	1,188,897	88%
Counselors & social work	116,171	94%
Total (jobs+FTE)	2,895,842	79%

New workers in long-term care: Community paramedicine

- Community paramedics provide non-traditional services, including for older and long-term care people

- Target populations can include:

  - Chronic conditions

  - Frequent users of ambulance or ED

  - Patients recently discharged from a hospital

  - Hospice and home health patients, and the home-bound

- Services can include clinical assessment, medication reconciliation, and linkages to health insurance, housing, social, and community services

- Some research suggests improvements in medication adherence, transports to the ED, and cost savings

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New roles in long-term care: Dementia care specialists

- A professional specially trained in dementia **care coordination**

  - 25 hours specialized training; [1;] ongoing huddle calls

  - Addresses unique needs of persons with dementia and their families

  - Knowledge of systems of care and how to involve family members and others in the daily care activities

- Serves as resource to health care team and other care coordinators

- Who has been trained in CA:

  - RN, MSN, or MSW

  - Avg. 3 years experience providing direct service

  - Experience in case management with older adults

[1]Chodosh, J. et al (2006). Effect of a dementia care management intervention on primary care provider knowledge, attitudes, and perceptions of quality of care. *Journal of the American Geriatrics Society*, 54(2), 311-317.

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# Other new roles for existing workforce:

- Palliative care: programs are moving into the community, with nurses, social workers, chaplains, and physicians

- Care coordination: social workers, RNs, community navigators; facility based training; need phone skills

- Remote monitoring and telehealth: nurses receive data and manage patients based on monitoring of blood pressure, weight, glucose, and other vital data

- Front-line workers as care team members; trained to observe and report changes in behavior or condition; pilot results indicates reduced hospitalization and ER visits[1]:

[1] https://cltcec.org/cost-savings-roi/

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Barriers to meeting long-term care needs: Scope of practice

- Home care aides are restricted from providing essential services such as administering medication in many states – this is a barrier to home-based care

- Paramedics are not authorized to provide community services in many states

- Nurse practitioner and physicians assistant regulations may affect demand in long-term care settings

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Barriers to meeting long-term care needs: Job quality
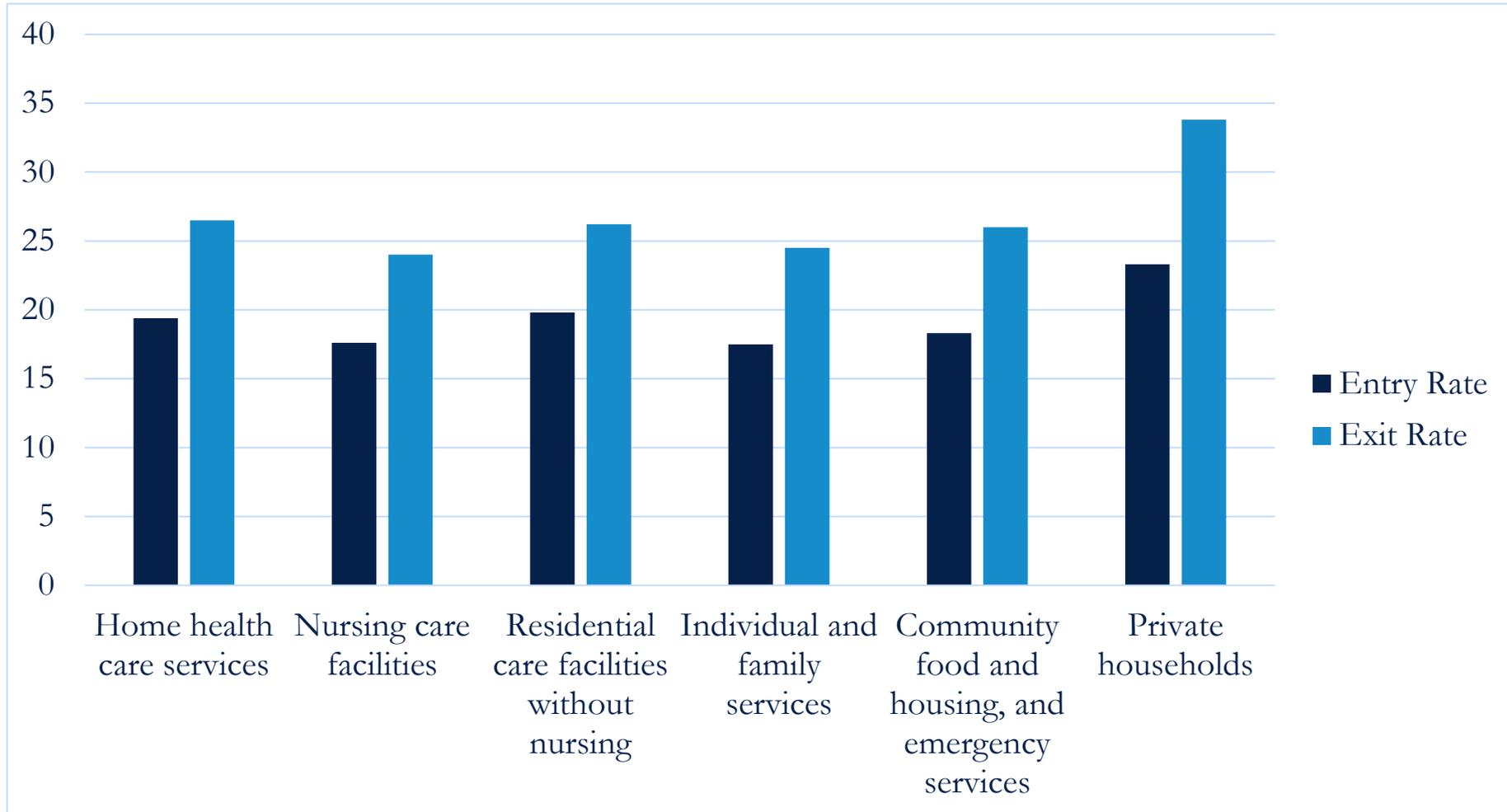
Barriers to meeting long-term care needs: Integration of workforce with new technology

- Interest in technology that impacts the workforce; home or LTC settings

  - Facilitates worker

  - Potentially replaces workers

  - Impacts worker retention and satisfaction

- Reviewed over 60 technologies: wearables, sensors, training, robots, VR, interactive voice

- Early results:

  - Many companies enter and leave market. Most market direct to consumer. Limited outcome research

  - Limited input and involvement of paid workforce in development

  - Some have potential to reduce unneeded visits if data is timely and direct to workforce

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