

**Nonprofit Employment Data Work Group
Recommendations for Consideration by
The Governor's Cabinet on Nonprofit Health and Human Services
October 2014**

Nonprofit Employment Data Work Group: The Nonprofit Employment Data Work Group was comprised of a cross-section of members from state agencies, nonprofit organizations and the Governor's Cabinet on Nonprofit Health and Human Services.

Established by the Governor's Cabinet on Nonprofit Health and Human Services, the charge of the Work Group was to:

1. Work with the Department of Labor (DOL), Office of Policy and Management (OPM), and relevant state agencies to collect data on the Purchase of Service (POS) and the Judicial Branch Court Support Services Division's (CSSD) contracted workforce in the nonprofit sector.
2. Assess and report on a process to develop and implement a statewide data system that captures nonprofit sector workforce needs and trends.
3. Assess the impact of wage/pay equity, specifically as it relates to the predominately female workforce employed by nonprofit organizations, building on the work of the Gender Wage Gap Task Force.
4. Coordinate linkages between the Cabinet and other venues that relate to the nonprofit workforce, including:
 - a. The State Innovation Model (SIM) and its Work Group Task Force, and
 - b. The Veteran's Cabinet
5. Provide recommendations to the Cabinet about the current workforce and areas for future enhancement.

Given the charge, the Nonprofit Employment Data Work Group adopted the following mission:

To identify current and trend data that will provide nonprofit organizations with information they can use to strengthen their organization as well as inform public policy to increase viability and sustainability.

In addition, the Work Group identified the following outcomes as indicators of success in achieving its charge:

- Compile data to support decision-making and policy recommendations to develop the workforce to benefit the state and local economy.
- Identify core competencies that can be used to make recommendations for career pathways and to create a model that can be used by any organization to support staff development.
- Identify demographic information on this workforce.
- Change the philosophy on how nonprofit organizations are perceived by reimagining and rebranding.

The Work Group met monthly April through August 2014. It was quickly determined that two subcommittees were needed to adequately and efficiently undertake the full work group's charge. As a result, the (1) Core Competencies Sub-committee and (2) Demographic Information Sub-committee were formed. The sub-committees met regularly and reported updates to the full Work Group at monthly meetings. To achieve its charge, the Nonprofit Employment Data Work Group gathered data from the U.S. Department of Labor, the CT Department of Labor, the Permanent Commission on the Status of Women, and O*Net Online.

Through the Sub-committee's research, the following challenges became evident:

- Costs associated with pursuing an education in health and human services, including tuition, fees and books, are prohibitive.
- Costs associated with child care and transportation can deter residents from pursuing health and human service education and jobs.
- Private agencies with POS contracts are at a disadvantage to recruit, train and retain qualified employees at all levels.
- Increased demands placed on the nonprofit work force, such as implementing evidence-based practices, increased specialization requirements, meeting the need with limited resources, and adhering to technological changes and mandates.

Challenge I: Costs associated with pursuing an education in health and human services, including tuition, fees and books, are prohibitive.

In researching educational opportunities for residents, it was determined that Connecticut's 12 community colleges offer opportunities for direct care staff to develop and enhance their qualifications to work in human services and early childhood education. Many of these colleges offer both certificate and Associate Degree programs.

While financial aid is available in many cases, the costs to pursue education associated with tuition, fees and books are prohibitive. According to information provided by the Connecticut Board of Regents of Higher Education, the cost of tuition for a Connecticut resident for Fall 2014 for one (1) credit is \$220.00 and three (3) credits is \$518.00. Charter Oak Community College offers on-line degree programs (including a certificate program for "disability specialists"), which provides tremendous flexibility to those who are in the workforce, however, the current cost per credit is \$258.00. Typical certificate programs require approximately 30 credit hours, Associate Degree programs require 60 - 63 credit hours, and Bachelor Degree programs require 124 -128 credits hours. In short, the cost for tuition, fees and books for a full-time CT resident at a public community college is approximately \$4,000 per year.

Challenge II: Costs associated with child care and transportation can deter residents from pursuing health and human service education and jobs.

It was also determined that in addition to costs associated with tuition, fees and books, costs associated with child care and transportation also deters residents from pursuing health and human service education and jobs. Some Connecticut colleges have implemented programs to overcome this obstacle by offering assistance with transportation costs and/or on-site child care and early childhood learning centers, which are available to students at either full or reduced cost. These programs are generally not free and continue to strain the financial resources of some CT residents who are already struggling to make ends meet.

The good news is all of the community colleges researched offer some form of career counseling and placement services, and many offer unpaid and paid internship opportunities within the health and human service field. In addition, students graduating from these programs as well as direct care professionals already working in the field can take advantage of the Connecticut Department of Labor's employment placement program.

Furthermore, there are five (5) regional Workforce Investment Boards ("WIBs") throughout the State. WIBs fund career programs through partnerships with local colleges and vocational programs, such as Certified Nurse's Aides, Social Services Aides, and Disability Specialists. WIBs also manage a consortium of support services to eligible students, such as child care and transportation support.

According to the State Department of Labor website, WIBs (1) assess regional employment and training needs and priorities, and (2) conduct planning for and coordinate programs that address obstacles to education. In addition, WIBs create annual employment and training plans, and review regional grant proposals and plans submitted to state agencies by other organizations to assure that all regional planning is consistent with an overall statewide blueprint for workforce development.

While WIBs in conjunction with the Connecticut Department of Labor, other State agencies and private organizations form a statewide partnership to achieve comprehensive workforce development in the State, they cannot overcome all of the obstacles associated with residents interested in pursuing health and human service education and jobs. Furthermore, if a student is not eligible for support services provided by WIBs, the high-costs associated with tuition, school fees, books, child care and transportation can result in barriers that cannot be overcome.

For those working in the field of health and human services who already have a four-year degree and wish to climb the career ladder, the University of Connecticut offers a graduate level on-line certificate program in nonprofit management. This twelve (12) credit program teaches executive leadership skills such as leading effective organizations, strategic planning, executive and board relationships, and managing financial data. The cost is \$750 for one (1) credit or \$2,250 for a three (3) credit course. Participation in the full program costs \$9,000.

Challenge III: Private agencies with POS contracts are at a disadvantage to recruit, train and retain qualified employees at all levels.

Through research compilation, the Work Group determined that if CT residents do overcome the obstacles and successfully pursue an education in the health and human service field, the nonprofit sector is at a disadvantage in recruiting, training and retaining qualified employees at all levels. This, in part, is due to limited resources that impact the ability to pay living wages and offer competitive benefit packages as compared to the private sector.

For instance, nonprofit agencies with POS contracts face several challenges with respect to recruiting and retaining qualified employees at all levels of the corporate hierarchy. The inability of the State of Connecticut to provide Cost of Living Allowance (COLAs) or any overall increase in rates has prevented many organizations from providing wage increases to employees for the past seven years. For most employees working in this sector, this means that their hourly rates have not kept pace with the cost of living and every increase in employer-provided medical insurance (if available and affordable) as well as increases in household and transportation costs, effectively reduces their annual income.

When opportunities arise, employees in the private sector frequently leave their positions to work for state agencies, which offer higher pay scales for comparable work. State employment also offers comparatively negligible eligibility requirements for medical and other insurances as well as much lower employee out-of-pocket costs due to participation in the state employee insurance plan. The inequity creates a revolving door whereby the State benefits from the investments private agencies have made in their employees while the private agencies have to incur additional recruiting costs.

Wage compression is often a significant barrier to promoting from the direct care workforce to managerial positions. Hourly employees working overtime hours can frequently earn as much, if not more, than a front-line manager without the responsibilities of the upper-management position. This then forces employers to recruit externally causing them to pay market rates that are higher than the going wage rates for current employees. In short, the inability of many private agencies to pay competitive wages adds to increased turnover, poor morale and compensation systems that may cause extensive misalignment among comparable positions within the same organization.

Changes in the way many POS services are and will be delivered in the not-too-distant future present additional challenges. Electronic health records are becoming the industry standard, yet many employees lack the keyboarding and technical skills necessary to enter data into such records. Likewise, while electronic health records improve billing efficiencies, employees may lack proficiency in the English language, so that their narratives do not adequately explain the services that were rendered.

There is also considerable movement towards providing more person-centered services in homes or apartments owned or rented by the individual receiving services. This presents enormous challenges for employers from a supervisory perspective, but also places demands on staff to be able to work independently, exercise sound judgment and think creatively. Private providers will need to offer significant professional development to prepare staff to work in such an environment with little to no additional resources from the State to cover such expenditures.

These challenges, along with the demographic diversity of the direct care workforce, highlight the need for private sector human services agencies to truly invest in their workforce by identifying core competencies necessary to work within the sector, designing professional development opportunities and creating meaningful career tracks for employees.

The following graph showcases the top eight (8) health and human service positions as determined by the number of people employed in the various sectors in Connecticut and their corresponding average hourly rate and average annual rate:

Table I: Health and Human Service Positions and Corresponding Salary in Connecticut

Occupation Title/Category	Representative Sample	Average Hourly Rate	Average Annual Income
Personal Care Aides	13,150	\$11.85	\$24,666
Community & Social Services Occupations	8,530	\$19.07	\$39,667
Social & Human Service Assistants	3,200	\$15.94	\$33,152
Home Health Aides	2,330	\$13.82	\$28,741
Social & Community Service Managers	1,230	\$29.08	\$60,484
Child, Family & School Social Workers	1,210	\$22.16	\$46,103
Substance Abuse & Behavioral Disorder Counselors	960	\$21.82	\$45,387
Chief Executives (Includes chief executive employed by hospitals)	20	\$93.64	\$194,788

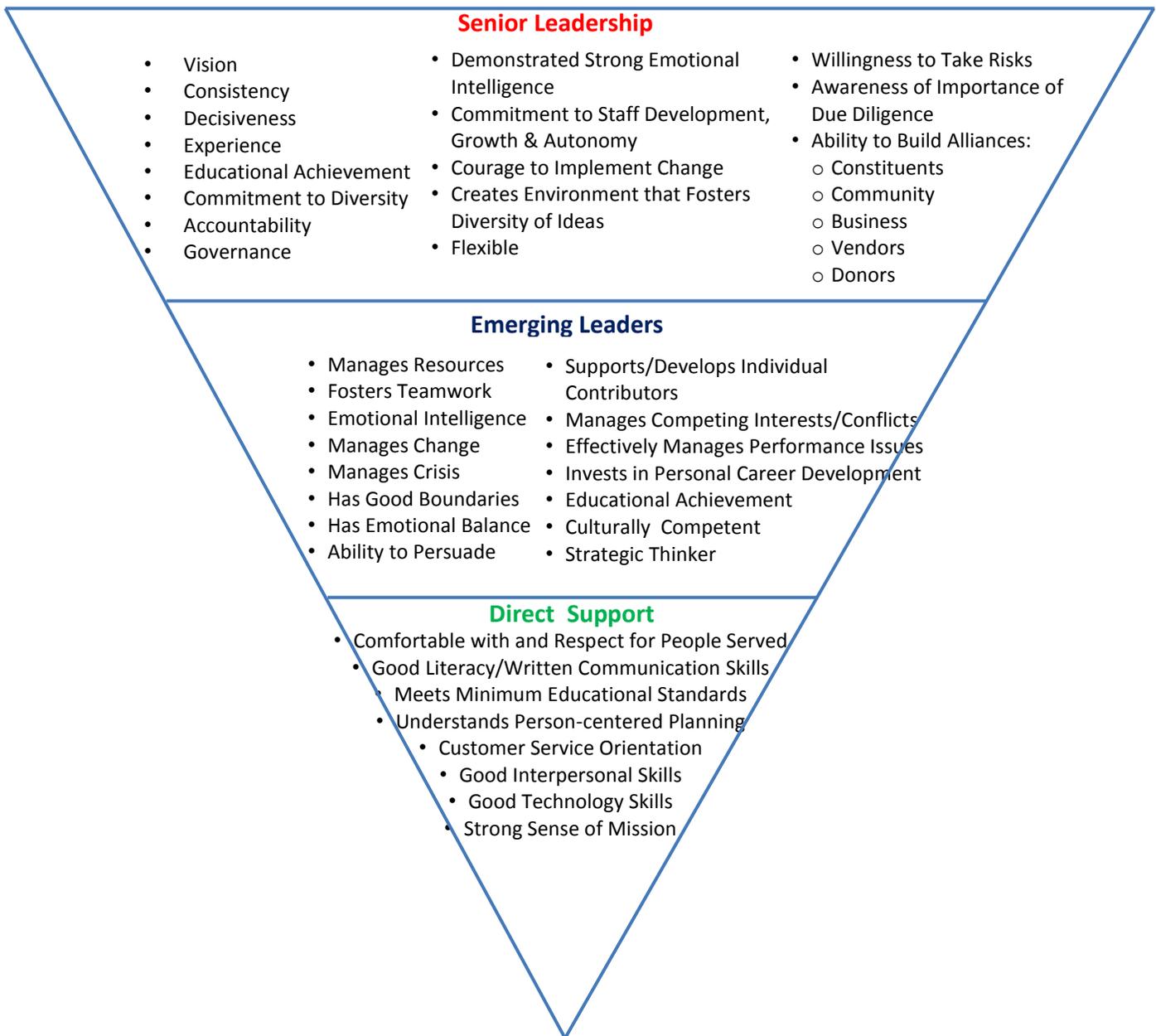
(Source: U.S. Department of Labor, Bureau of Labor Statistics. “May 2013 State Occupational Employment and Wage Estimates, Connecticut.” Accessed at www.bls.gov/oes/current/oes_ct.htm#00-0000 in June 2014.)

With the majority of these positions making less than \$50,000 a year, it is evident to the Work Group that there is a need to research, identify and implement strategies that enable nonprofit organizations to recruit, train and retain a qualified workforce, which includes paying a competitive living wage. This would not only strengthen the overall nonprofit and the services it provides but

also CT employees and communities. By paying a living wage, employees can invest in local businesses, including daycare and transportation costs, and partake in benefits such as health insurance, which reduces overall healthcare costs and the burden on the most expensive forms of healthcare, including emergency rooms.

Furthermore, as nonprofit organizations evaluate their current workforce and the types of employees needed for success, the Work Group realized that there is a lack of core competency information that could be easily accessed by nonprofit organizations to assess and recruit employees. As a result, the Work Group created the following Core Competencies Pyramid, which can be utilized by nonprofit organizations to assess, strengthen and recruit employees:

Table II: Core Competencies Pyramid*



* The Core Competencies Pyramid is inverted to showcase the breadth of competencies needed to progress in the work force and does not represent the number of people working in each of the sectors.

The Work Group also utilized information available on O*Net Online to create general definitions for health and human positions. These definitions can be used by nonprofit organizations to better define the roles within their organizations, assist in creating job descriptions, and assess roles needing to be filled.

Table III: Health and Human Service Position Definitions

Health & Human Service Position	General Definition
Home Health Aides	Provide routine, personal healthcare, such as bathing, dressing, or grooming, to elderly, convalescent, or disabled persons in the home of patients or in a residential care facility.
Social and Community Service Managers	Plan, organize, or coordinate the activities of a social service program or community outreach organization. Oversee the program or organization's budget and policies regarding participant involvement, program requirements, and benefits. Work may involve directing social workers, counselors, or probation officers.
Child, Family and School Social Workers	Provide social services and assistance to improve the social and psychological functioning of children and their families and to maximize the family well-being and the academic functioning of children. May assist single parents, arrange adoptions, and find foster homes for abandoned or abused children. In schools, they address such problems as teenage pregnancy, misbehavior, and truancy. May also advise teachers on how to deal with problem children.
Substance Abuse and Behavioral Disorder Counselors	Counsel and advise individuals with alcohol, tobacco, drug, or other problems, such as gambling and eating disorders. May counsel individuals, families, or groups or engage in prevention programs.
Executive Leadership	Determine and formulate policies. Provide the overall direction of companies or private and public sector organizations within the guidelines set up by a board of directors or similar governing body. Plan, direct, or coordinate operational activities at the highest level of management with the help of subordinate executives and staff managers.

(Source: U.S. Department of Labor, Employment and Training Administration. O*Net Online. Accessed at www.onetonline.org in June 2014.)

Finally, the Work Group discovered that there is not a standardized process for State agencies to collect and track evaluation data and standardized benchmarks from nonprofit organizations with whom they have service contracts. As a result, the Work Group recommends the development of a Human Service Data Collection Database enabling nonprofit organizations to input service-related data, which state agencies can use to compare similar health and human service programs across the state. Such a system could track elements such as:

- Number of clients served,
- Demographics of clients served,
- Services offered through the state contracts,
- Utilization of services offered, and
- Measurable impacts on clients served.

The database system would streamline reporting for the nonprofit while creating a standardized evaluation process for state agencies resulting in the ability to better assess and compare state-funded services.

Recommendations

In conclusion, as a result of the Work Group's charge, research and discussions, the Nonprofit Employment Data Work Group presents the following recommendations to the Governor's Cabinet on Nonprofit Health & Human Services:

1. Identify and implement opportunities for nonprofit organizations and others to partner with community colleges that will allow for affordable educational opportunities and career paths, including:
 - Certificate Programs
 - Degree Programs
 - Continuing Education Trainings
 - Internships
2. Identify and implement opportunities to create loan forgiveness programs for students pursuing degrees in the health and human service field.
3. Implement strategies to make child care and transportation more affordable for residents enabling them to pursue education and employment.
4. Implement strategies across the nonprofit field to recruit, train and retain staff in health and human service positions, including:
 - Paying a living wage,
 - Providing training and supports necessary for employees to move and grow along a career path,
 - Offering benefits to retain employees, including health care, retirement plans and life insurance,
 - Offering ongoing educational opportunities to promote advancement in the industry.
5. Offer state-planned training opportunities to nonprofit organizations to provide leadership learning to the private sector at little or no additional costs.
6. Develop and implement a standardized human services data collection database for nonprofit organizations that draws from existing or enhanced contract information.

As research continues to be gathered to address these recommendations, the Nonprofit Employment Data Work Group recommends further investigating information available through the U.S. Department of Labor's Bureau of Labor Statistics, which developed research data related for employment, wages and establishment figures related to nonprofit institutions. This information can be accessed at <http://www.bls.gov/bdm/nonprofits/nonprofits.htm>.

Nonprofit Employment Data Work Group Resources

CT Department of Labor

O*Net Online, sponsored by the U.S. Department of Labor

Permanent Commission on the Status of Women

U.S. Department of Labor, Bureau of Labor Statistics

U.S. Department of Labor, Employment and Training Administration

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