

MARYLAND

Changes Made in 2003 Appear in Bold

| 1. WAGE/BENEFIT ENHANCEMENTS | | 2. TRAINING AND OTHER INITIATIVES | 3. TASK FORCES & COMMISSIONS |
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| <p>Wages (includes wage pass-throughs)</p> <ul style="list-style-type: none"> In FY02 \$20m was added to nursing home reimbursement to improve compensation (wages or benefits) and staffing levels for direct-care workers. An additional \$20m increase is planned for FY03 (SB 794, 2000) Undertaking a multi-year effort to bring wages of community workers who serve people with developmental disabilities into parity with their counterparts in State Residential Centers (SB 432, 2001) | <p>Benefits</p> <ul style="list-style-type: none"> For both wage enhancements, the goals are improved retention, improved ability to recruit new workers, and ultimately improved quality of care. | <p>(Includes career ladders)</p> | <ul style="list-style-type: none"> The Statewide Commission on the Crisis in Nursing addresses the state nursing shortage, 2000 Nursing Home Report Card Steering Committee, 1999 Oversight Committee on Quality of Care in Nursing Homes, 2000 |

| 4. STAFFING RATIOS | 5. SYSTEMS CHANGE GRANT WORKFORCE INITIATIVES | 6. OTHER INITIATIVES NOT COVERED ABOVE |
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| <p>Code of MD Regulations 10.07.02</p> <ul style="list-style-type: none"> Comprehensive Care Facilities: <ul style="list-style-type: none"> 1 FT RN (2-99 residents) 2 FT RNs (100-199 residents) 3 FT RNs (200-299 residents) 4 FT RNs (300-399 residents) Ratio no less than 1:25 for nursing personnel | <ul style="list-style-type: none"> Real Choice Systems Change Grant includes \$60k over 3 years to fund and promote 'job fairs' to recruit potential HCBS waiver personal care providers, complete paperwork and meet qualifications. Includes free CPR/First Aid training and reduced cost criminal background checks | <ul style="list-style-type: none"> Developmental Disabilities Administration and Community Services Reimbursement Rate Commission survey providers annually and have collected turnover data using the same methodology since 2000. To view most recent report see: www.dhmd.state.md.us/csrrc |