

2027 ADRC Scope of Services

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Scope of services update 1: Commitment to Access

- A section under Role of the ADRC pertaining to accessibility has been moved from this section into section I.E. “Commitment to Access” on p. 6.

Scope of services update 2:

- The heading of section I. E. “Commitment to Equitable Access” has been revised to “Commitment to Access.”
- The paragraph from the introduction was moved to the bottom of this section and the text remains the same.

Scope of services update 3:

- On page 8, the section “Transitional Services to Youth” has been inserted as a subsection “Long-Term Care Options Counseling” to mirror its placement in our operations manual.
- This was previously a stand-alone section of Core Services. The text remains the same.

Scope of services update 4

- On page 11, “Partnership with the DBS program attorneys” has been renamed as “Partnership with the DBS program support services grantee.”
- This section also includes some updated language for clarity, but these updates do not change program requirements.

Scope of services update 5:

- On page 12, “Partnership with the EBS program attorneys” has been renamed as “Partnership with the EBS program support services grantees.”
- This section also includes some updated language for clarity, but these updates do not change program requirements.

Scope of services update 6:

- On page 17, a new section has been added under Organizational and Procedural Standards: “Governing Board.” The section links to the Governing Board chapter of the ADRC Operations Manual.

Scope of services update 7:

- On page 18, Inform USA as a certification requirement was removed. In its place, it says: “All staff that provide information and assistance must successfully complete required DHS training and certification.”

Scope of services update 8:

- On page 21, the requirement regarding governing board agendas and minutes has been removed from the Reporting and Records section.

BUILDING SKILLS, BUILDING CAREERS IN CARE

Strengthening Training, Employment, and Career Pathways for Direct Care Workers in
Wisconsin

Stephen McCall, Director of Research and Evaluation



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September 8, 2026

Agenda



By the Numbers

State of the Direct Care
Workforce in Wisconsin



Background

The Universal Direct Care
Workforce Initiative in
Wisconsin



From Research to Action
Building Toward a Universal
Approach in Wisconsin

BY THE NUMBERS

State of the Direct Care Workforce in Wisconsin

BY THE NUMBERS

Who are direct care workers in Wisconsin?

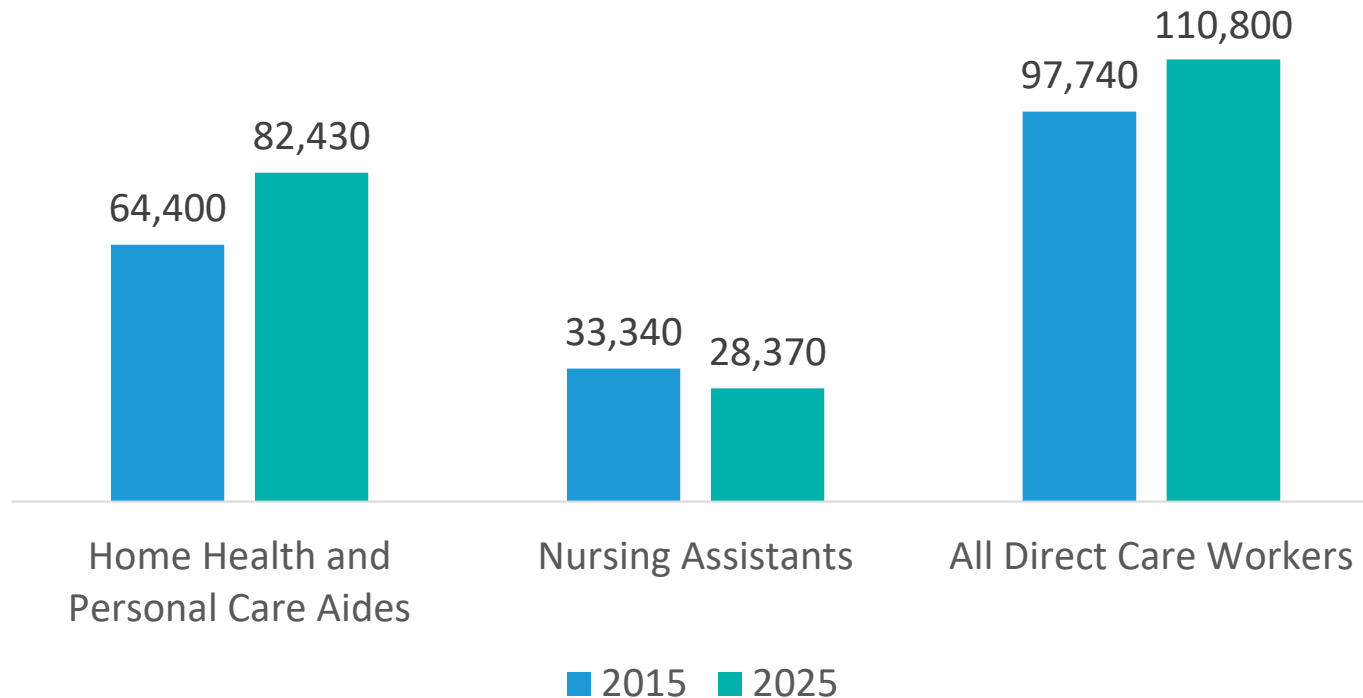
Direct care workers in Wisconsin are primarily women, and many are people of color.

	Women	People of Color	Median Age
All Industries	86%	35%	38
Home Care	81%	40%	46
Residential Care	89%	31%	35
Nursing Homes	95%	33%	31

Source: Ruggles, Steven, Sarah Flood, Matthew Sobek, Daniel Backman, Grace Cooper, Julia Rivera Drew, Stephanie Richards, Renae Rodgers, Jonathan Schroeder, and Kari Williams. 2025. IPUMS USA: Version 16.0 American Community Survey, 2024. Minneapolis, MN: IPUMS. <https://doi.org/10.18128/D010.V16.0>; analysis by PHI (May 2026).

BY THE NUMBERS

Direct Care Worker Employment in Wisconsin by Occupation, 2015 To 2025

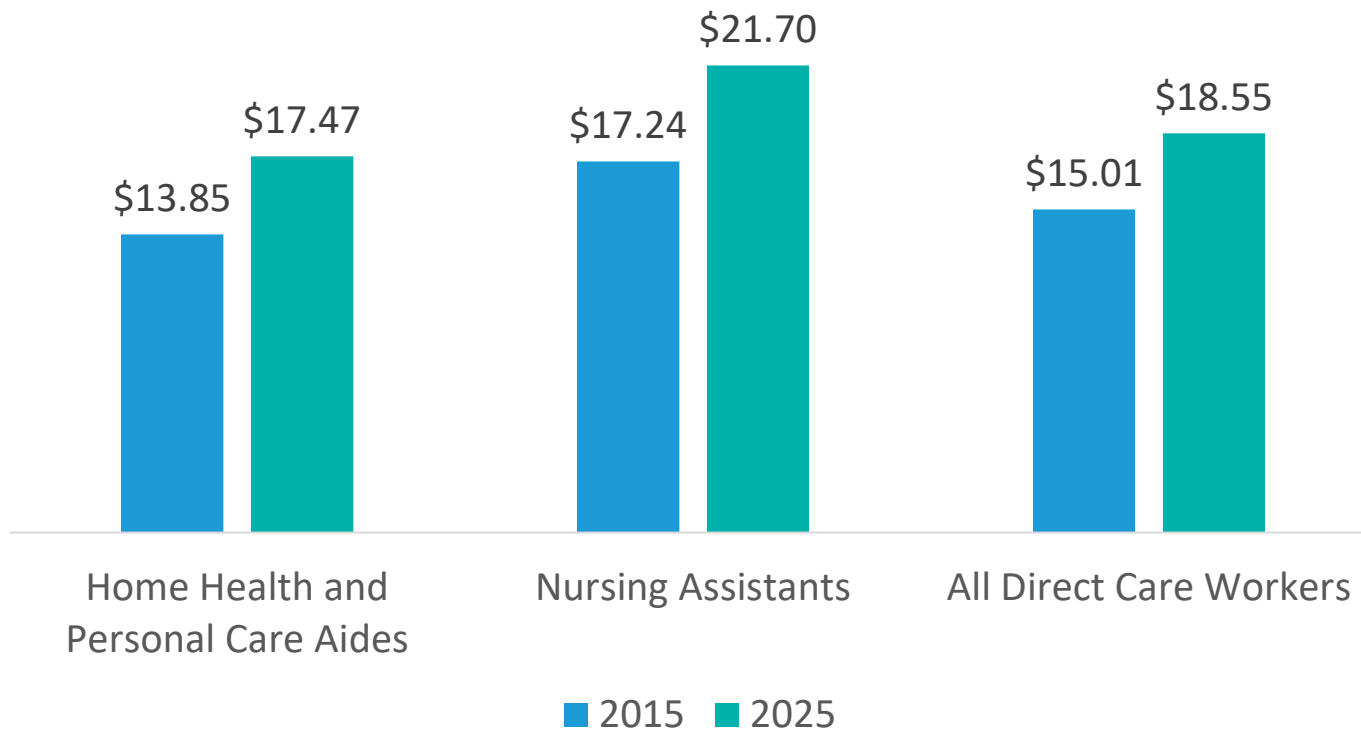


- Over the past decade, personal care and home health aides added over 18,000 new jobs.
- In contrast, the nursing assistant workforce declined by nearly 5,000 jobs.
- These trends reflect growing demand for home and community-based services over nursing home care.

Source: U.S. Bureau of Labor Statistics (BLS), Division of Occupational Employment and Wage Statistics (OEWS). 2026. May 2015 to May 2025 All Data. <https://www.bls.gov/oes/tables.htm>; analysis by PHI (June 2026).

BY THE NUMBERS

Direct Care Worker Real Median Hourly Wages in Wisconsin by Occupation, 2015 to 2025



- After adjusting for inflation, direct care worker wages have increased by \$3.54 over the past decade.
- Wages for home health and personal care aides grew by \$3.62, while wages for nursing assistants grew by \$4.46.

Source: U.S. Bureau of Labor Statistics (BLS), Division of Occupational Employment and Wage Statistics (OEWS). 2026. May 2015 to May 2025 All Data. <https://www.bls.gov/oes/tables.htm>; analysis by PHI (June 2026).

BY THE NUMBERS

What are the challenges for direct care workers in Wisconsin?

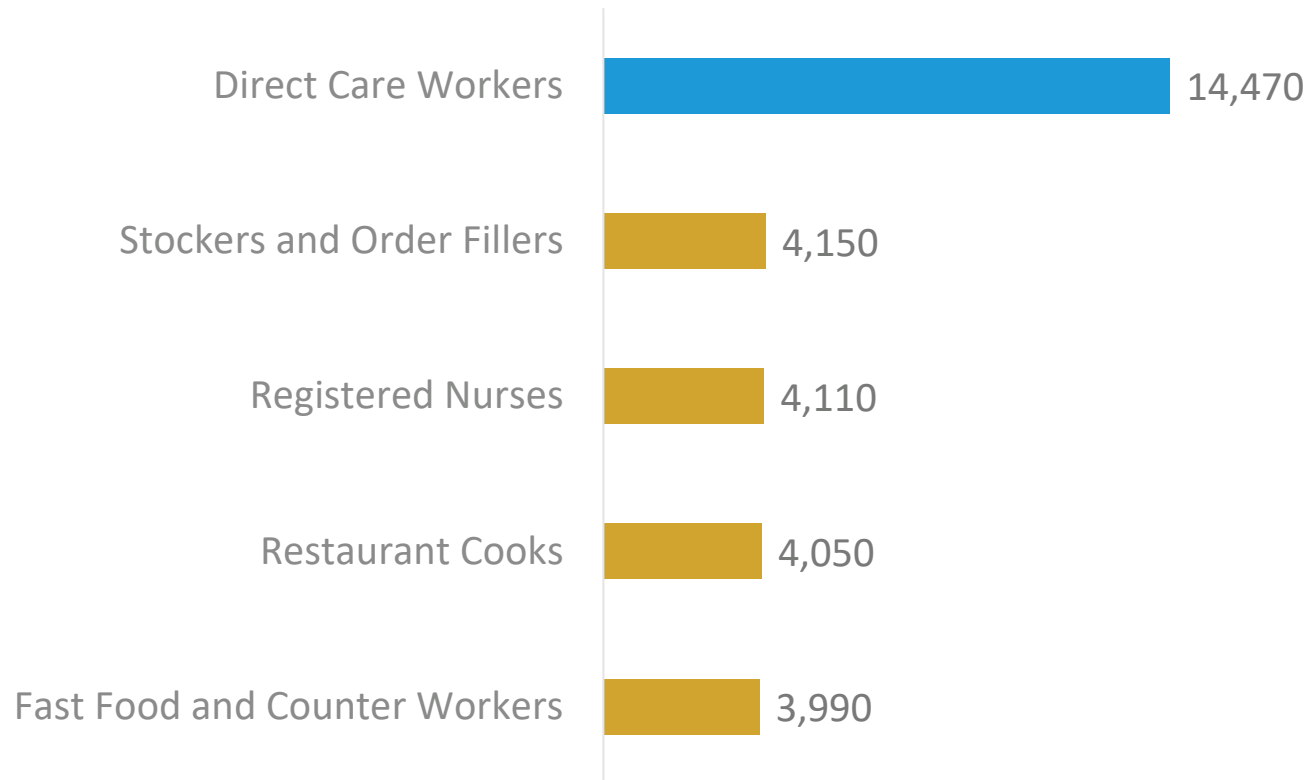
Low wages and part-time hours translate into low annual earnings, high rates of poverty, and reliance on public assistance for basic needs.

	Part-Time	Low-Income Households (<200% FPL)	Rely on Public Assistance
All Industries	47%	34%	37%
Home Care	50%	36%	46%
Residential Care	45%	40%	38%
Nursing Homes	48%	29%	33%

Source: Ruggles, Steven, Sarah Flood, Matthew Sobek, Daniel Backman, Grace Cooper, Julia Rivera Drew, Stephanie Richards, Renae Rodgers, Jonathan Schroeder, and Kari Williams. 2025. IPUMS USA: Version 16.0 American Community Survey, 2024. Minneapolis, MN: IPUMS. <https://doi.org/10.18128/D010.V16.0>; analysis by PHI (May 2026).

BY THE NUMBERS

Occupations with the Most Job Growth in Wisconsin, 2024 to 2034

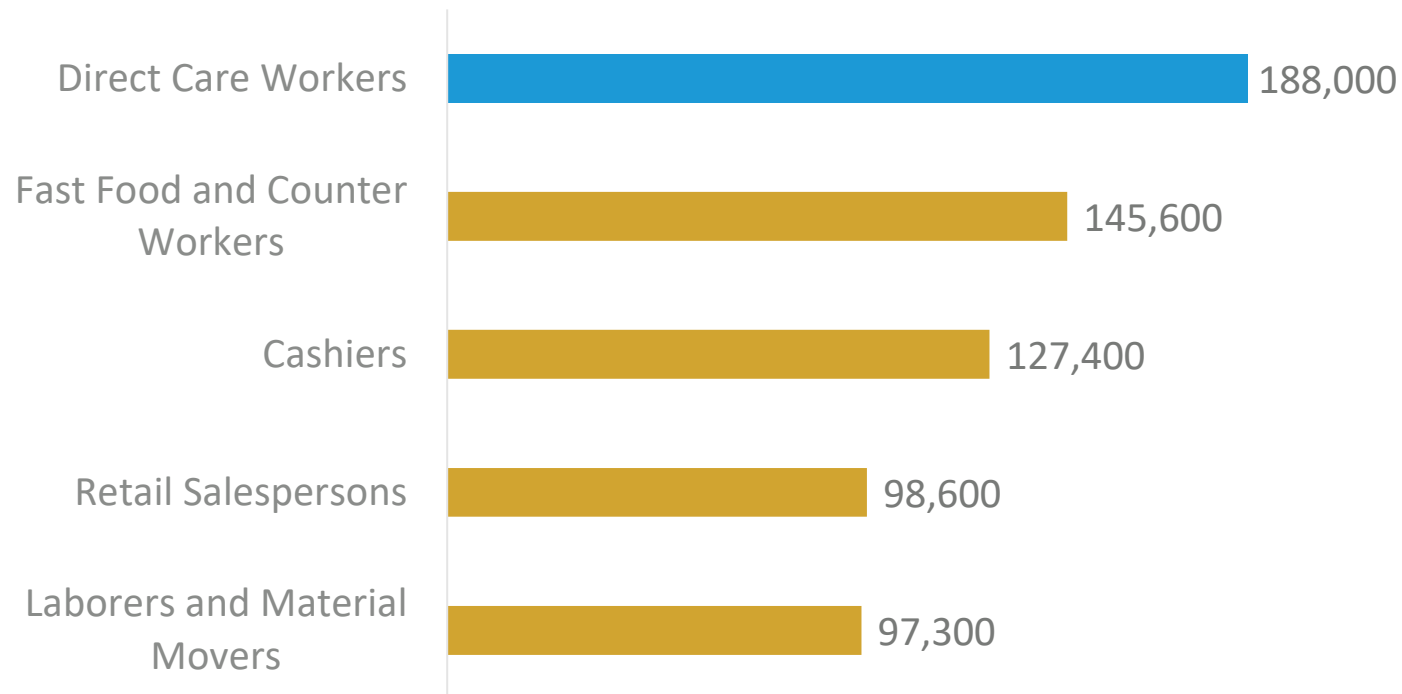


- The direct care workforce is projected to add more new jobs than any single occupation.
- Home health and personal care aides are projected to add 13,790 jobs, while nursing assistants are projected to add 680.

Source: Projections Central. 2026. Long-Term Projections (2024 to 2034). <https://projectionscentral.org/longterm>; analysis by PHI (August 2026).

BY THE NUMBERS

Occupations with the Most Job Openings in Wisconsin, 2024 to 2034



- After accounting for separations and labor force exits, the direct care workforce is projected to have 188,000 total job openings, more openings than any single occupation.
- This figure includes 147,500 openings for home health and personal care aides and 40,500 for nursing assistants.

Source: Projections Central. 2026. Long-Term Projections (2024 to 2034). <https://projectionscentral.org/longterm>; analysis by PHI (August 2026).

Introducing the Universal Direct Care Workforce Initiative

A Universal Workforce For A Universal Need

One Model, Four Components

Universal Entry-Level
Competencies



Integrated Career
Pathways



Accessible Training
Infrastructure



Portable Stackable
Credentials



An Iterative Journey

Building on Our Long History in Wisconsin



2015 - 2017
**Landscape
Analyses**



2018 - 2021
**Recruitment and
Retention
Interventions**



2022 - 2024
**Advanced Role
Implementation**



2025 - 2027
**Universal Worker
Initiative**

FROM RESEARCH TO ACTION

Building Toward a Universal Approach in Wisconsin

FROM RESEARCH TO ACTION

What We Learned About Entry-Level Training in Wisconsin



- Training for PCAs has historically been employer-driven and heavily influenced by reimbursement levels.
- Wisconsin is building a more cohesive and consistent entry-level direct care training system, with the Certified Direct Care Professional (CDCP) program as a unifying platform.
- Employers in Wisconsin currently use a range of entry-level training strategies and resources, including the CDCP program.

FROM RESEARCH TO ACTION

Strengthening Entry-Level Training in Wisconsin



- Address barriers to CDCP completion through additional supports for learners.
- Diversify learning opportunities through learning laboratories or communities of practice.
- Expand access to individual CDCP modules.
- Consider creating flexible, accessible pathways to CDCP credentials.

FROM RESEARCH TO ACTION

Demonstrating the Value of Entry-Level Training in Wisconsin



- Shepherd **60 workers** through CDCP training and a PHI learning lab.
- Document strategies that support or could support worker enrollment and completion of the CDCP training.
- Develop a set of practical tools to help agencies encourage learner participation and engagement.
- Evaluate the impact of asynchronous online and in-person training on learner and workforce outcomes.

FROM RESEARCH TO ACTION

What We Learned About Specialized Training in Wisconsin



- Direct care workers increasingly support individuals with dementia, behavioral health conditions, and other complex needs.
- Employers draw from a range of sources to fill training gaps.
- The CDCP program's micro-credential system creates a scalable framework for specialized training.

FROM RESEARCH TO ACTION

Strengthening Specialized Training in Wisconsin



- Continue to expand the repository of CDCP micro-credentials.
- Create voluntary employer accreditations based on worker completion of specialized training, among other criteria.
- Evaluate the impact of specialized training.

FROM RESEARCH TO ACTION

Demonstrating the Value of Specialized Training in Wisconsin



- Launch four condition-specific specialty trainings (e.g., dementia, behavioral health, diabetes, skin integrity), reaching at least **75 workers** across partner agencies.
- Evaluate the impact of specialty training on individual learners and the workforce.
- Integrate specialty trainings into the CDCP micro-credentialing system, as feasible.

FROM RESEARCH TO ACTION

What We Learned About Advanced Roles in Wisconsin



- Some organizations in Wisconsin that have adopted advanced roles report positive outcomes including improved retention, service delivery, and care coordination.
- Medicaid reimbursement structures limit employers' ability to pay more for higher skill levels or degrees of responsibility

FROM RESEARCH TO ACTION

Strengthening Advancement Opportunities in Wisconsin



- Develop advanced micro-credentials through the CDCP focused on care coordination, peer mentorship, and other specialized roles.
- Build the evidence base for advanced roles and explore payment model innovations.
- Facilitate peer learning among employers.

FROM RESEARCH TO ACTION

Demonstrating the Value of Advancement Opportunities in Wisconsin



- Convene a cross-organizational Implementation Team to drive the launch of a new cohort of **15 Care Integration Senior Aides (CISAs)**.
- Train care team members to work effectively with CISAs.
- Evaluate the impact of CISAs on client health care utilization and outcomes.

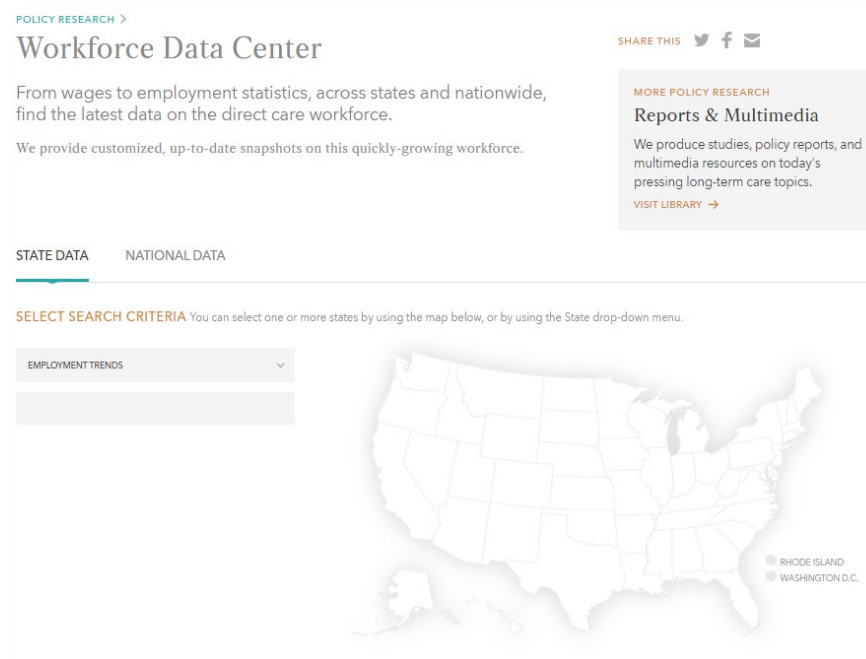
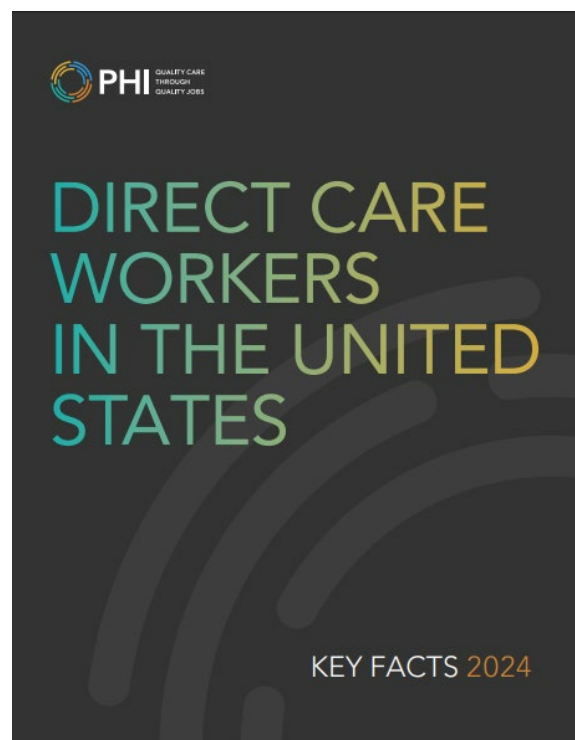
PHI's Focus on Wisconsin

Policy, practice, research, and evaluation to transform the direct care workforce in Wisconsin

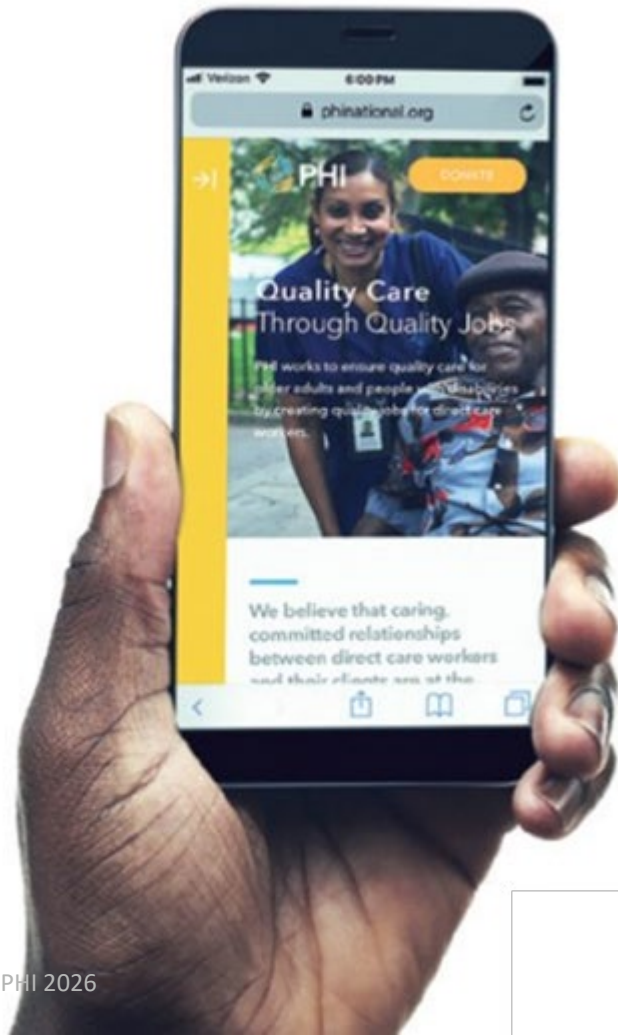


PHI's Signature Data Products

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- Subscribe to our newsletter: phinational.org/sign-up/
- Join our online community on Facebook, Bluesky, and LinkedIn ([@phinational](https://twitter.com/phinational)).
- Stay tuned for details about our Key Facts webinar next month!



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Long Path Update

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Public Policy Strategist

September 8, 2026

Reframing Aging and Disability

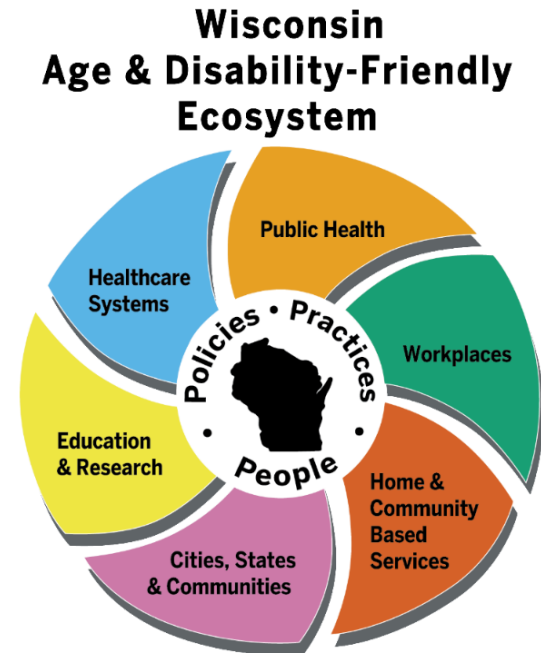


- HCBS Conference
 - Dance Party
 - Dolly Parton
- NCRA Summit 9/16/2026
 - [Summit 2026: The Movement to Reframe Aging](#)
- Wisconsin
 - Sole Source and Future Trainings
 - [ADILN - UW-Green Bay](#)
 - The Reframing Hub is here
 - [Reframing Aging & Disability in Wisconsin | WIHA](#)



Age and Disability-Friendly Ecosystem

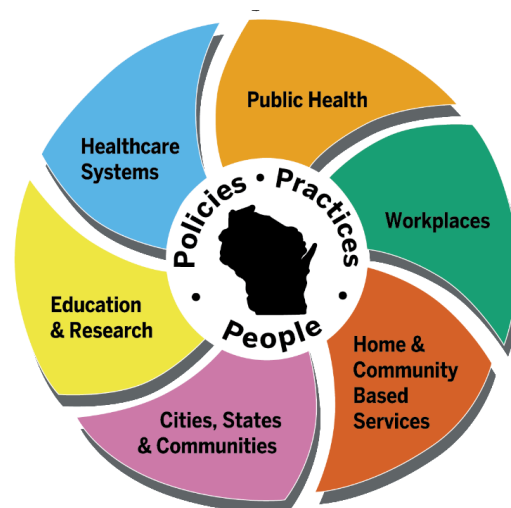
- HCBS Conference
- Wisconsin
 - Investments: Website through the Wisconsin Geriatric Education Center grant
 - Spread and Connections
 - Public Health
 - Communities
 - Health Systems – What **M**atters
 - Integration of Disability



Wisconsin Age & Disability-Friendly Ecosystem

Creating a more inclusive Wisconsin through collaboration, accessibility, and innovation.

Wisconsin is advancing an Age & Disability-Friendly Ecosystem that unites healthcare, public health, workplaces, universities, communities, and home and community-based services to create inclusive, accessible systems for all of us as we age or experience disability.



SHARED VALUES

- **People First** – *We value lived experience, foster inclusion and equity, and build trusting relationships that strengthen individuals and communities.*
- **Collaborative Leadership** – *We engage diverse partners, respond with purpose, and lead through shared accountability, active participation, and meaningful collaboration.*
- **Sustainable Impact** – *We pursue healthy communities through creativity, adaptability, perseverance, and a long-term commitment to continuous improvement.*

WHY THIS MATTERS

- We are all aging! Currently, 1 in 5 Wisconsin residents are aged 60 or older.
- Almost 1 in 10 Wisconsin residents under the age of 60 have a disability.
- What supports older adults and people with disabilities, serves us all.
- Cross-sector collaboration generates system-level changes.
- Ageism and ableism cause unintended harm and create barriers to population health.

Ageism refers to stereotypes (how we think), prejudice (how we feel) and discrimination (how we act) toward others or oneself based on age.

Ableism is comparable but based on the belief that people with disabilities are less capable or valuable.

KEY GOALS

- Expand the number of organizations in WI officially designated as age-friendly.
- Increase public awareness of age-friendly designated organizations.
- Integrate a disability-friendly lens into all age-friendly sectors in Wisconsin.

Join the movement to build a more inclusive, accessible, and equitable Wisconsin for people of all ages and abilities.

Wisconsin Age-Friendly Designees (current as of June 2026)

Public Health Designees: 4 Contact: Trust for America's Health www.tfah.org	Education and Research Designees: 3 Contact: Age-Friendly University Global Network, Arizona State University https://www.afugn.org/
Health Care Systems Designees: 56 Contact: Institute for Healthcare Improvement https://www.info@ihi.org	Cities, States, and Communities Designees: 15 Contact: AARP https://www.aarp.org/livable-communities/network-age-friendly-communities/ UW-Madison Division of Extension: https://aging.extension.wisc.edu/topics/aging-friendly-communities/
Workplaces Designees: 0 Contact: Age Friendly Institute https://institute.agefriendly.com/initiatives/certified-age-friendly-employer-program/	Home and Community-based Services No Designation exists Reframing Aging and Disability in Wisconsin Champions List

Leadership Team Organizations:

Wisconsin Department of Health Services • Wisconsin Geriatric Education Center • Advocate Health • Eau Claire City-County Health Department • Waukesha County Public Health • Wauwatosa Health Dept • Greendale Public Health Department • UW-Superior • UW-Green Bay • Northwood Technical College • AARP Wisconsin • UW-Madison Division of Extension • Options for Independent Living • UW-Eau Claire

For more information contact: Helen Sampson, Public Policy Strategist,
Helen.Sampson@dhs.wisconsin.gov, Wisconsin Department of Health Services