

117TH CONGRESS
1ST SESSION

S. _____

To award grants for the creation, recruitment, training and education, retention, and advancement of the direct care workforce and to award grants to support family caregivers.

IN THE SENATE OF THE UNITED STATES

Mr. KAINE introduced the following bill; which was read twice and referred to the Committee on _____

A BILL

To award grants for the creation, recruitment, training and education, retention, and advancement of the direct care workforce and to award grants to support family caregivers.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Supporting Our Direct
5 Care Workforce and Family Caregivers Act”.

6 **SEC. 2. DEFINITIONS.**

7 In this Act:

1 (1) APPRENTICESHIP PROGRAM.—The term
2 “apprenticeship program” means an apprenticeship
3 program registered under the Act of August 16,
4 1937 (commonly known as the “National Appren-
5 ticeship Act”; 50 Stat. 664, chapter 663; 29 U.S.C.
6 50 et seq.), including any requirement, standard, or
7 rule promulgated under such Act.

8 (2) COMMUNITY COLLEGE.—The term “commu-
9 nity college” means a public institution of higher
10 education at which the highest degree that is pre-
11 dominantly awarded to students is an associate’s de-
12 gree, including Tribal Colleges or Universities receiv-
13 ing grants under section 316 of the Higher Edu-
14 cation Act of 1965 (20 U.S.C. 1059c) that offer a
15 2-year program for completion of such degree and
16 State public institutions of higher education that
17 offer such a 2-year program.

18 (3) DIRECT CARE PROFESSIONAL.—The term
19 “direct care professional”—

20 (A) means an individual who, in exchange
21 for compensation, provides services to a person
22 with a disability or an older individual that pro-
23 motes the independence of such person or indi-
24 vidual, including—

1 (i) services that enhance the inde-
2 pendence and community inclusion for
3 such person or individual, including trav-
4 eling with such person or individual or at-
5 tending and assisting such person or indi-
6 vidual while visiting friends and family,
7 shopping, or socializing;

8 (ii) services such as coaching and sup-
9 porting such person or individual in com-
10 municating needs, achieving self-expres-
11 sion, pursuing personal goals, living inde-
12 pendently, and participating actively in em-
13 ployment or voluntary roles in the commu-
14 nity;

15 (iii) services such as providing assist-
16 ance with activities of daily living (such as
17 feeding, bathing, toileting, and ambulation)
18 and with tasks such as meal preparation,
19 shopping, light housekeeping, and laundry;
20 or

21 (iv) services that support such person
22 or individual at home, work, school, or in
23 any other community setting; and

24 (B) may include—

1 (i) a direct support professional sup-
2 porting people with intellectual and devel-
3 opmental disabilities;

4 (ii) a home and community-based
5 services manager or direct support profes-
6 sional manager;

7 (iii) a self-directed care worker;

8 (iv) a personal care service worker;

9 (v) a direct care worker, as defined in
10 section 799B of the Public Health Service
11 Act (42 U.S.C. 295p); or

12 (vi) any other position or job related
13 to the home care or direct care workforce
14 as determined by the Secretary, in con-
15 sultation with the Center for Medicare &
16 Medicaid Services and the Secretary of
17 Labor.

18 (4) DIRECT CARE WORKFORCE.—The term “di-
19 rect care workforce” means the workforce of direct
20 care professionals.

21 (5) FAMILY CAREGIVER.—The term “family
22 caregiver” has the meaning given such term in sec-
23 tion 2 of the RAISE Family Caregivers Act (42
24 U.S.C. 3030s note; Public Law 115–119) and in-
25 cludes paid and unpaid family caregivers.

1 (6) ELIGIBLE ENTITY.—The term “eligible enti-
2 ty” means an entity—

3 (A) that is—

4 (i) a State;

5 (ii) a labor organization, joint labor-
6 management organization, or employer of
7 direct care professionals;

8 (iii) a nonprofit entity with experience
9 in aging, disability, and training or edu-
10 cation of direct care professionals or family
11 caregivers;

12 (iv) an Indian Tribe, Tribal organiza-
13 tion, or Urban Indian organization;

14 (v) a community college or other insti-
15 tution of higher education; or

16 (vi) a consortium of entities listed in
17 any of clauses (i) through (v);

18 (B) that agrees to include, as applicable
19 with respect to the type of grant the entity is
20 seeking under this Act and the activities sup-
21 ported through such grant, older individuals,
22 people with disabilities, direct care profes-
23 sionals, and family caregivers, as advisors and
24 trainers in such activities; and

1 (C) that agrees to consult with the State
2 Medicaid agency of the State (or each State)
3 served by the grant on the grant activities, to
4 the extent that such agency (or each such agen-
5 cy) is not the eligible entity.

6 (7) EMPLOYER.—The terms “employ” and
7 “employer” have the meanings given the terms in
8 section 3 of the Fair Labor Standards Act of 1938
9 (29 U.S.C. 203 et seq.).

10 (8) INDIAN TRIBE; TRIBAL ORGANIZATION.—
11 The terms “Indian Tribe” and “Tribal organiza-
12 tion” have the meanings given such terms in section
13 4 of the Indian Self-Determination and Education
14 Assistance Act (25 U.S.C. 5304).

15 (9) INSTITUTION OF HIGHER EDUCATION.—The
16 term “institution of higher education” means—

17 (A) an institution of higher education de-
18 fined in section 101 of the Higher Education
19 Act of 1965 (20 U.S.C. 1001); or

20 (B) an institution of higher education de-
21 fined in section 102(a)(1)(B) of such Act (20
22 U.S.C. 1002(a)(1)(B)).

23 (10) OLDER INDIVIDUAL.—The term “older in-
24 dividual” means an individual who is 60 years of age
25 or older.

1 (11) PERSON WITH A DISABILITY.—The term
2 “person with disability” means an individual with a
3 disability, as defined in section 3 of the Americans
4 with Disabilities Act of 1990 (42 U.S.C. 12102).

5 (12) PROJECT PARTICIPANT.—The term
6 “project participant” means an individual partici-
7 pating in a project or activity assisted with a grant
8 under this Act, including (as applicable for the cat-
9 egory of the grant) a direct care professional or fam-
10 ily caregiver or an individual training to be such a
11 professional or caregiver.

12 (13) SECRETARY.—The term “Secretary”
13 means the Secretary of Health and Human Services,
14 acting through the Administrator for Community
15 Living.

16 (14) SELF-DIRECTED CARE PROFESSIONAL.—
17 The term “self-directed care professional” means a
18 direct care professional who is employed by an indi-
19 vidual who is an older individual, a person with a
20 disability, or a representative of such older indi-
21 vidual or person with a disability, and such older in-
22 dividual or person with a disability has the decision-
23 making authority over certain supports and services
24 provided by the direct care professional and takes di-

1 rect responsibility to manage those supports and
2 services.

3 (15) SUPPORTIVE SERVICES.—The term “sup-
4 portive services” means services that are necessary
5 to enable an individual to participate in activities as-
6 sisted with a grant under this Act, such as transpor-
7 tation, child care, dependent care, housing, work-
8 place accommodations, employee benefits such as
9 paid sick leave and child care, workplace health and
10 safety protections, wages and overtime pay, and
11 needs-related payments.

12 (16) URBAN INDIAN ORGANIZATION.—The term
13 “urban Indian organization” has the meaning given
14 the term in section 4 of the Indian Health Care Im-
15 provement Act (25 U.S.C. 1603).

16 (17) WORKFORCE INNOVATION AND OPPOR-
17 TUNITY ACT TERMS.—The terms “career pathway”,
18 “career planning”, “in-demand industry sector or
19 occupation”, “individual with a barrier to employ-
20 ment”, “local board”, “on-the-job training”, “recog-
21 nized postsecondary credential”, “region”, and
22 “State board” have the meanings given such terms
23 in section 3 of the Workforce Innovation and Oppor-
24 tunity Act (29 U.S.C. 3102).

1 (18) WORK-BASED LEARNING.—The term
2 “work-based learning” has the meaning given the
3 term in section 3 of the Carl D. Perkins Career and
4 Technical Education Act of 2006 (20 U.S.C. 2302).

5 **SEC. 3. AUTHORITY TO ESTABLISH A TECHNICAL ASSIST-**
6 **ANCE CENTER FOR BUILDING THE DIRECT**
7 **CARE WORKFORCE.**

8 (a) PROGRAM AUTHORIZED.—The Secretary shall es-
9 tablish a technical assistance center (referred to in this
10 section as the “Center”) for, in consultation with the Sec-
11 retary of Labor, the Secretary of Education, the Adminis-
12 trator of the Centers for Medicare & Medicaid Services,
13 and the heads of other entities as necessary—

14 (1) supporting direct care workforce creation,
15 training and education, recruitment, retention, and
16 advancement; and

17 (2) supporting family caregivers and activities
18 of family caregivers as a critical part of the support
19 team for older individuals or people with disabilities.

20 (b) ADVISORY COUNCIL.—The Secretary shall con-
21 vene an advisory council to provide recommendations to
22 the Center with respect to the duties of the Center under
23 this section and may engage individuals and entities de-
24 scribed in paragraphs (3)(B), and (12), of section 5(b)

1 (without regard to a specific project described in such
2 paragraphs) for service on the advisory council.

3 (c) ACTIVITIES.—The Center may—

4 (1) develop recommendations for training and
5 education curricula for direct care professionals,
6 which such recommendations may include rec-
7 ommendations for curricula for higher education,
8 postsecondary credentials, and programs with com-
9 munity colleges;

10 (2) develop learning and dissemination strate-
11 gies to—

12 (A) engage States and other entities in ac-
13 tivities supported under this Act and best prac-
14 tices; and

15 (B) distribute findings from activities sup-
16 ported by grants under this Act;

17 (3) develop recommendations for training and
18 education curricula and other strategies for sup-
19 porting family caregivers;

20 (4) explore the national data gaps, workforce
21 shortage areas, and data collection strategies for di-
22 rect care professionals and make recommendations
23 for an occupation category in the Standard Occupa-
24 tional Classification system for direct support pro-
25 fessionals as a health care support occupation;

1 (5) recommend career development and ad-
2 vancement opportunities for direct care profes-
3 sionals, which may include occupational frameworks,
4 national standards, recruitment campaigns, pre-ap-
5 prenticeship and on-the-job training opportunities,
6 apprenticeship programs, career ladders or path-
7 ways, specializations or certifications, or other activi-
8 ties; and

9 (6) develop strategies for assisting with report-
10 ing and evaluation of grant activities under section
11 7.

12 **SEC. 4. AUTHORITY TO AWARD GRANTS.**

13 (a) GRANTS.—

14 (1) IN GENERAL.—Not later than 12 months
15 after the date of enactment of this Act, the Sec-
16 retary, in consultation with the Center for Medicare
17 & Medicaid Services, the Secretary of Labor, and the
18 Secretary of Education, shall award grants described
19 in paragraph (2) to eligible entities. A grant award-
20 ed under this section may be in more than 1 cat-
21 egory described in such paragraph.

22 (2) CATEGORIES OF GRANTS.—The categories
23 of grants described in this paragraph are each of the
24 following:

1 (A) DIRECT CARE PROFESSIONAL
2 GRANTS.—Grants to eligible entities to create
3 and carry out projects for the purposes of re-
4 cruiting, retaining, or providing advancement
5 opportunities for direct care professionals who
6 are not described in subparagraph (B) or (C),
7 including through education or training pro-
8 grams for such professionals or individuals
9 seeking to become such professionals.

10 (B) DIRECT CARE PROFESSIONAL MAN-
11 AGERS GRANTS.—Grants to eligible entities to
12 create and carry out projects for the purposes
13 of recruiting, retaining, or providing advance-
14 ment opportunities for direct care professionals
15 who are managers or supervisory staff that
16 have coaching, training, managerial, super-
17 visory, or other oversight responsibilities, in-
18 cluding through education or training programs
19 for such professionals or individuals seeking to
20 become such professionals.

21 (C) SELF-DIRECTED CARE PROFES-
22 SIONALS.—Grants to eligible entities to create
23 and carry out projects for the purposes of re-
24 cruiting, retaining, or providing advancement
25 opportunities for self-directed care profes-

1 sionals, including through education or training
2 programs for such professionals or individuals
3 seeking to become such professionals.

4 (D) FAMILY CAREGIVER GRANTS.—Grants
5 to eligible entities to create and carry out
6 projects for providing support to paid or unpaid
7 family caregivers through educational, training,
8 or other resources, including resources for care-
9 giver self-care or educational or training re-
10 sources for individuals seeking to become family
11 caregivers.

12 (3) PROJECTS FOR ADVANCEMENT OPPORTUNI-
13 TIES.—Not less than 30 percent of projects assisted
14 with grants under this Act shall be projects to pro-
15 vide advancement opportunities to direct care profes-
16 sionals.

17 (b) TREATMENT OF CONTINUATION ACTIVITIES.—
18 An eligible entity that carries out activities described in
19 subsection (a)(2) prior to receipt of a grant under this
20 Act may use such grant to continue carrying out such ac-
21 tivities, and, in using such grant to continue such activi-
22 ties, shall be treated as an eligible entity carrying out a
23 project through a grant under this Act.

1 **SEC. 5. PROJECT PLANS.**

2 (a) IN GENERAL.—An eligible entity seeking a grant
3 under this Act shall submit to the Secretary a project plan
4 for each project to be developed and carried out (or for
5 activities to be continued as described in section 4(b)) with
6 the grant at such time, in such manner, and containing
7 such information as the Secretary may require.

8 (b) CONTENTS.—A project plan submitted by an eli-
9 gible entity under subsection (a) shall include a descrip-
10 tion of information determined relevant by the Secretary
11 for purposes of the category of the grant and the activities
12 to be carried out through the grant. Such information may
13 include (as applicable) the following:

14 (1) Demographic information regarding the
15 population in the State or relevant geographic area,
16 including a description of the populations likely to
17 need long-term care services, such as people with
18 disabilities and older individuals.

19 (2) Projections of unmet need for services pro-
20 vided by direct care professionals based on enroll-
21 ment waiting lists under home and community-based
22 waivers under section 1115 of the Social Security
23 Act (42 U.S.C. 1315) or section 1915(c) of such Act
24 (42 U.S.C. 1396n(c)) and other relevant data to the
25 extent practicable and feasible.

1 (3) An advisory committee to advise the eligible
2 entity on activities to be carried out through the
3 grant. Such advisory committee—

4 (A) may be comprised of entities listed in
5 paragraph (12); and

6 (B) shall include—

7 (i) older individuals or persons with a
8 disability;

9 (ii) organizations representing the
10 rights and interests of people receiving
11 services by the direct care professionals or
12 family caregivers targeted by the project;

13 (iii) individuals who are direct care
14 professionals or family caregivers targeted
15 by the project;

16 (iv) as applicable, employers of indi-
17 viduals described in clause (iii) and labor
18 organizations representing such individ-
19 uals;

20 (v) representatives of the State Med-
21 icaid agency, the State agency defined in
22 section 102 of the Older Americans Act of
23 1965 (42 U.S.C. 3002), the State develop-
24 mental disabilities office, and the State

1 mental health agency, in the State (or each
2 State) to be served by the project; and

3 (vi) representatives reflecting diverse
4 racial, cultural, ethnic, geographic, socio-
5 economic, and gender identity and sexual
6 orientation perspectives.

7 (4) Current or projected job openings for, or
8 relevant labor market information related to, the di-
9 rect care professionals or family caregivers targeted
10 by the project in the State or region to be served by
11 the project, and the geographic scope of the work-
12 force to be served by the project.

13 (5) Specific efforts and strategies that the
14 project will undertake to reduce barriers to recruit-
15 ment, retention, or advancement of the direct care
16 professionals targeted by the project, including an
17 assurance that such efforts will include—

18 (A) an assessment of the wages or other
19 compensation or benefits necessary to recruit
20 and retain the direct care professionals targeted
21 by the project;

22 (B) a description of the project's projected
23 compensation or benefits for the direct care
24 professionals targeted by the project at the
25 State or local level, including a comparison of

1 such projected compensation or benefits to re-
2 gional and national compensation or benefits;
3 and

4 (C) a description of the projected impact of
5 workplace safety issues on the recruitment and
6 retention of direct care professionals targeted
7 by the project, including the availability of per-
8 sonal protective equipment.

9 (6) In the case of a project offering an edu-
10 cation or training program for direct care profes-
11 sionals, a description of such program (including any
12 curricula, models, and standards used under the pro-
13 gram, and any associated recognized postsecondary
14 credentials for which the program provides prepara-
15 tion, as applicable), which shall include an assurance
16 that such program will provide to each project par-
17 ticipant in such program—

18 (A) relevant training regarding the rights
19 of recipients of home and community based
20 services, including their rights to—

21 (i) receive services in integrated set-
22 tings that provide access to the broader
23 community;

24 (ii) exercise self-determination;

1 (iii) be free from all forms of abuse,
2 neglect, or exploitation; and

3 (iv) person-centered planning and
4 practices, including participation in plan-
5 ning activities;

6 (B) relevant training to ensure that each
7 project participant has the necessary skills to
8 recognize abuse and understand their obliga-
9 tions with regard to reporting and responding
10 to abuse appropriately in accordance with rel-
11 evant Federal and State law;

12 (C) relevant training regarding the provi-
13 sion of culturally competent and disability com-
14 petent supports to recipients of services pro-
15 vided by the direct care professionals targeted
16 by the project;

17 (D) an apprenticeship program, work-
18 based learning, or on-the-job training opportu-
19 nities;

20 (E) supervision or mentoring; and

21 (F) for any on-the-job training portion of
22 the program, a progressively increasing, clearly
23 defined schedule of wages to be paid to each
24 such participant that—

- 1 (i) is consistent with skill gains or at-
2 tainment of a recognized postsecondary
3 credential received as a result of participa-
4 tion in or completion of such program; and
5 (ii) ensures the entry wage is not less
6 than the greater of—

7 (I) the minimum wage required
8 under section 6(a) of the Fair Labor
9 Standards Act of 1938 (29 U.S.C.
10 206(a)); or

11 (II) the applicable wage required
12 by other applicable Federal or State
13 law, or a collective bargaining agree-
14 ment.

15 (7) Any other innovative models or processes
16 the eligible entity will implement to support the re-
17 tention and career advancement of the direct care
18 professionals targeted by the project.

19 (8) The supportive services and benefits to be
20 provided to the project participants in order to sup-
21 port the employment, retention, or career advance-
22 ment of the direct care professionals targeted by the
23 project.

24 (9) How the eligible entity will make use of ca-
25 reer planning to support the identification of ad-

1 vancement opportunities and career pathways for
2 the direct care professionals in the State or region
3 to be served by the project.

4 (10) How the eligible entity will collect and sub-
5 mit to the Secretary workforce data and outcomes of
6 the project.

7 (11) How the project—

8 (A) will—

9 (i) provide adequate and safe equip-
10 ment and facilities for training and super-
11 vision, including a safe work environment
12 free from discrimination, which may in-
13 clude the provision of personal protective
14 equipment and other necessary equipment
15 to prevent the spread of infectious disease
16 among the direct care professionals tar-
17 geted by the project and recipients of serv-
18 ices provided by such professionals;

19 (ii) incorporate remote training and
20 education opportunities or technology-sup-
21 ported opportunities;

22 (iii) for training and education cur-
23 ricula, incorporate evidenced-supported
24 practices for adult learners and universal
25 design for learning and ensure recipients

1 of services provided by the direct care pro-
2 fessionals or family caregivers targeted by
3 the project participate in the development
4 and implementation of such training and
5 education curricula;

6 (iv) use outreach, recruitment, and re-
7 tention strategies designed to reach and re-
8 tain a diverse workforce;

9 (v) incorporate methods to monitor
10 satisfaction with project activities for
11 project participants and individuals receiv-
12 ing services from such participants;

13 (vi) incorporate evidence-supported
14 practices for family caregiver engagement;
15 and

16 (vii) incorporate core competencies
17 identified by the Centers for Medicare &
18 Medicaid Services or by the technical as-
19 sistance center established under section 3;
20 and

21 (B) may incorporate continuing education
22 programs and specialty training, with a specific
23 focus on—

24 (i) trauma-informed care;

- 1 (ii) behavioral health, including co-oc-
2 ccurring behavioral health conditions and
3 intellectual or developmental disabilities;
4 (iii) Alzheimer's and dementia care;
5 (iv) chronic disease management; and
6 (v) the use of supportive or assistive
7 technology.

8 (12) How the eligible entity will consult on the
9 implementation of the project, or coordinate the
10 project with, each of the following entities, to the ex-
11 tent that each such entity is not the eligible entity:

12 (A) The State Medicaid agency, State
13 agency defined in section 102 of the Older
14 Americans Act of 1965 (42 U.S.C. 3002), and
15 the State developmental disabilities office for
16 the State (or each State) to be served by the
17 project.

18 (B) The local board and State board for
19 each region, or State, to be served by the
20 project.

21 (C) In the case of a project that carries
22 out an education or training program, a non-
23 profit organization with demonstrated experi-
24 ence in the development or delivery of curricula
25 or coursework.

1 (D) A nonprofit organization, including a
2 labor organization, that fosters the professional
3 development and collective engagement of the
4 direct care professionals targeted by the project.

5 (E) Area agencies on aging, as defined in
6 section 102 of the Older Americans Act of 1965
7 (42 U.S.C. 3002).

8 (F) Centers for independent living, as de-
9 scribed in part C of title VII of the Rehabilita-
10 tion Act of 1973 (29 U.S.C. 796f et seq.).

11 (G) The State Council on Developmental
12 Disabilities (as such term is used in subtitle B
13 of title I of the Developmental Disabilities As-
14 sistance and Bill of Rights Act of 2000 (42
15 U.S.C. 15021 et seq.) for the State (or each
16 State) to be served by the project.

17 (H) Aging and Disability Resource Centers
18 (as defined in section 102 of the Older Ameri-
19 cans Act of 1965 (42 U.S.C. 3002)).

20 (I) A nonprofit State provider association
21 that represents providers who employ the direct
22 care professionals targeted by the project,
23 where such associations exist.

24 (J) An entity that employs the direct care
25 professionals targeted by the project.

1 (K) University Centers for Excellence in
2 Developmental Disabilities Education, Re-
3 search, and Services supported under subtitle D
4 of title I of the Developmental Disabilities As-
5 sistance and Bill of Rights Act of 2000 (42
6 U.S.C. 15061 et seq.).

7 (L) The State protection and advocacy sys-
8 tem described in section 143 of such Act (42
9 U.S.C. 15043) of the State (or each State) to
10 be served by the project.

11 (M) Direct care professionals or direct care
12 workforce organizations representing under-
13 served communities, including communities of
14 color.

15 (13) How the eligible entity will consult
16 throughout the project with—

17 (A) individuals employed or working as the
18 direct care professionals or family caregivers
19 targeted by the project;

20 (B) representatives of such professionals or
21 caregivers;

22 (C) individuals assisted by such profes-
23 sionals or caregivers;

24 (D) the families of such professionals or
25 caregivers; and

1 (E) individuals receiving education or
2 training to become such professionals or care-
3 givers.

4 (14) Outreach efforts to individuals for partici-
5 pation in such project, including targeted outreach
6 efforts to—

7 (A) individuals who are recipients of assist-
8 ance under a State program funded under part
9 A of title IV of the Social Security Act (42
10 U.S.C. 601 et seq.) or individuals who are eligi-
11 ble for such assistance; and

12 (B) individuals with barriers to employ-
13 ment.

14 (c) CONSIDERATIONS.—In selecting eligible entities
15 to receive a grant under this Act, the Secretary shall en-
16 sure—

17 (1) equitable geographic and demographic di-
18 versity, including by selecting recipients serving
19 rural areas and selecting recipients serving urban
20 areas; and

21 (2) that selected eligible entities will serve areas
22 where the occupation of direct care professional, or
23 a related occupation, is an in-demand industry sec-
24 tor or occupation.

1 **SEC. 6. USES OF FUNDS; SUPPLEMENT, NOT SUPPLANT.**

2 (a) USES OF FUNDS.—

3 (1) IN GENERAL.—Each eligible entity receiving
4 a grant under this Act shall use the funds of such
5 grant to carry out at least 1 project described in sec-
6 tion 4(a)(2).

7 (2) ADMINISTRATIVE COSTS.—Each eligible en-
8 tity receiving a grant under this Act shall not use
9 more than 5 percent of the funds of such grant for
10 costs associated with the administration of activities
11 under this Act.

12 (3) DIRECT SUPPORT.—Each eligible entity re-
13 ceiving a grant under this Act shall use not less than
14 5 percent of the funds of such grant to provide di-
15 rect financial benefits or supportive services to direct
16 care professionals to support the financial needs of
17 such participants during the duration of the project
18 activities.

19 (b) SUPPLEMENT, NOT SUPPLANT.—An eligible enti-
20 ty receiving a grant under this Act shall use such grant
21 only to supplement, and not supplant, the amount of funds
22 that, in the absence of such grant, would be available to
23 address the recruitment, training and education, reten-
24 tion, and advancement of direct care professionals or pro-
25 vide support for family caregivers (or individuals seeking

1 to become such caregivers), in the State or region served
2 by the eligible entity.

3 (c) PROHIBITION.—No amounts made available
4 under this Act may be used for any activity that is subject
5 to the reporting requirements set forth in section 203(a)
6 of the Labor-Management Reporting and Disclosure Act
7 of 1959 (29 U.S.C. 433(a)).

8 **SEC. 7. EVALUATIONS AND REPORTS; TECHNICAL ASSIST-**
9 **ANCE.**

10 (a) REPORTING REQUIREMENTS BY GRANT RECIPI-
11 ENTS.—

12 (1) IN GENERAL.—An eligible entity receiving a
13 grant under this Act shall cooperate with the Sec-
14 retary and annually provide a report to the Sec-
15 retary that includes any relevant data requested by
16 the Secretary in a manner specified by the Sec-
17 retary.

18 (2) CONTENTS.—The data requested by the
19 Secretary for an annual report may include any of
20 the following (as determined relevant by the Sec-
21 retary with respect to the category of the grant and
22 each project supported through the grant):

23 (A) The number of individuals and the de-
24 mographics of these individuals served by each
25 project supported by the grant, including—

1 (i) the number of individuals recruited
2 through each such project to be employed
3 as a direct care professional;

4 (ii) the number of individuals who
5 through each such project attained employ-
6 ment as a direct care professional; and

7 (iii) the number of individuals who en-
8 rolled in each such project and withdrew or
9 were terminated from each such project
10 without completing training or attaining
11 employment as a direct care professional.

12 (B) The number of family caregivers par-
13 ticipating in an education or training program
14 through each project supported by the grant.

15 (C) The number of project participants
16 who through each such project participated in
17 and completed—

18 (i) work-based learning;

19 (ii) on-the-job training;

20 (iii) an apprenticeship program; or

21 (iv) a professional development or
22 mentoring program.

23 (D)(i) Other services, benefits, or supports
24 (other than the services, benefits, or supports
25 described in subparagraph (C)) provided

1 through each such project to assist in the re-
2 cruitment, retention, or advancement of direct
3 care professionals (including through education
4 or training for such professionals or individuals
5 seeking to become such professionals);

6 (ii) the number of individuals who accessed
7 such services, benefits, or supports; and

8 (iii) the impact of such services, benefits,
9 or supports.

10 (E) How each project supported by the
11 grant assessed satisfaction with respect to—

12 (i) project participants assisted by the
13 project;

14 (ii) individuals receiving services deliv-
15 ered by project participants, including—

16 (I) any impact on the health or
17 health outcomes of such individuals;
18 and

19 (II) any impact on the ability of
20 individuals to transition to or remain
21 in the community in an environment
22 that meets the criteria established in
23 the section 441.301(c)(4) of title 42,
24 Code of Federal Regulations (or suc-
25 cessor regulations); and

1 (iii) employers of such project partici-
2 pants.

3 (F) The performance of the eligible entity
4 with respect to the indicators of performance on
5 unsubsidized employment, median earnings, cre-
6 dential attainment, measurable skill gains, and
7 employer satisfaction.

8 (G) Any other information with respect to
9 outcomes of the project as determined by the
10 Secretary.

11 (b) ANNUAL REPORT TO CONGRESS BY SEC-
12 RETARY.—Not later than 2 years after the date of enact-
13 ment of this Act, and each year thereafter until all
14 projects supported through a grant under this Act are
15 completed, the Secretary shall prepare and submit to Con-
16 gress an annual report on the progress of each project
17 supported through a grant under this Act and the activi-
18 ties of the technical assistance center established under
19 section 3.

20 (c) GAO REPORT.—Not later than 1 year after the
21 date on which all projects supported through a grant
22 under this Act are completed, the Comptroller General of
23 the United States shall conduct a study and submit to
24 Congress a report including—

1 (1) an assessment of how the technical assist-
2 ance center established under section 3 and the
3 projects supported through a grant under this Act
4 assisted in the creation, recruitment, training and
5 education, retention, and advancement of the direct
6 care workforce or in providing support for family
7 caregivers; and

8 (2) recommendations for such legislative or ad-
9 ministrative actions needed for improving the assist-
10 ance described in paragraph (1), as the Comptroller
11 General determines appropriate.

12 (d) INDEPENDENT EVALUATIONS.—Not later than 6
13 months after the date of enactment of this Act, the Sec-
14 retary shall enter into a contract with an independent enti-
15 ty to provide independent evaluations of activities sup-
16 ported by grants under this Act and activities of the tech-
17 nical assistance center established under section 3.

18 **SEC. 8. AUTHORIZATION OF APPROPRIATIONS.**

19 (a) IN GENERAL.—There are appropriated, out of
20 any money in the Treasury not otherwise appropriated—

21 (1) for the establishment and activities of the
22 technical assistance center under section 3,
23 \$2,000,000 for each of fiscal years 2022 through
24 2026; and

- 1 (2) for grants under section 4, \$1,000,000,000
2 for fiscal year 2022.
- 3 (b) AVAILABILITY.—Amounts made available under
4 this Act shall remain available until September 30, 2031.