WISCONSIN DEPARTMENT of HEALTH SERVICES

Long Path Update

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Reframing Aging and Disability

- Established Hub for information and collection of examples, sign up for Champions Newsletter, register for trainings
- Training with NCRA into 2027
- Evaluation of Advisory Committee
- Community of Practice

Wisconsin Age and Disability-Friendly Ecosystem



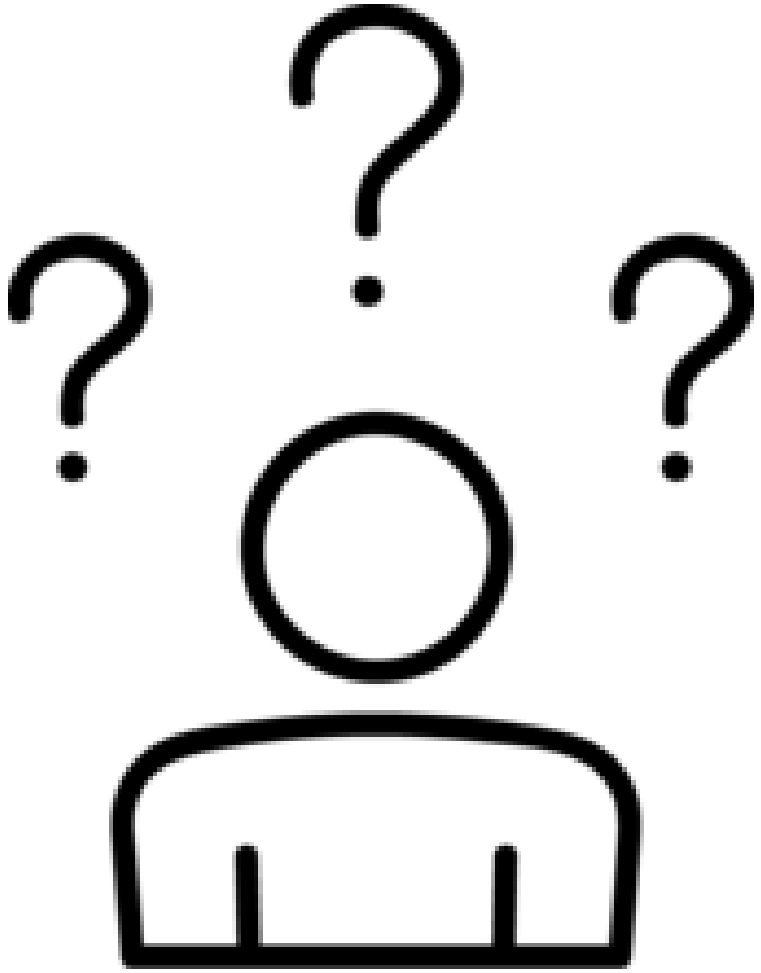
- Age-friendly workplaces
- Website support through the Geriatric Education Center at Marquette
- Reaching out, connecting dots, and following up
- Considering the new landscape
- Beginning to think about integration with Age-friendly Dementia, Caregiver Friendly, accessible

LTCAC Members Possible Roles

REFRAMING AGING+DISABILITY WISCONSIN

- Visit the Reframing Aging and Disability Hub and offer feedback.
- Are you connected with a petal on the ecosystem? What do you need to feel comfortable talking about age and disability-friendly ecosystems to your connections? I'm here to help.
- Who do you know that should be involved in this work?
- Attend one of the reframing trainings if you have not already or repeat for practice.





What's Next

- Building a next generation leadership
- Exploring Strategic Foresight
- Considering Multi-Sector Plan for Aging (MPA)

Long-Term Care Advisory Committee (LTCAC) Workforce Charge
2026-27 Recommendations for the Department of Health Services
November 2026 – DRAFT FOR LTCAC DISCUSSION

Recommendations for Family Caregivers and Other Natural Supports (People who provide unpaid care.)

1. **Caregiver Assessment and Referral Process.** The LTCAC proposes that the Department of Health Services (DHS):
    a) Explore options to pilot, for one year, an evidence-based care management protocol to support family members caring for adults of any age with chronic or acute health conditions. The assessment should include questions for the family or informal caregiver that evaluate their health and well-being, stress levels, caregiving challenges, needed skills, available informal support and strengths. Following the assessment, individuals should be connected to services and support that align with their identified needs.
    b) Include statewide outreach and marketing efforts that align with the WI Family and Caregiver Support Alliance work.

2. **Caregiver Support Provided by Aging and Disability Resource Center (ADRC).** The LTCAC proposes that DHS:
    a) Explore options to expand eligibility and resources for existing caregiver support programs to include caregivers of individuals under age 60.
    b) Require every ADRC to designate a "Caregiver Coordinator" who is responsible for managing caregiver programs and making sure caregiving stays a clear focus area.
    c) Encourage the aging and disability network to assess and evaluate the degree to which they are supporting family caregivers and providing the level or service that's expected of them through contract or otherwise.

3. **The CARE Act.** The LTCAC proposes that DHS:
    a) Advocate for Wisconsin to join with 42 other States that have adopted the CARE Act. The CARE Act establishes requirements for hospitals to identify family caregivers, notify them of discharge plans and provide instruction on post-discharge care tasks.
    b) Encourage the healthcare field and allied professions to acknowledge caregivers as patients. Caregivers often need their own supports and resources. Awareness and education should be included during medical training for physicians and staff. It is especially important for those who are engaged in geriatric-related practices.

Recommendations for the Direct Care Workforce (Employees who provide caregiving for a wage).

4. **Policy and Infrastructure Advocacy.** The LTCAC recommends DHS:
    Explore investments and legislative support for workforce initiatives by:
    a. Preparing a comprehensive 2027–29 DHS budget request that includes long-term workforce development strategies, including those outlined in this paper.
    b. Educating the new executive administration and incoming legislators on the workforce challenges facing Wisconsin.
    c. Working with advocates to advance shared policy and infrastructure initiatives.

d. Create “caregiver friendly employers” that are integrated into age-friendly work.

5. **Recruitment and Career Awareness of Care Workers.** The LTCAC recommends DHS:
   Assist with the recruitment of care workers across the long-term care system (including nursing homes, assisted living, in-home care, personal care and self-directed supports programs) by:
   a. Creating a statewide marketing strategy to recognize and recruit direct care workers.
      i. Develop and disseminate customizable marketing tools to community and facility-based provider agencies, trainers, health care employers and other partners for their use in social media, on websites and other outlets to attract prospective employees.
      ii. Include recognition for unpaid/family caregivers in the awareness campaigns.
      iii. Promote community-centered recruitment strategies, including creating community outreach and awareness campaigns, with input from families, participants and a variety of local voices.
      iv. Expand the workforce by engaging underserved communities; partner with refugee and immigrant organizations to recruit new caregivers.
   b. Pursuing funding to create a sustainable statewide recruitment program. DHS would administer the program, manage a revised WisCaregiver Career website and oversee amended contracts and interagency agreements for marketing and tracking. The program would also include mini grants to providers and an evaluation component.
   c. Working with DPI, technical colleges and universities to:
      i. Create a statewide model for early-career development, expanding upon the WisCaregiver Careers High School, Tech College and University initiative.
      ii. Create a course or career pathway for high school students to take a class(es) in caregiving- recognizing some may already be unpaid caregivers.
   d. Continue building on the Certified Direct Care Professional (CDCP) program. Specialty trainings and advanced roles could be integrated into the CDCP micro-credentialing system. Provide flexible and accessible access to the trainings and its credentials.
   e. Support the Recognize, Assist, Include, Support & Engage (RAISE) work that is based on the RAISE grant priorities.

6. **Workforce Support and Retention.** The LTCAC recommends DHS:
   a. Develop options for developing and sustaining retention bonuses and wage stabilization programs to retain existing direct care workers. This includes developing a mechanism for direct care workers employed under the IRIS program.
   b. Work with employers (such as assisted living, nursing facility, home care providers) and policy makers to expand access to mental health and well-being supports tailored for care workers.

7. **Integrated Care Systems and Workforce Connectivity.** The LTCAC recommends DHS:
   Build a unified statewide infrastructure to support seamless communication, credentialing and workforce mobility. Expand WisCaregiver Careers to include all LTC participants, facilities and providers in the same system.
   a. Create a universal LTC workforce and care coordination platform where caregivers, facilities and participants across all programs can connect, share job postings and deploy staff countywide.

b. Establish credentialing and training systems state-wide, allowing staff to work across programs regardless of employer or benefit structure. Include a registry that is available to providers.

8. **Innovative, Inclusive Community Based Care.** The LTCAC recommends DHS:

Expand and elevate home and community-based care through innovation and access by:

a. Promoting smart home care innovations, including remote monitoring and userdirected technology.
b. Building resident-owned community health co-ops, offering holistic care, wellness education and telehealth with local control