

**Senate Study Bill 3190 - Introduced**

SENATE FILE \_\_\_\_\_  
BY (PROPOSED COMMITTEE ON  
HUMAN RESOURCES BILL BY  
CHAIRPERSON SWEENEY)

**A BILL FOR**

1 An Act relating to the development of an implementation plan  
2 for a centralized direct care workforce database.

3 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

1 Section 1. CENTRALIZED DIRECT CARE WORKFORCE DATABASE —  
2 STAKEHOLDER WORKGROUP — IMPLEMENTATION PLAN.

3 1. The department of inspections and appeals shall convene  
4 a workgroup of stakeholders to develop a plan to implement a  
5 centralized direct care workforce database as an expansion of  
6 the Iowa direct care worker registry currently located within  
7 the department of inspections and appeals. The purposes of the  
8 database are:

9 a. To enable data-driven decision-making by providing  
10 a means for collecting data and analyzing emerging trends  
11 relating to the state's direct care workforce in all settings  
12 and by identifying, at a minimum, the current number of  
13 direct care workers in Iowa, the diversity in the direct care  
14 workforce, and the employment settings utilized to aid in  
15 planning for the growing demand for the direct care workforce.

16 b. To provide portability across employment settings  
17 and populations served of the permanent record of trainings,  
18 certifications, credentials, continuing education, and  
19 experience of direct care workers by maintaining such records  
20 in a central and secure location.

21 c. To improve the opportunity for consumers to engage  
22 direct care workers with the training, skills, and availability  
23 appropriate to their own situations.

24 d. To reduce the costs and time associated with repetitive  
25 training resulting from the lack of training portability.

26 e. To increase public protection by streamlining the  
27 process to enable completion of required background checks in  
28 a timely and efficient manner.

29 f. To accelerate the onboarding of newly employed direct  
30 care workers and direct care workers transitioning into new  
31 employment opportunities.

32 2. The members of the stakeholder workgroup shall  
33 include one representative of the department of education,  
34 Iowa workforce development, the department on aging, the  
35 department of public health, the department of human services,

1 the department of public safety, division of criminal  
2 investigation, the Iowa caregivers, AARP Iowa, the Iowa center  
3 for nursing workforce, everystep care and support services,  
4 the brain injury alliance of Iowa, the national alliance on  
5 mental illness-Iowa, leadingage Iowa, the Iowa association of  
6 community providers, united way of central Iowa-central Iowa  
7 works, the Iowa health care association, the Iowa developmental  
8 disabilities council, a rural community college and an urban  
9 community college, one rural and one urban public health  
10 entity, the Iowa hospital association, and the university of  
11 Iowa college of public health midwestern public health training  
12 center. Additionally, the task force shall include two direct  
13 care workers who have graduated from the Iowa caregivers  
14 toughest job you'll ever love leadership program, a citizen  
15 advocate, and two consumers.

16 3. The stakeholder workgroup shall do all of the following:

17 a. Review historical reports of efforts and recommendations  
18 generated by previous state-led and federally funded  
19 initiatives for consideration in informing future planning, and  
20 assess whether the previous recommendations align with future  
21 needs.

22 b. Review prior efforts including the results of the Iowa  
23 better jobs better care program demonstration and the AMANDA  
24 portal developed through the federal personal and home care  
25 aide state training (PHCAST) grant to determine if these  
26 technologies could be brought to scale or implemented to save  
27 costs and resources in implementing the database.

28 c. Investigate initiatives by the centers for Medicare and  
29 Medicaid services of the United States department of health and  
30 human services relating to nurse aid registries.

31 d. Solicit input from stakeholders on the type of data to be  
32 collected and the types of analyses to be performed in building  
33 and retaining the high-demand direct care workforce.

34 e. Identify critical database system content and  
35 functionality including but not limited to all of the

1 following:

2 (1) A direct care worker's verified education and training  
3 records, credentials, certifications, and experience.

4 (2) A means to include existing qualified direct care  
5 workers in the database through a phased-in grandfathering  
6 process.

7 (3) An option for access to the database by employers and  
8 consumers through a public portal to assist in identifying  
9 direct care workers with particular knowledge and skills.

10 (4) Demographic and other information to assist in  
11 workforce data collection and analysis.

12 (5) Accurate supply and demand projections regarding the  
13 entirety of the direct care workforce.

14 f. Recommend strategies to provide state-recognized,  
15 competency-based, comprehensive, cross-setting, portable  
16 training approaches, including the prepare to care curriculum  
17 and the mental health first aid curriculum, apprenticeships,  
18 and other existing and new opportunities in order to provide a  
19 recognized career path for, increase professionalism in, and  
20 improve retention by, employers of the direct care workforce.

21 g. Explore state, federal, and other public sources  
22 of funding and review the status of prior investments in  
23 modifications to expand the Iowa direct care worker registry.

24 h. Solicit feedback from the public including through  
25 the lifelong smiles coalition, united ways of Iowa, the  
26 arc of Iowa, the university of Iowa colleges of nursing and  
27 dentistry, Iowa state university, the older Iowans legislature,  
28 the Olmstead consumer task force, the Iowa assisted living  
29 association, home care and nonmedical senior service providers,  
30 the Iowa public health association, the Iowa association of  
31 business and industry, Telligen, inc., labor, local boards  
32 of health, county supervisors, and other persons deemed  
33 appropriate by the workgroup.

34 4. The stakeholder workgroup shall convene no later than  
35 September 1, 2020, and shall submit a phased-in implementation

1 plan and recommendations to the governor and the general  
2 assembly by June 30, 2021.

3 EXPLANATION

4 The inclusion of this explanation does not constitute agreement with  
5 the explanation's substance by the members of the general assembly.

6 This bill relates to development of a plan for  
7 implementation of a centralized direct care workforce database.  
8 The bill requires the department of inspections and appeals  
9 to convene a stakeholder workgroup to develop a plan and  
10 make recommendations for a centralized direct care workforce  
11 database as an expansion of the Iowa direct care worker  
12 registry.

13 The bill specifies the purposes of the database, and the  
14 membership and duties of the workgroup.

15 The bill requires the stakeholder workgroup to convene  
16 no later than September 1, 2020, and to submit a phased-in  
17 implementation plan for the centralized direct care workforce  
18 database, to the governor and the general assembly by June 30,  
19 2021.