

OHCA Recommendations for CDC Strike Force Funds

We have the following recommendations for Ohio's allocation of \$27 million for the Nursing Home and Long-Term Care Facility Strike Team and Infrastructure Project under sections 9402 and 9818 of the American Rescue Plan Act (ARPA).

While the [project guidance](#) splits the funding into two buckets, one for skilled nursing facilities and the other for nursing facilities and other long-term care (LTC) facilities, the required and optional activities under each bucket are identical.

Accordingly, we recommend the following three activities, which would be available equally to all covered facilities.

1. Continue and enhance R³AP.

- Enhance the Regional Rapid Response Assistance Program (R³AP) by making emergency staffing available to facilities through the National Guard or another source. Ensure that the staff supplied are not taken from other facilities because doing so would exacerbate the shortage.
- Make R³AP available 24/7/365 for staffing emergencies.
- Review existing R³AP functions with stakeholders to ensure they provide value to facilities and people served that justifies their cost.
- Allocate \$5-7 million for this program in CY 2022.
- This proposal fulfills the following required activity specified in the guidance: "Providing in-person and remote support (e.g., strike teams, technology solutions, etc.) to facilities experiencing cases and clusters of SARS-CoV-2. This may include: Developing and implementing strategies to monitor, prevent, and respond in order to increase surge capacity for clinical services or to retain, support, and expand existing staff to prevent shortages in long-term care facilities during SARS-CoV-2 outbreaks."

2. Create long-term care student loan forgiveness program.

- Immediately attract personnel to long-term care settings by eliminating their student loan payments and giving them more disposable income.
- Must agree to work in LTC for three years.
- The loan forgiveness would need to be significant (e.g., up to \$25,000 for RNs) to be an effective incentive.
- Allocate \$16 million for this program. This level of investment is necessary to have impact. We estimate, for example, it could attract as many as 150 RNs, 650 LPNs, and 250 STNAs/DSPs.
- This recommendation also fulfills the required activity listed above because it is a strategy to retain, support, and expand existing LTC staff. CDC's "[Paper #1](#)" that advises states on how to use the funds suggests pursuing initiatives to increase the

eligible LTC direct care workforce, such as campaigns highlighting the importance and value of LTC and scholarship or loan forgiveness programs for LTC workers.

- In addition, this proposal addresses two of the optional activities in the guidance: “Supplying resources (e.g., staffing, testing materials or equipment, PPE, information technology tools, direct financial support) to support rapid detection and response in ... facilities based on identified gaps [and] [p]roviding infrastructure to support ... facility healthcare personnel and resident safety”

3. Implement campaign promoting long-term care work.

- Together with stakeholders (including LTC associations, ODE, career/technical centers, communications experts, et al.), develop an effective, multi-pronged approach promoting careers in LTC and encouraging young people to enter the profession.
- Allocate \$4-6 million for this program in CY 2022.
- As outlined above, this recommendation also fulfills the required and optional activities, in accordance with CDC’s suggestions in Paper #1.

We appreciate your consideration of our recommendations and would welcome the opportunity to continue working with you as you develop the proposals for CDC and the Controlling Board.