

THE LearningEdge

...about strengthening the workforce for a changing society



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Boston University
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The demographic revolution is here...

Seventy percent of baby boomers will use long-term supports and services during their lifetime.

From the Director

In aging and disability

Opportunities Amidst the Challenges of 2017

By Bronwyn Keefe



A new year always brings challenges and opportunities. For those of us in aging and disability, results of the recent election have made clear the extraordinary challenges we face in 2017, while the opportunities may be harder to envision.

Threats to healthcare and long-term supports and services are great. Congress has already taken the first steps to repeal the Affordable Care Act. Proposals that would undermine Social Security, Medicare, and, especially, Medicaid are in line. The health and well-being of millions of Americans, particularly the vulnerable populations we serve, are at risk.

Yes, opportunities do exist. They stem from our contributions over the past eight years to changing the way healthcare is delivered. The emerging system fostered by the Affordable Care Act already has strong roots and will be harder to "repeal" than changes in the way insurance is provided. This issue of *The LearningEdge* highlights examples of innovative workforce training, patient-centered care, care coordination, and interdisciplinary care teams. These and other developments supported by the Affordable Care Act are already making the goals of the ACA—better care for more people at lower cost—a reality. It won't be easy, but at CADER, we appreciate the opportunity to continue and build upon this work together with you. [Read more](#)

Boston University photo of Bronwyn Keefe, acting director of CADER. Scott Miyake Geron, director of CADER, is on sabbatical.

Issues and Views



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[Social Workers: You can make teams work](#)

[What Trump voters like about Affordable Care Act](#)

[Tips that keep caregivers well](#)

Courses in the Pipeline

Watch for

- Legal Issues in Aging and Disability (revised)

Patients and care teams benefit

Investment in Workforce Training Strengthens Interdisciplinary Patient-Centered Care

By Brownyn Keefe

The valuable role that skilled supports and services workers play in healthcare delivery is confirmed once again by results of a just-completed two-year study showing that interdisciplinary person-centered care and positive patient outcomes can be strengthened by effective workforce training.



CADER and Commonwealth Care Alliance (CCA) came together in 2014 to design and implement competency-based, standardized training for CCA's rapidly expanding workforce. At healthcare sites in low-income communities across Massachusetts, CCA uses an innovative enhanced primary-care model to serve clients eligible for both Medicare and Medicaid. Based on their assessment of CCA workers' skills, CADER developed a set of courses tailored to strengthen the clinical staff's capacity for providing person-centered care as part of an interdisciplinary healthcare team.... For skill gains from the training and benefit to patients and workers, [read more](#).

In my opinion: Julie Abramson

Social Workers, You Can Make Teams Work

By Julie S. Abramson



Social workers are in a unique position to contribute to the effectiveness of interdisciplinary teams because of their professional education, contends Julie S. Abramson, a longtime professor of social work and researcher and consultant on teamwork. "But to draw on these skills successfully," she says, "social workers need to relinquish the false dichotomy between the skills they apply with clients and those they apply with colleagues." Here, she tells how.... [Read more](#).

Photo courtesy Julie S. Abramson

A current priority in policy and practice

New CADER Course: Interdisciplinary Care Teams

The urgent need for comprehensive coordinated care for older adults and people with disabilities—now a priority in policy and practice—means that social service and other care professionals increasingly are called upon to work as members of an interdisciplinary care team. This course provides the skills and knowledge that make an effective team member and a well-functioning team. Real-world examples of how teams solve problems and resolve conflicts as they develop and implement care plans are presented throughout the course. Visit the [CADER website](#) for more information or [to sign up](#) (use code **ENEWS2017** for a 10 percent discount). [Also check out the new Interdisciplinary Teams and Healthcare Certificate program](#).

Notable News and Resources

Kaiser Health Tracking Poll: Trump Voters Like Many Provisions of Affordable Care Act

Though repeal of the Affordable Care Act is already under way, it could prove to be complicated. According to the [latest Kaiser Health Tracking Poll](#), conducted a few days after the November 8 election, many provisions of the law are quite popular with voters—including large numbers who reported having voted for Donald Trump. The [poll found](#) that **a majority of Trump voters have a favorable opinion of the following elements of the ACA:**

Get Your Own LearningEdge!

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[Past issues](#)



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- Allows young adults to stay on their parents' insurance plans until age 26 (**83% of Trump voters favor**)
- Eliminates out-of-pocket costs for many preventive services (**75%**)
- Gives states the option to expand their existing Medicaid program to cover more low-income, uninsured adults (**66%**)...

For the full list of the ACA elements that Trump voters favor and a look at what could happen if voters are reluctant to give up the benefits they like, [read more](#).

New infographic from NIA

Tips for Caregiver Health and Well-Being

Workers who provide supports and services to older adults and people with disabilities know that teaming up with and supporting clients' family caregivers frequently comes with the job. A new resource from the National Institute on Aging is now available to encourage caregivers to attend to their own well-being as an important step in taking care of another.

[Make Yourself a Priority, Too: Tips for Caregivers](#) is a concise and appealing infographic that presents simple actions for better health and well-being. The infographic can be posted on Twitter or Facebook or used as a hand-out or as part of an e-mail to clients and families.... [Read more](#)



Courses and Certificate Programs

High-Quality Online Training Available for The Aging and Disability Workforce

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Resources

Healthcare.Gov

The official site of the Affordable Care Act (ACA), [Healthcare.Gov](#) offers a sign-up tool and links to various resources, including info about key features of the ACA, and regulation and policy—and in more than 10 languages. The website also provides info for the media; researchers; navigators, assisters and partners; and agents and brokers. You can also find a link to the blog.

Further Reading

States That Leaned In on the Affordable Care Act Have Much to Lose by Sabrina Corlette, Emily Curran, and Justin Giovannelli, *To The Point*, The Commonwealth Fund (New York and Washington, D.C.: January 13, 2017). Click [here](#) for the online article.

From Past Issues

DHHS Launches Information Site, Funds Health Centers to Help Consumers Choose Affordable Care (July–August 2013) Click [here](#) to read



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From the Director

In aging and disability **Looking for Opportunities Amidst the Challenges of 2017**

By Bronwyn Keefe



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Threats to healthcare and long-term supports and services are great. Congress has already taken the first steps to repeal the Affordable Care Act. Proposals that would undermine Social Security, Medicare, and, especially, Medicaid are in line. The health and well-being of millions of Americans, particularly the vulnerable populations we serve, are at risk.

Yes, opportunities do exist. They stem from our contributions over the past eight years to changing the way healthcare is delivered. The emerging system already has strong roots and will be harder to "repeal" than changes to provision of health insurance. This issue of *The LearningEdge* highlights examples of innovative workforce training, patient-centered care, care coordination, and effective interdisciplinary care teams. These and other developments supported by the Affordable Care Act are already making the goals of the ACA—better care for more people at lower cost—a reality. It won't be easy, but at CADER, we appreciate the opportunity to continue and build upon this work together with you.

Bronwyn Keefe, Ph.D., is acting director of CADER and research assistant professor, School of Social Work, Boston University. Scott Miyake Geron, director of CADER, is on sabbatical.

Boston University photo of Bronwyn Keefe

Courses and Certificate Programs

High-Quality Online Training Available for the Aging and Disability Workforce

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Programs Available

CADER online training programs are more flexible than ever by offering learners the choice of taking individual course(s) or certificate programs. Learners that complete individual online courses have the option to enroll in a certificate program at a later time and receive credit for completed coursework. Each certificate program will take about 19 to 21 hours to complete. The recently updated certificate programs available are:

- ADRC Options Counseling Certificate
- Behavioral Health in Aging Certificate Program
- Care Management Certificate Program

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- Foundations in Aging and Disabilities Certificate Program
- Interdisciplinary Teams and Healthcare Certificate
- Residential and Community Living Certificate Program
- Supervision and Leadership Certificate Program
- Values and Ethics in Aging and Disabilities Certificate

Interested in taking individual courses? Each online course will take only 2 to 5 hours to complete. A list of online courses and certificate descriptions are posted on the [CADER Website](#).

To learn more about CADER training programs, please contact CADER (cader@bu.edu; 617-358-2626).

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Further Reading

Strengthening Patient-Centered Care Through Health Care Workforce Training by Bronwyn Keefe and Kelsi Carolan. The report will be available in March. For more information, contact Bronwyn Keefe, bronwyn@bu.edu.

From Past Issues

How Affordable Care Goals Become Reality: Massachusetts Healthcare Workforce Transformation Project by Scott Miyake Geron (Spring 2014) Click [here](#) to read

Resources

Commonwealth Care Alliance

The Commonwealth Care Alliance (CCA) is a not-for-profit, consumer-governed organization. Via a prepaid care-delivery system for Medicare and Medicaid beneficiaries with complex medical needs, CCA provides enhanced primary care and care coordination through multidisciplinary clinical teams, coverage from early intervention to urgent care to long-term services and support, and more. Visit the [CCA website](#) for details.

Health Care Workforce Transformation Fund

The Health Care Workforce Transformation Fund (HCWTF), established in 2012 as part of Massachusetts' healthcare cost containment legislation, supports a wide spectrum of employee training within the healthcare industry to address the changing landscape of the healthcare system and delivery of services. It is administered by

Issues and Views

Investment in Workforce Training Strengthens Interdisciplinary Patient-Centered Care

By Bronwyn Keefe

A new contribution to evidence of the invaluable role of skilled supports and services workers in healthcare delivery comes from results of a just-completed two-year study showing that interdisciplinary person-centered care and positive outcomes can indeed be strengthened by effective workforce training.



CADER (the Center for Aging & Disability Education & Research at Boston University) and Commonwealth Care Alliance (CCA) came together in 2014 to design and implement competency-based, standardized training for CCA's rapidly expanding interdisciplinary workforce at healthcare sites throughout Massachusetts. CADER conducted an assessment of CCA workers' skills and then developed a set of courses tailored to strengthen the clinical staff's capacity for providing person-centered care as part of an interdisciplinary healthcare team. The approximately 200 workers who completed the program over the past two years showed significant gains in targeted skills. In addition, compared to baseline rates, CCA experienced fewer grievances regarding care-management practices, and patient buy-in to care plans increased significantly. There were other quality and process interventions that took place during this same time period, so we should caution against full attribution to the training intervention.

CCA is a nationally recognized, not-for-profit organization that uses an innovative enhanced primary-care model in low-income communities to serve clients eligible for both Medicare and Medicaid. CCA's programs are based on care coordination and interdisciplinary teams, including nurse practitioners, social workers, and community health workers, that support primary care clinicians. The CCA-CADER partnership was the result of funding from the state's Healthcare Workforce Transformation Fund from the Commonwealth Corporation. The goal was to help agencies assess the skills of their workforce and the adequacy of current training programs and then develop and deliver any new training needed.

The new CCA-CADER training program included two existing courses from CADER's online catalog and a third online course developed to meet CCA's specific training needs, as highlighted in the assessment. The courses were Understanding Consumer Control, Person-Centered Planning, and Self-Direction; Assessment with Older Adults and Persons with Disabilities; and Interdisciplinary Care Teams. In addition to completing the three courses, CCA participants also attended in-person training sessions and engaged in pre- and post-course skills assessments.

Results. After two years, the program showed both quantitative and qualitative gains. For example, across all competencies, increases in mean scores for course participants from pre-test to post-test for each course completed were statistically significant. Participants expressed appreciation for the CADER online courses and reported that they were highly applicable to their jobs and should be required for new staff and future team leaders. CCA staff have observed improvements in team interaction and communication. Workers have expressed feeling more empowered when advocating for clients. For a more specific discussion of results, see the recent [CADER report](#), which will be available in March.

Bronwyn Keefe, Ph.D., M.S.W., M.P.H., is acting director of CADER and research assistant professor, School of Social Work, Boston University.

the Commonwealth Corporation.
Visit the [HCWTF webpage](#) for more
info.



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Resources

Tip Sheets

Following are two sets of tips developed by Julie Abramson that can help in your work within an interdisciplinary care team:

[Conflict Resolution Strategies for Teams and Other Collaborations](#)

also includes tips on consensus building and conflict resolution strategies, and ground rules for discussions with potential for conflict.

[Interviewing Other Professionals About Their Professional Socialization](#)

lists questions that can serve as a guide to understanding for greater team effectiveness.

Further Reading

Understanding Collaboration Between Social Workers and Physicians: Application of a Typology by Julie S. Abramson and Terry Mizrahi; *Social Work in Health Care*, vol. 37, no. 2 (2003).
[Download a PDF of this article](#)

From Past Issues

A Geriatrician's View: Interdisciplinary Teams Essential to Care of Elders (September–October 2011) Click [here](#) to read



Center for Aging & Disability

Issues and Views

In my opinion: Julie Abramson **Social Workers, You Can Make Teams Work**

By Julie S. Abramson



My social work training in working with groups is the source for my abiding interest in helping teams to improve their functioning. Like most of my fellow social workers, I have sat through many team meetings where team dysfunction has undermined professional capacity to provide optimum care. Interdisciplinary care teams, which are often of particular value, can also be particularly challenging.

When faced with this problem, I first look to change the things that are potentially under my control rather than getting frustrated with those that aren't. As social workers, we are trained in group processes, and a team is of course a group. Therefore, we already have the skills to help teams work effectively. Yet, so often, we wait for the team leader, able or not, to take this responsibility.

I feel strongly that making teams work is your job, even if not necessarily your official role. Good team function is the responsibility of all team members, but you are likely to be better prepared than most to assist your team. Yes, I am talking about applying your social work skills to collaboration with your colleagues.

Among the most powerful of your skills is the ability to remain nonjudgmental and listen with an open mind to others' points of view. We do that so effectively with clients. Yet social workers and other professionals are often quite judgmental toward their colleagues. Such a stance, which almost always undermines collaborative outcomes, often arises from interprofessional differences that are poorly understood. Challenge yourself to understand the socialization of other professionals; I guarantee that you will begin to understand some of their "unacceptable" positions. In so doing, you will enable yourself to take their values and concerns into consideration when offering your ideas.

Finally, you must accept the idea that strategic and thoughtful interventions are needed in your interactions with colleagues. No, it is not realistic to expect teams to work just because everyone "should" act professionally. Application of your skills in assessing group dynamics; monitoring process; creating a climate of openness, trust, and group cohesion; dealing with conflict; and developing positive, client-centered norms is critical at all stages of teamwork. Don't hold back.

Julie S. Abramson, M.S.W., Ph.D., is an organization consultant who has designed interventions to "make teams work." She is also associate professor emerita, School of Social Welfare, State University of New York at Albany.

This article is reprinted from the September–October 2011 issue.

Photo courtesy Julie S. Abramson

A current priority in policy and practice
New CADER Course: Interdisciplinary Care Teams

The urgent need for comprehensive, coordinated care for older adults and people with disabilities—now

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a priority in policy and practice—means that social service and other care professionals increasingly are called upon to work as members of an interdisciplinary care team. This course provides the skills and knowledge that make an effective team member and a well-functioning team. Real-world examples of how teams solve problems and resolve conflicts as they develop and implement care plans are presented throughout the course. Visit the [CADER website](#) for more information or [to sign up](#) (use code **ENEWS2017** for a 10 percent discount). [Also check out the new Interdisciplinary Teams and Healthcare Certificate program.](#)

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Further Reading

**Kaiser Health Tracking Poll:
November 2016** by Ashley
Kirzinger, Elise Sugarman, and
Mollyann Brodie (The Henry J.
Kaiser Family Foundation,
December 1, 2016). Click [here](#) to
read the online version or to
download the 18-page PDF.

**Why It Will Be Hard to Repeal
Obamacare** by Haeyoun Park and
Troy Griggs; *The New York Times*
(December 3, 2016). Click [here](#) to
read the article.

Resources

National Institute on Aging

The [health and aging section](#) of the
NIA website offers resources on
caregiving, Alzheimer's disease,
end of life, and healthy aging and
longevity, among others. Also
featured is a variety of publications
in PDF that can be downloaded.
Visit the [webpage](#) for more info.

Notable News and Resources

Kaiser Health Tracking Poll: Trump Voters Like Many Provisions of Affordable Care Act

While the effort to repeal the Affordable Care Act is already under way, repeal could prove to be complicated. According to the [latest Kaiser Health Tracking Poll](#), conducted a few days after the November 8 election, many provisions of the law are quite popular with voters—including large numbers who reported having voted for Trump. The [poll found](#) that **a majority of Trump voters have a favorable opinion of the following elements of the ACA:**

- Allows young adults to stay on their parents' insurance plans until age 26 (**83% of Trump voters favor**)
- Eliminates out-of-pocket costs for many preventive services (**75%**)
- Creates health insurance exchanges where small business and people can shop for insurance and compare prices and benefits (**72%**)
- Closes the Medicare prescription drug gap (**71%**)
- Provides financial help to low- and moderate-income Americans to help them purchase coverage (**68%**)
- Gives states the option to expand their existing Medicaid program to cover more low-income, uninsured adults (**66%**)
- Increases Medicare payroll tax on earnings for upper-income Americans (**62%**)
- Prohibits insurance companies from denying coverage because of a person's medical history (**60%**)

[Source: Kaiser Health Tracking Poll, November 2016, [Figure 12](#)]

What if voters are reluctant to give up the benefits they like? An obvious solution for Republican lawmakers might appear to be a partial repeal of the ACA, retaining some of the most popular features. The Kaiser poll did find "a slight uptick" in the number of Americans who want Congress to scale back the law, rather than repeal it. But as [health policy experts](#) have pointed out, the various provisions of the ACA are interconnected; keeping some and jettisoning others would be extremely difficult and could destabilize the insurance market and the healthcare system.

New Infographic from NIA Tips for Caregiver Health and Well-Being



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[Make Yourself a Priority, Too: Tips for Caregivers](#) is a concise and appealing infographic that presents simple actions for better health and well-being. The infographic can be posted on Twitter or Facebook or used as a hand-out or as part of an e-mail to clients and families.

Some 15 million family members and others currently provide unpaid care to an older adult. Caregivers who provide substantial care are more likely than non-caregivers to experience behavioral and physical health problems, the NIA reports. Small steps that keep caregivers healthy make a positive difference for everyone.



Sample Tweet

Read and share this #infographic from the National Institute on Aging—quick facts and five tips for #caregivers: <http://bit.ly/2eJ6cLl>

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