

# **Direct Support Professionals (DSP) Advisory Committee Meeting**

**May 20, 2024**

2:00 – 3:00 pm

**Tina Lanier Barrett, MA, LPA, HSP-PA**

Division of Mental Health, Developmental Disabilities, and  
Substance Use Services

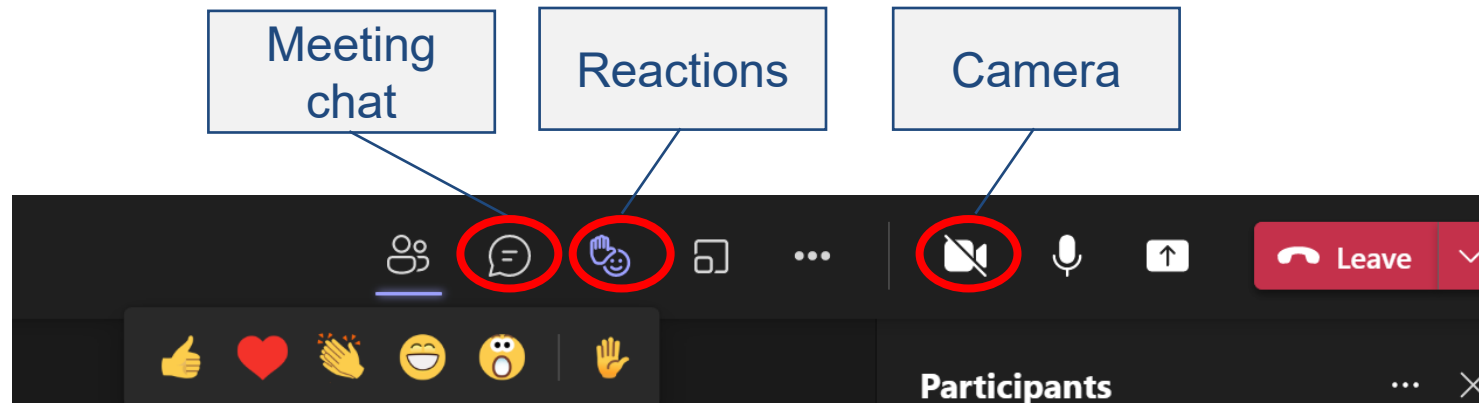
# Agenda

- DMH/DD/SUS Community Collaboration Model
- Mental Health Awareness Month
- DSP Survey Findings and Discussion
- DSP Focus Groups Planning
- DSP Workplan Question and Answer (Q&A) Discussion
- Updates on Other DSP Initiatives

**As a reminder, this meeting includes a diverse group of stakeholders: DSPs, providers, plans (LME/MCOs, Standard Plans, Tailored Plans), community partners, consumer and family members, officials from related state agencies/DHHS divisions and DMH/DD/SUS officials.**

# Housekeeping

We encourage those who are able to turn on cameras, use reactions in Teams to share opinions on topics discussed, and share questions in the chat.





- May Mental Health Awareness Month (MHAM) intent is to increase awareness about the vital role mental health plays in our overall health and well-being and provide resources and information to support individuals and communities who may need mental health support.
- We thank our Crisis System Advisory Committee members for your contribution to this group and your efforts to support mental well-being.
- Please share your MHAM resources, activities, or events in the chat!

# Mental Health Awareness Month

MHAM Resources:

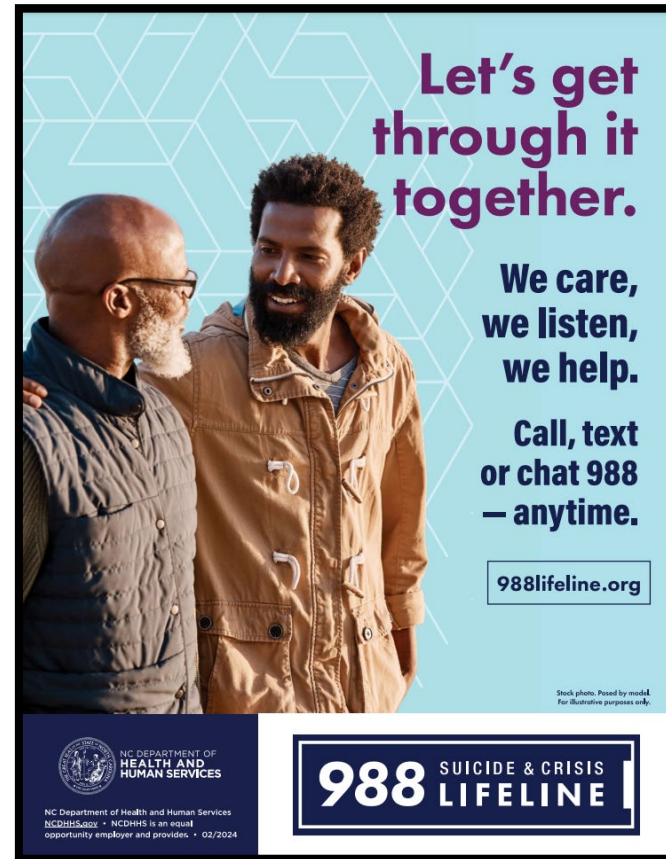
[DHHS 988 Site with Toolkit](#)

[Mental Health America Toolkit](#)

[SAMHSA Toolkit](#)

[988 Toolkit](#)

[NAMI North Carolina](#)



**Let's get through it together.**

**We care, we listen, we help.**

**Call, text or chat 988 – anytime.**

988lifeline.org

**988 SUICIDE & CRISIS LIFELINE**

Stock photo. Posing by model. For illustrative purposes only.

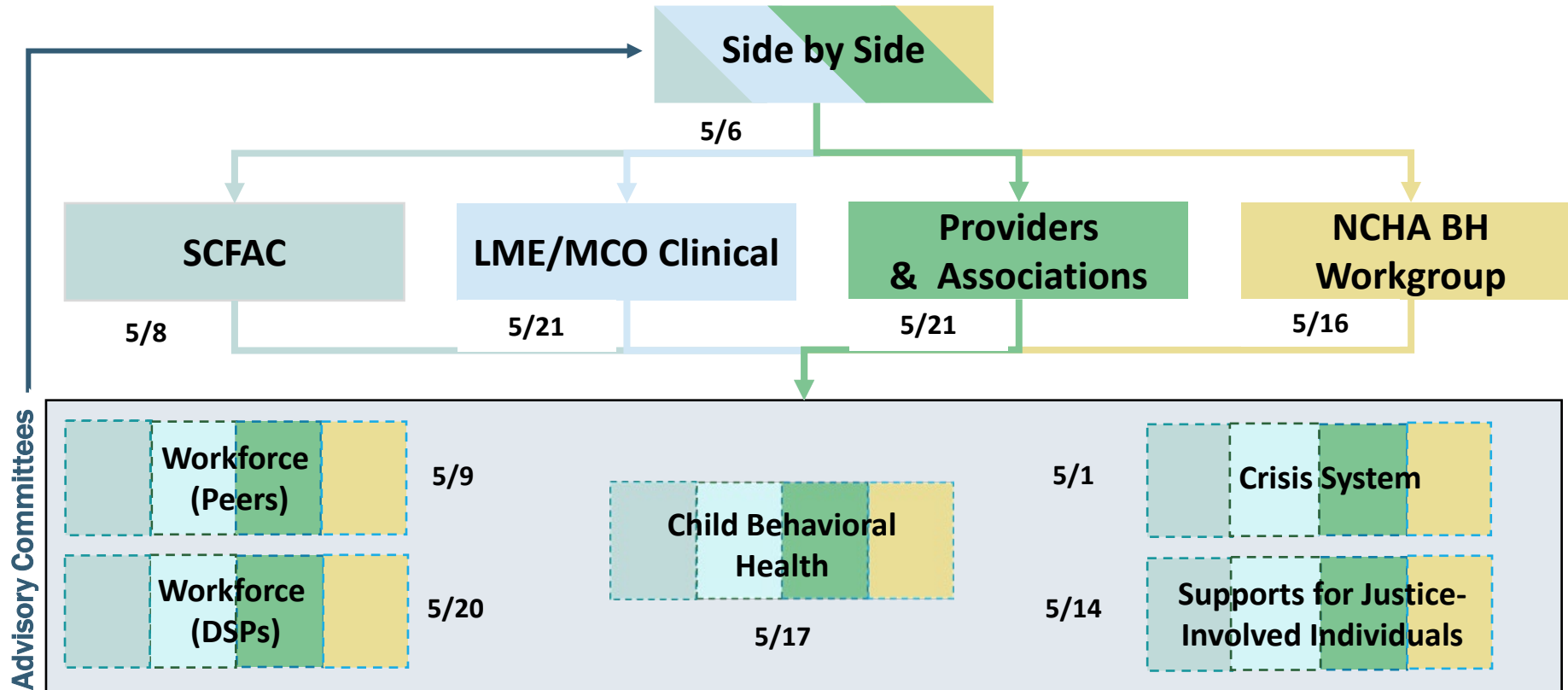
NC DEPARTMENT OF HEALTH AND HUMAN SERVICES  
NC Department of Health and Human Services  
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# **DMH/DD/SUS Community Collaboration Model**



# May Community Collaboration

Topic: Inclusion Connects



# **DSP Survey Results Review and Discussion**

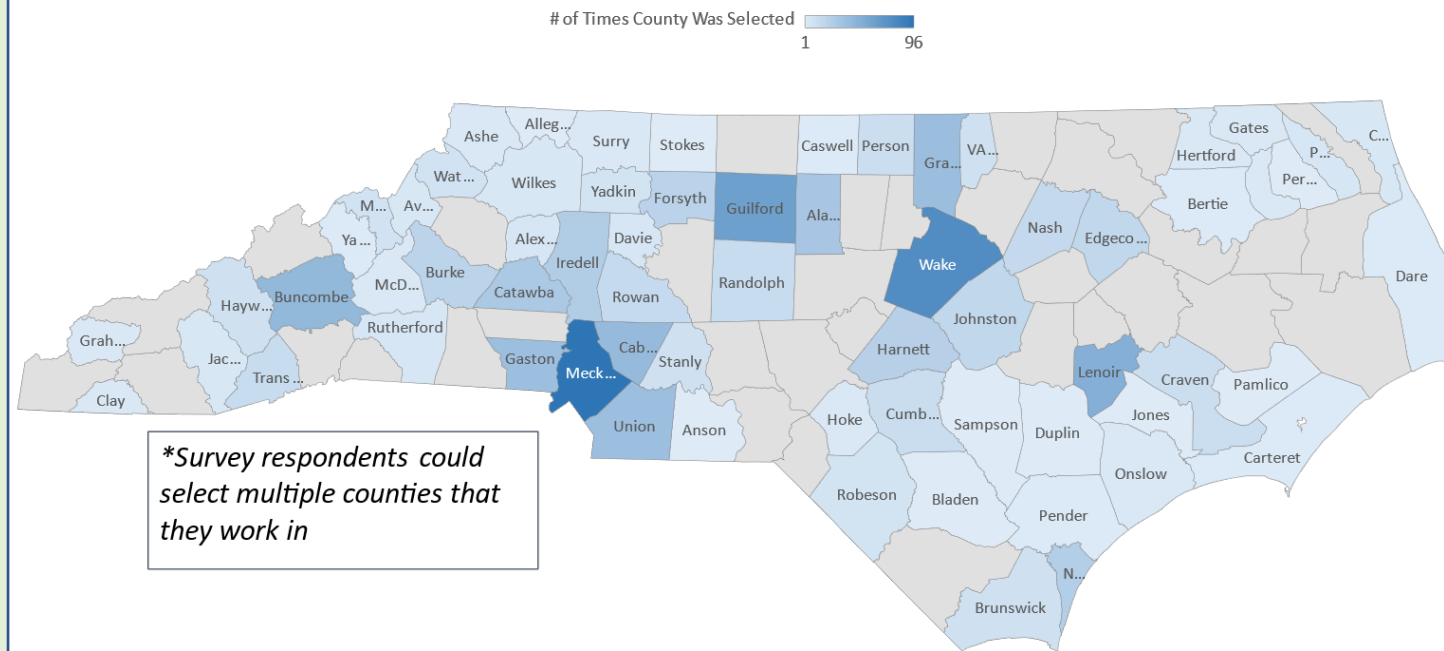


# 2024 DSP Survey: Background

The goal of the 2024 DSP Survey was to gather information directly from DSPs to inform future investments that will improve DSP job quality. DMH/DD/SUS will use the feedback from the DSP survey to help inform the design of workforce initiatives that are aimed at improving training, retention, and overall job satisfaction.

- The DSP survey asked questions about DSP workforce **demographics, the quality of their training**, and what DSPs are **looking for** from their work.
- The DSP Survey was active for three weeks in April.
- DMH/DD/SUS distributed the survey through the following networks:
  - **LME/MCOs**
  - **Provider agencies**
  - **DSP workgroup Advisory Committee**
  - **DMH/DD/SUS community partner's email listserv**
  - **Social media**
- **The DSP survey generated over 1,200 responses!**
  - However, it is likely that some of the survey responses were from individuals in non-DSP roles (e.g., provider agency management, care managers).

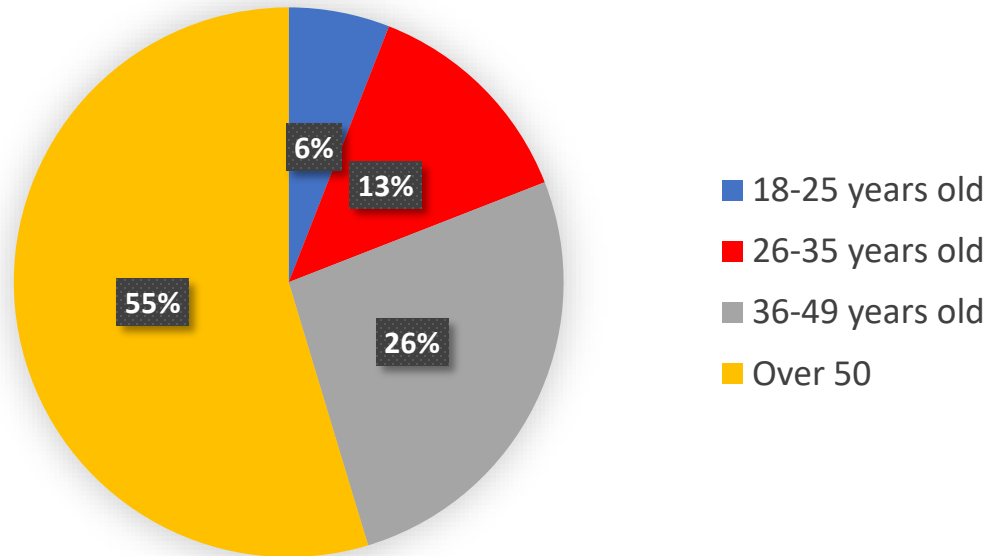
Counties Where Respondents Work\*



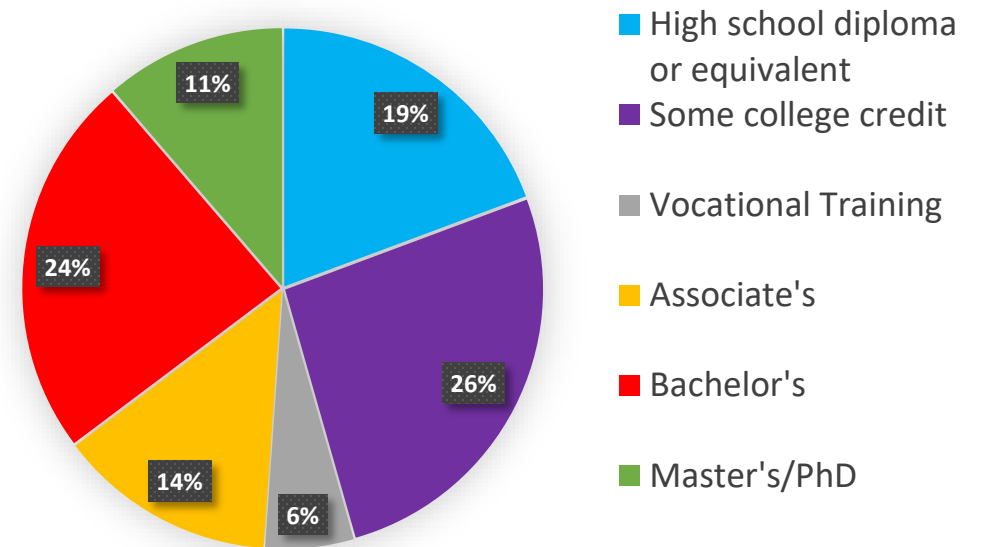
# Who makes up NC's DSP workforce?

The DSP respondents in NC looks a lot like the national DSP workforce: over age 35, education less than a Bachelor's degree, and disproportionately people of color. NC's DSPs also overwhelmingly speak English as a first language (90+% of respondents).

How Old Are You?



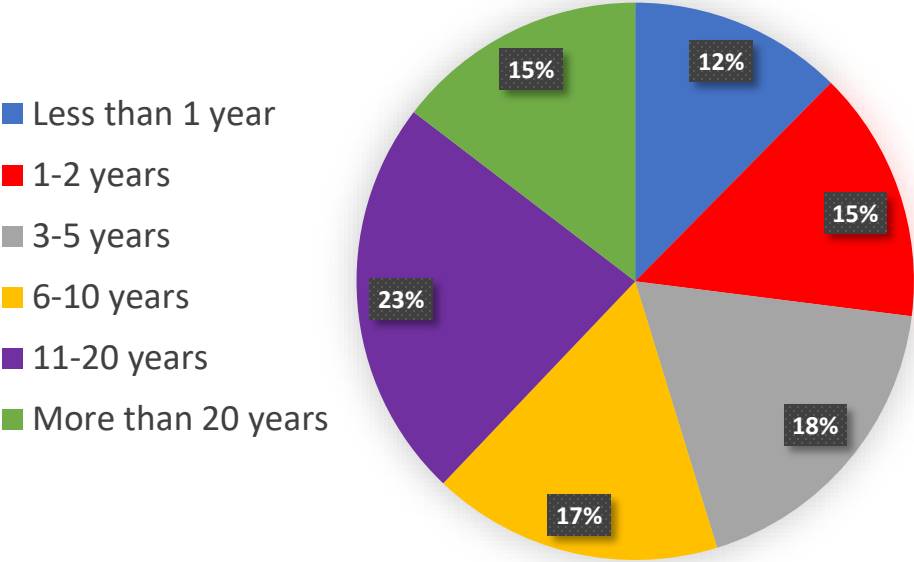
What is the Highest Degree or School Level You Have Completed?



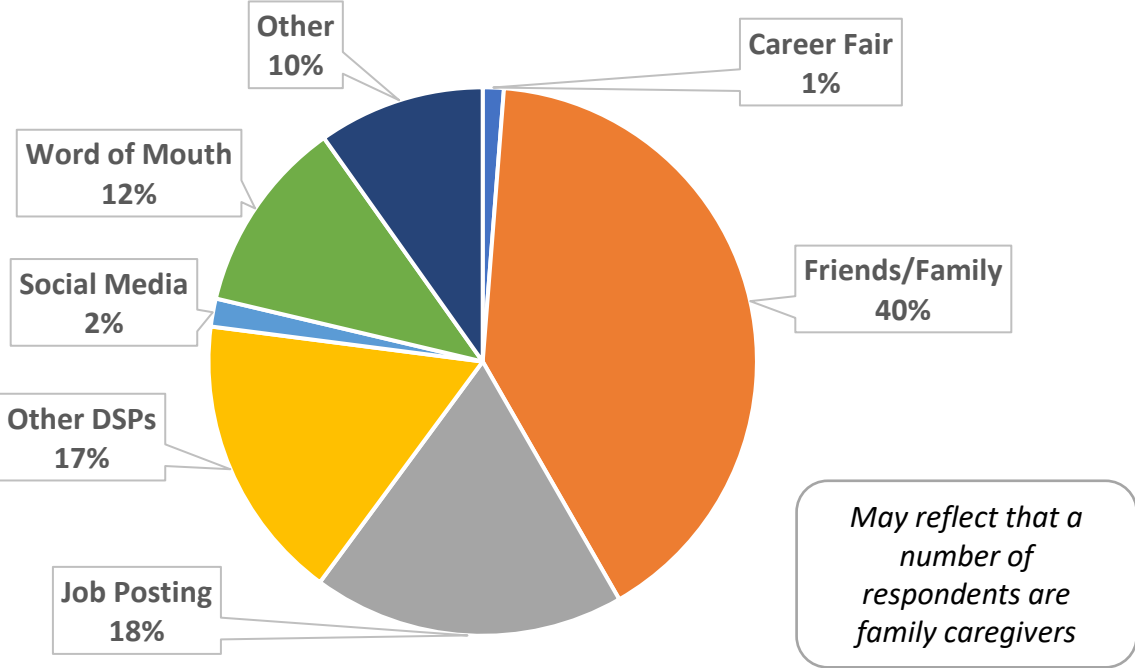
# How long are NC DSPs staying in their role and how did they come to the role?

More than 70% of respondents have been in the role for 3+ years (exceeding the national average of 49%).  
 Only 12% of respondents have been employed for less than 1 year.

How Long Have You Been Working as a DSP?



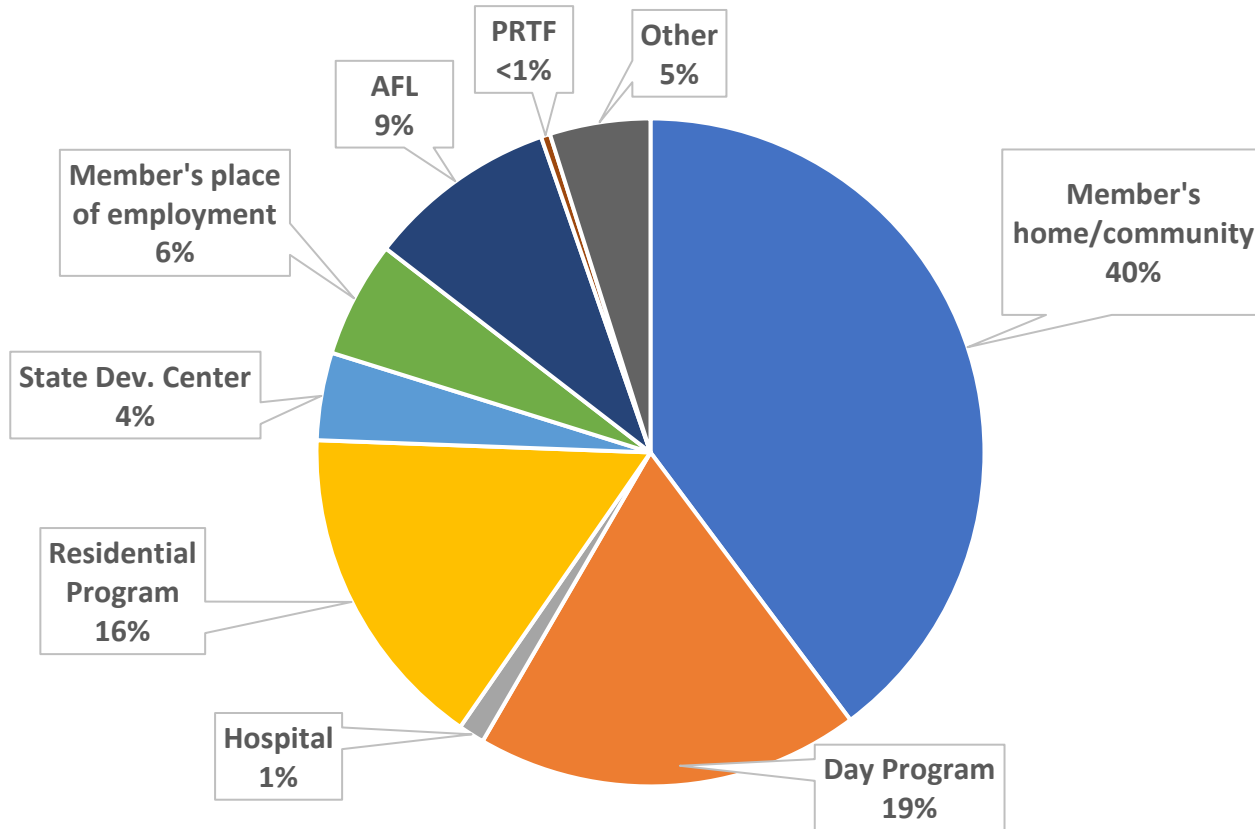
How Did You Learn About the DSP Job?



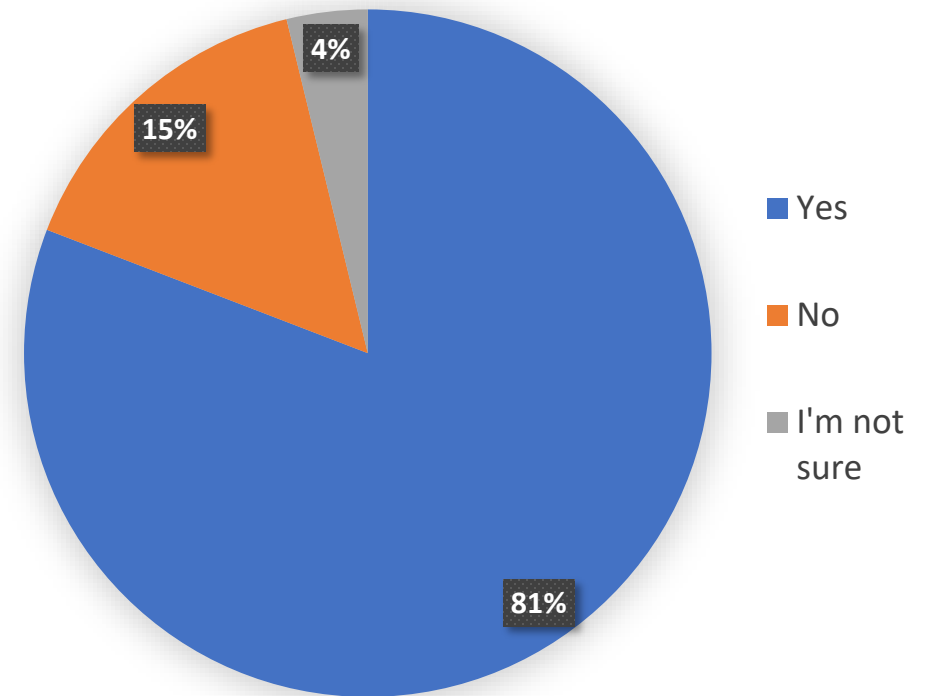
# Where are DSPs working?

The vast majority of the respondents are employed by an agency and are delivering services in a home or community based setting.

What Care Settings Do you Currently Work In?



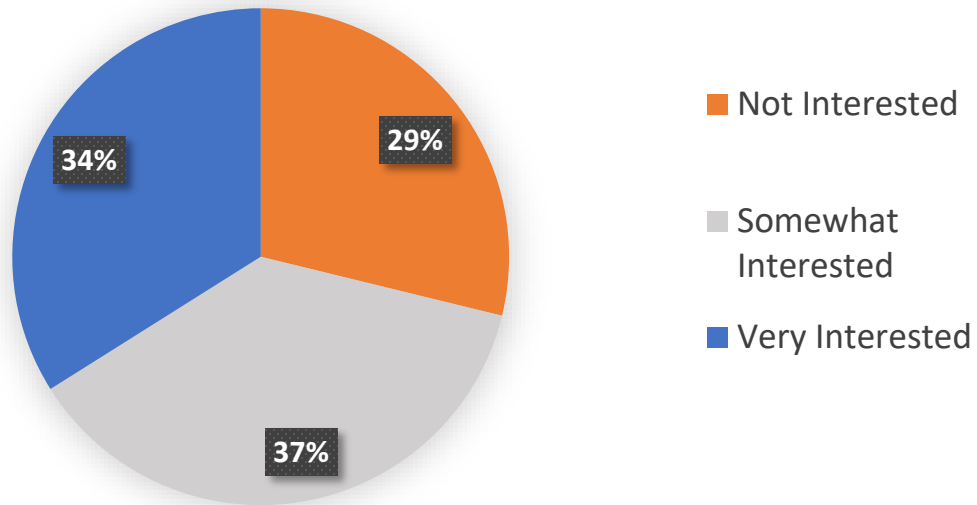
Are You Currently Employed by an Agency?



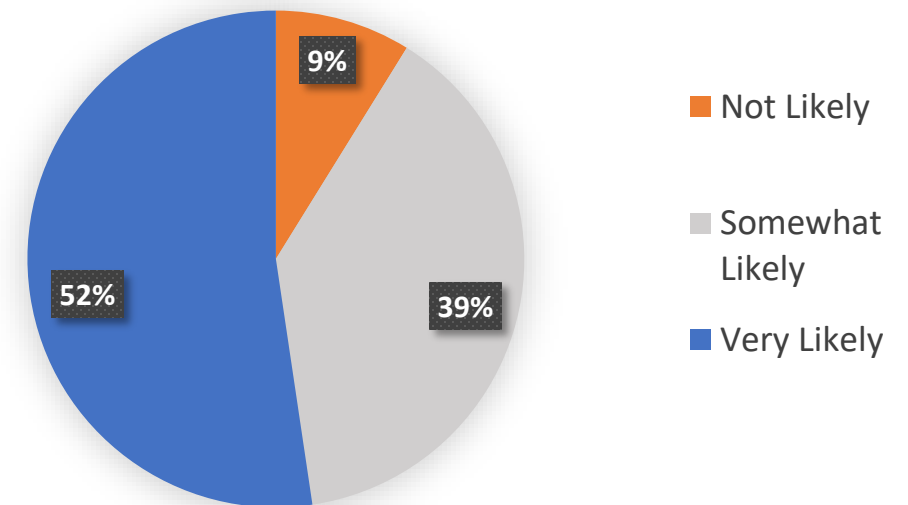
# How do DSPs feel about their job?

Overall, the respondents feel positively about their role and would like to further their education to improve and expand their DSP skills .

How Interested Are You In Getting Additional Credentials as a DSP (e.g., a certificate, associate degree)



How Likely Are You to Recommend the DSP Role to Someone Else?



# How do NC DSPs feel about their level of training?

Nearly 90% of respondents said they feel they have sufficient training to do their job well, but they remain interested in learning new skills on a wide range of topics. This topic-specific training would be in addition to the core competencies required by the state.

Among all survey responses, the following topics were noted most frequently:

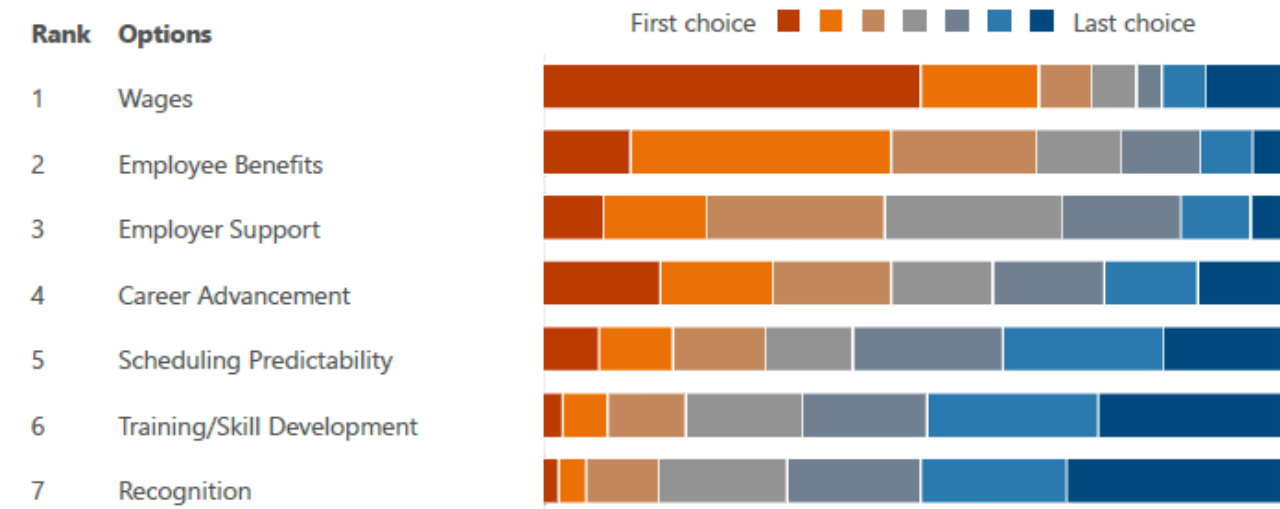
- *Autism & IDD*
  - Sub-topics included: aging in people with autism/IDD, communication and sign language, and teaching new skills and routines to people with autism.
- *Behavioral and Therapeutic Interventions and Supports*
- *Crisis Response and Management*
- *Communication*
  - Subtopics included communication strategies with nonverbal and visually impaired clients.
- *Professional Development*
  - Responses reflected the desire for career coaching and professional and leadership skills development opportunities for DSPs.

Many respondents also said they would appreciate training on “all” or “any” topics, suggesting an urgency and strong desire to improve their ability to deliver care.

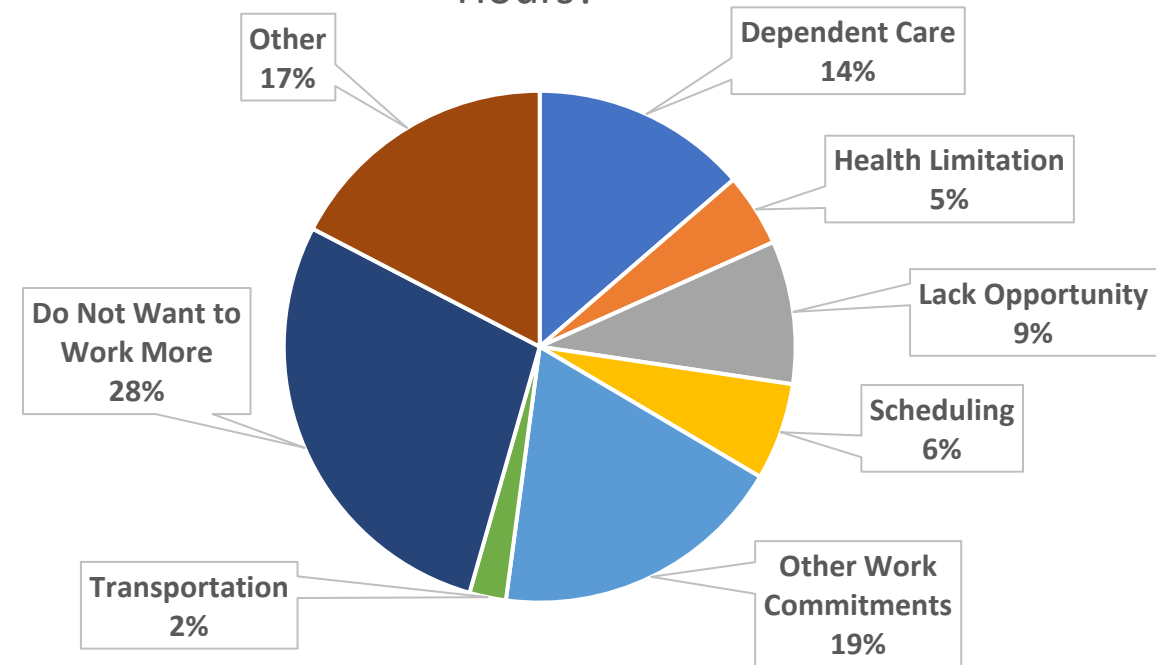
# What is most likely to impact retention?

Like DSPs nationwide, wages and benefits are the leading factors impacting an NC DSP's likelihood that they will remain in the role.

Which of the following are most likely to impact your choice to keep working as a Direct Support Professional (Please put in rank order: Top – Highest, Bottom - Lowest)



Which of the Following Keep You From Working More Hours?\*



\*Survey respondents could select multiple options

# Implications for Ongoing and Future Design Work

- Efforts to increase DSP **financial incentives and employment-related benefits** should be prioritized, particularly sustained financial incentives and benefits such as higher wages.
- Improving **overall job quality** will help increase referrals into the workforce. DMH/DD/SUS can also consider ways to **incentivize DSPs who make referrals** into the profession.
- While most DSPs feel they are well-trained, DMH/DD/SUS should consider options for providing (or creating access to) **continuing education on subject-specific topics** (e.g., mental health, Autism, in-home support strategies, non-verbal communication).
- Recruitment of DSPs should focus on **high school, vocational schools, and community colleges** to train the DSP workforce of the future.



What other design implications should DMH/DD/SUS draw from the DSP survey results?



## Next Steps: DSP Focus Groups

**Over the summer, DMH/DD/SUS plans to convene focus groups of DSPs.** The DSP focus groups will build on the findings of the survey and will allow the Department to hear and learn directly from the DSP workforce.

- The focus groups will seek to dive further into the following :
  1. What attracted DSPs to the job.
  2. Why DSPs continue to do the job
  3. What DSPs need to continue doing the job.
- The focus groups will be virtual and will be facilitated by DMH/DD/SUS.
- The focus groups will consist of 5 groups (~10-12 people in each group), with a mix of DSPs by age, new hire vs. legacy, level of education, etc. The participants will be grouped by their region.

# Draft DSP Workplan

DMH/DD/SUS developed a Draft Workplan to address the critical shortage of DSPs in the State of North Carolina. The DSP Workplan is a requirement of the Samantha R. Consent Order, agreed to by DRNC and NCDHHS.

**Objective:** Mitigate the shortage of the DSP Workforce through strategic recruitment, enhanced training, and improved worker retention.

Year 1 Interventions	Awareness & Recruitment Campaign	DSP Certificate Program with Practicum
	Core Competency Curriculum	Longevity Bonuses
Year 2+ Interventions	Supplemental Benefits	Workforce Enhancement through Technology
	DSP Directory Program	

**Key:**

<span style="display: inline-block; width: 15px; height: 15px; background-color: #1a3d4d; border: 1px solid black; margin-right: 5px;"></span> Community College Pilot	<span style="display: inline-block; width: 15px; height: 15px; background-color: #d3d3d3; border: 1px solid black; margin-right: 5px;"></span> In Development
<span style="display: inline-block; width: 15px; height: 15px; border: 2px solid red; margin-right: 5px;"></span> Under Review	

- Key Outcomes**
- Increased Community Living Support (CLS) utilization rate\*
  - Decreased wait time for services due to DSP availability
  - Decreased DSP turnover
  - Reduced DSP Onboarding time

\* An increase in CLS utilization rate is correlated to increased access to DSPs.

# Community Comments

## Thank you for your feedback!!!

- “DSPs are still not recognized as a legitimate profession.”
- Standardize the definition of a Direct Support Professional.
- “The most effective way to recruit and retain hourly DSPs is when the wages paid to DSPs are competitive with the hourly wage at; 1. State Operated Facilities, 2, Fast food companies, and 3. Retail companies.”
- “We see applicants all the time that simply don’t understand how to apply for or interview for a job.”
- Expand the Pilot Program Statewide.
- “Do an “in-reach” initiative to recruit potential DSPs from among retired individuals.”
- DSP work “in many respects is viewed as below a CNA, even though the work is very similar.”
- “If we were paying a reasonable wage, we would not need to talk about supplemental benefits.”
- It would be great to have providers receive funding to support their own modules built on core competencies
- Create a career ladder for DSPs within the agency.

# DSP Workplan Q&A

Written feedback can be shared with DMH/DD/SUS by emailing [dmhiddcontact@dhhs.nc.gov](mailto:dmhiddcontact@dhhs.nc.gov).

# DSP Initiatives Design Updates

# Provider Recruitment and Retention Grants

In previous Advisory Committee meetings, DMH/DD/SUS discussed longevity bonuses and supplemental benefits as key initiatives to support recruitment and retention of DSPs. DMH/DD/SUS is proposing implementing these initiatives via a single grant funding opportunity for provider agencies.

- DMH/DD/SUS would establish **clear guidelines for how grant funding could be used to support the DSP workforce**
  - Options would **be inclusive of hiring/retention bonuses and supplemental benefits**
- Grants would be available as a **one-time funding opportunity**, and providers would be **encouraged to build upon existing efforts** to support their employees
- DMH/DD/SUS is still **developing criteria for eligibility, award amounts, and the process for awarding grants** to provider agencies
- DMH/DD/SUS is **targeting awarding grants in 2025**



What other design considerations should DMH/DD/SUS consider for this program?

# Looking Ahead

- **Upcoming Activity:**
  - **DSP Advisory Committee Discussion - Recruitment and Retention Grants Proposal (June)**
  - **DSP Focus Groups (June)**
  - **DSP Directory Research and Design (ongoing)**
  - **Recruitment and Training Pilot Design and Implementation (ongoing)**

# Appendix



# Introductions

# Direct Support Professionals (DSP) Advisory Committee Membership

Name	Organization
<b>Providers</b>	
Alicia Barfield	North Carolina Healthcare Association
Amy Miller	OE Enterprises, Inc.
Anita Daniels	actualities limited & Union Baptist Church
Baines Jamil	Archmade LLC
Barry Dixon	Dixon Social Interactive Services Inc.
Betsy MacMichael	First in Families of NC
Brandi Baker	Residential Services Inc.
Brittney Peters-Barnes	NC START
Bryan Dooley	Solutions for Independence
Carson Ojamaa	Children's Hope Alliance
Chris Faulkner	Family Solutions
Corie Passmore	Tammy Lynn Center
Corye Dunn	Disability Rights NC
Darlene Norton	Gaston Residential Services
Devon Cornett	Abound Health
Eileen Slade	NC START Central
English Albertson	Primary Health Choice, Inc
Erika Taylor	Brody School of Medicine at East Carolina University, Dept. of Family Medicine
Garcia Lourdes	Justice Services Department
Gerald Bernard	Charles Lea Center Inc.

Name	Organization
<b>Providers</b>	
Herb Whitesell	Davidson, Holland, Whitesell & Co., PLLC
Holly Richard	The Arc of North Carolina
Holly Watkins	The Arc of North Carolina
Jamie Tutor	All Ways Caring HomeCare
Janet Price-Ferrell	FIRST
Jemma Grindstaff	UNC TEACCH Autism Program
Jen Greveling	BAYADA Habilitation
Jennifer Street	Animo Sano Psychiatry
Joel Maynard	The North Carolina Provider Council & The Developmental Disabilities Facilities Association
John Nash	The Arc of North Carolina
Joseph Horrigan	Duke University
Joyce Harper	Freedom House Recovery Center, Inc.
Julia Adams-Scheurich	Oak City Government Relations, LLC
Karen McLeod	Benchmarks
Karin McDaniel	Adult Life Programs, Inc.
Kelly Husn	BAYADA Habilitation
Kelsey Parker	Carolina Outreach, LLC
Kelvin Barnhill SR	Flovi Services
Kerri Erb	Autism Society of NC
Kevin Anders	Children's Hope Alliance

# Direct Support Professionals (DSP) Advisory Committee Membership

Name	Organization
<b>Providers</b>	
Kimberly Mitchell	Boundless Miracles, LLC
Krista Zappia	Children's Hope Alliance
Laura McRae	Pinnacle Family Services
Leonard Shinhoster	Alexander Youth Network
Lisa Poteat	The Arc of NC
Luke McDonald	Novant Health
Luwanda Smith Daniels	Alternative Behavioral Solutions Inc.
Margaret Mason	CBCare
Margery Sved	self
Maria McLaughlin	Rainbow 66 Storehouse
Mary Butts	Carobell Inc
Mary Jones	El Futuro
Mebane Boyd	NC Partnership for Children
Michael Maybee	Watauga Opportunities Inc.
Michelle, Klutz	NC START East/West
Mike Chapman	UNC TEACCH Autism Program
Monica Long	Alpha Management Community Services, Inc.
Pablo Puente	ServiceSource
Pam Clark	FIRSTwnc
Richard Anderson	Horizons Residential Care Center
Richard Edwards	CBCare

Name	Organization
<b>Providers</b>	
Richard Walker	Carobell, Inc.
Sandra Johnson	Primary Health Choice
Sherrell Gales	Abound Health
Talley Wells	NCCDD
Terri Bernhardt	Monarch NC
Therese Garrett	WellCare NC
Tom O'Brien	Industrial, Opportunities, Inc.
Tracy Smith	CBCare
Venkata Ravi Chivukula	Novant Health
Wendy Briggs	Ralph Scott Lifeservices, Inc.
Yasmin Gay	Atrium Health Wake Forest Baptist/ Wake Forest University School of Medicine

# Direct Support Professionals (DSP) Advisory Committee Membership

Name	Organization
<b>Consumers/Family Members</b>	
Amie T Brendle	CFAC and Advocacy / Advisory Groups and Committees
Angela-Christine, Rainear	Employer of Record
annika jeffries	MHA
Beth Field	LAND (Leadership Alliance for Neurodevelopmental Disabilities)
Carol Conway	PACID
Crystal White	Easterseals UCP
Katherine Fields	Employee of Record
Laura Radulescu	Wake Enterprises
Linda Campbell	CFAC
Lisa Carroll	Partners-CFAC Member
Lisa Roberson	EOR
Lorraine LaPointe	Orange County - CFAC Member
Marisa Kathard	N/A
Pamela Clark	Employee of Record
Poonam Pande	N/A
Ray Hemachandra	Vaya CFAC
Sarah Potter	PCFAC, MTN, NC WAT
Sherri McGimsey	NAMI
Velma Gaye	N/A
Zondra Moss	Abound Health

Name	Organization
<b>Consumers/Family Members</b>	
Angela-Christine Rainear	SCFAC
Annette Smith	SCFAC
Crystal Foster	SCFAC
Janet Breeding	SCFAC
Johnnie Thomas	SCFAC
Lilly Parker	SCFAC

# Direct Support Professionals (DSP) Advisory Committee Membership

Name	Organization
<b>Community Partners</b>	
Alicia Brunelli	NC Harm Reduction Coalition
Anna Ward	Carolina Institute for Developmental Disabilities
Betsey Zook	Forsyth Tech Community College
Debra Barnette	Community Care of the Lower Cape Fear
Ellen Carroll	NCHA
Jessica Aguilar	SCFAC
Lisa Jackman	NC START West
Martha Turner-Quest	NC Psychological Association
Michael Chapman	UNC TEACCH Autism Program
Robin Zeigler	Division of Public Health, Oral Health Section
Stephanie Walker	AHEC
Suresh Nagarajan	PCG
Tara Fields	Benchmarks
Tim Gallagher	Individual
Tracie Potee	Soar Parenting and Life Wellness Coaching Services Inc.
Troy Manns	CHPD/CHT Crisis Unit
William Edwards	Transitional Services Center, inc

Name	Organization
<b>LME/MCOs</b>	
Aimee Izawa	Alliance Health
Dr. Uzama Price	Alliance
Brian Perkins	Alliance Health
Claudette Johnson	Alliance Health
Emily Kerley	Alliance Health
Jocelyn Stephens	Alliance Health
Sandhya Gopal	Alliance Health
Sara Wilson	Alliance Health
Ann Gluf	Partners
Allison Crotty	Partners Health Management
Amilcar Blake	Partners Health Management
Doug Gallion	Partners Health Management
Michelle Stroebel	Partners Health Management
Cindy Ehlers	Trillium Health Resources

# Direct Support Professionals (DSP) Advisory Committee Membership

Name	Organization
<i>Internal</i>	
Tina Barrett- Lead	DMHDDSUS
Kelly Crosbie	DMHDDSUS
Charles Rousseau	DMHDDSUS
Saarah Waleed	DMHDDSUS
Ginger Yarbrough	DMHDDSUS
Elliot Krause	DMHDDSUS
Keith McCoy	DMHDDSUS
Betty Vines	DMHDDSUS
Karen Wade	Office of the Secretary
Michael Ganley	DSOHF
Nicholas Galvez	NC Office of Rural Health
Holly Riddle	Office of the Secretary - Olmstead/TCL
Melissa Swartz	NC Council on Developmental Disabilities