From Consumer Voices to Advocacy Action!

National Consumer Voice for Quality Long-Term Care

Sarah Wells, Executive Director
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Webinar – November 13, 2012

Welcome! Introductions! Review of the Agenda

- Presented by Sara Cirba, Advocacy and Development Associate with the Consumer Voice

About Us

The Consumer Voice is the leading national voice representing consumers in issues related to long-term care, helping to ensure that consumers are empowered to advocate for themselves. We are a primary source of information and tools for consumers, families, caregivers, advocates and ombudsmen to help ensure quality care for the individual.

Agenda

1. Introduction & Overview of new ConsumerVoice report: Consumer Perspectives on Quality Home Care
   Presented by Sarah Wells, Executive Director

2. Share public policy recommendations from new report
   Presented by Robyn Grant, Director of Public Policy & Advocacy

3. Using e-mail communications to influence public policy
   Presented by Sarah Wells, Executive Director

4. Bringing it all together – how to put policy recommendations from report into action
   Presented by Robyn Grant, Director of Public Policy & Advocacy
Consumer Perspectives on Quality Home Care

- Let’s turn it over to Sarah Wells, Executive Director of the Consumer Voice to talk with us about our exciting new report.

Introduction

- Consumer Voice expanded mission
- Report part of a three-year initiative
- Builds off of 1985 report, "A Consumer Perspective on Quality Care: The Residents’ Point of View"
- The time is right – federal/state/advocacy efforts for home care

Project Goals

- How do individuals receiving care in their homes perceive the quality of their services?
- Why do consumers want care in their homes versus in a nursing home?
- How could home care be improved?
- What do consumers see as the role of government in ensuring quality home care?

Methodology

- Three-tier outreach process
  - One-on-one phone interviews
  - Online survey
  - National conference call focus group
- Interviewees
  - Reached 300, included 221 who were eligible
    - Must reside at home
    - Must receive paid care services
    - Must receive more than just home-delivered meals
### Methodology

- Responses anonymous; won’t impact care
- Found consumers through:
  - E-mail outreach
  - National Advisory Councils
  - Other partners across states

### Interviewers

- Ombudsmen, family members, aging experts, other advocates, etc.
- Found through e-mail requests for help and a five-state pilot project on home care quality, also part of the "Consumers for Quality Care, No Matter Where" initiative.

### Interview Questions

- Developed by Consumer Voice staff to achieve goals.
- Prior to launch, interview questions reviewed by a national advisory council and two researchers and tested with several consumers.

### Why Home Care?

- Consumers want to be at home, because:
  - Fear of poor care and being out of one’s own element in a nursing home
  - Desire to stay independent
  - Wanting to make one’s own decisions

### Methodology

- Online survey tool
- National conference call focus group
### Why Home Care?

#### Care at home gives me choices

The consumers reached felt strongly that home care is more personalized; for instance, many can set their own schedules and tell their worker(s) what they want and do not want. A number of people said it was very important to them to keep their pet(s), which they could only do at home. Other consumers were living with their spouse or other family member (who did not need long-term care) and would not want to leave that person/people to enter a facility.

#### Care at home keeps me active in the community

A number of consumers interviewed felt that receiving support in their home enabled them to get out in the community, such as visiting with other people at an adult day center, volunteering at church or simply going shopping at the mall. On the flip side, a number of consumers felt confined to their homes and wished they could venture out more, as discussed later in the section on ways to improve home care.

#### Care at home gives me a feeling of hope

Consumers frequently said that they felt hopeful staying at home; that it gave them a sense that they were actually getting better and not just maintaining or on the downhill path that they believed they would have experienced in a nursing home. One individual also said, "The worker can focus on just me and not on all the other people they have to take care of in a nursing home."

#### Care at home is better than a nursing home

Some home care consumers had a very negative perception of nursing homes, "My father was in a nursing home, and I don't like them because of his time there. Workers would steal his money, his medications and his personal belongings." Another individual told us, "I was in a nursing home for seven weeks and nearly lost my mind because it wasn't the place for me to be."
Workers

Workers are essential to the quality of life and quality of care for long-term care consumers. The experience of the older adult receiving care at home is determined by his or her interactions with direct care worker(s).

My worker makes a difference

Consumers described their workers as optimistic, honest, kind, gentle, etc. One interviewee said, "[My worker] listens to what I have to say. For example, I tell her to clean the toilet with Comet and she does it." Another consumer shared how her worker helps her to match up her clothes each morning, which makes her feel better about herself when she goes out. It appears that it is often the "little things," like cleaning the house in the way the consumer used to do themselves, that make a big difference for people.

“Workers

“My worst day at home is better than my best day in the nursing home.”

“Workers

“She treats us like family and we treat her like family. We only have sons, so we feel that God gave us a daughter in [our worker].”
Workers

- **My worker is like family**

  When asking consumers how a worker should get to know them, one individual said, "ask me, what is your philosophy in life?" The relationship between the consumer and the home care worker seems to transcend other healthcare settings in terms of the worker(s)’ knowledge about the consumer’s preferences and needs as well as the relationship that can develop between worker and consumer; the worker is in the individual’s home, where the interaction can happen at a deeper level, sometimes to the point where the worker becomes part of the family unit; "We are best friends, more like sisters, I can’t think of how we could be any closer. Just through casual conversation that built trust."

Workers

- **My worker could do better**

  Of course, not all consumers reached were happy with their worker(s). One individual said: "workers need to pay close attention to their client’s physical needs and talk to us like adults – they should not talk down to you or call you ‘sweetie.’ I say ‘call me by my name.’ Also, they need to learn to listen and learn. Don’t get preconceived ideas and don’t be afraid to ask. I tell them that you won’t look stupid if you ask me questions."

  A number of consumers said that workers are not fulfilling their potential or that the agency was not able to recruit the right kinds of workers because direct care work is an unattractive job (in pay, benefits, etc.). One individual shared, "Maybe if care givers were paid more for the job, it would attract more intelligent and skilled workers. There are a lot of people without any common sense working in consumer’s homes or with no understanding of disabled constraints."

Care Planning

- **Does Care Planning Play a Role in Home Care As It Does in Nursing Homes?**

  "I always give ’em a hug when they’re done. I’m old enough to be their great-grandmother."
Care Planning

- Consumers mixed on this issue.
  - Those in favor: It can be helpful and it should be reviewed regularly
  - Those not in favor: It inhibits flexibility between consumer and worker; it can be offensive to the worker; I like to “go with the flow”
  - Many consumers have a system in place already
  - Many consumers did not realize they already had a written plan of care (for their medical care at a minimum)

Getting Help

Who do consumers turn to for help?

- Home health care agency (worker's employer)
- Family
- Case worker
- Disability lawyer
- Council on Aging
- Visiting Nurse Association
- State ombudsman or ombudsman transition specialist
- 911
- Patient advocacy group
- The worker him or herself
- Adult Protective Services
- Primary Care Physician
Getting Help

**Consumers had mixed results in getting help**

Many consumers felt they received a good response when asking for help: "If I have a problem with my worker, I call the home health agency and they replace the person immediately." Other individuals have had a very difficult time addressing their situation, "There is no one responsible or efficient to contact. No way to reach an ombudsman and have significant change with a situation. Whenever a complaint is made to the agency the issues are not resolved and I simply receive a new caregiver. This does not give me any confidence that the previous worker will be fired or receive any new training."

Getting Help

**Consumers were concerned for their worker**

Some consumers also expressed concern that asking for help might negatively impact their worker. They expressed a fear of retaliation against the worker versus a fear of personal retaliation (as advocates hear about time and time again in institutional care settings). Consumers said fear of getting the worker fired (if the problem they are encountering does not rise to that level in their minds) prevents them from reporting issues. One individual shared, "The person that came [to help me] asked me when [my worker] came and I told her about 10 minutes after the hour. Then she reported [my worker] for being late and she is never late - she just comes here from another client's house. I was so upset because [my worker] get in trouble. Since then I have been careful about saying anything. That person was looking for something negative and asked questions to try to get a negative answer about home care."

Getting Help

**Consumers may need an advocate**

Currently, approximately thirteen state long-term care ombudsman programs advocate on behalf of home care consumers. In the future, it would be very helpful to talk with consumers in these states to determine how the consumer views the role and effectiveness of the ombudsman as a source of help.

“We need a mediator to help us with problems.”
What is the Government's Role?

Government has been involved in both creating access to home care and working to ensure quality of services.

Governments' Role
- Require caseworker assessment of the workers (not only to help with problems, but to give support and credit to the workers who are doing their jobs well);
- Set standards for and oversee home health agencies;
- Conduct surveys of the care provided;
- Ensure contractors are fulfilling their obligations;
- Better inform consumers and workers of their rights;
- Be more inclusive of consumers, families and workers on government committees and in decision-making processes;
- License home care workers;
- Provide additional services in the home, such as podiatry and dental care;
- Require training and certification of workers;
- Provide dispute resolution services;
- Pay workers better wages and offer benefits;
- Enforce existing regulations; and
- Provide better screening of workers, such as criminal background checks.

Overall, the most common answer to this question was: **we need FUNDING, FUNDING, FUNDING!** Consumers expressed great concern not only that the government continue to make Social Security, Medicare and Medicaid available to pay for home care services, but that the amount of money to fund these services be increased.
Consumers identified seven core areas.

**Consumers want more care hours**

Many of the people reached said they were not receiving enough support in terms of total number of hours of care or frequency of visits. Several individuals said that at a point in the past they were receiving more care, but it was cut back due to budget constraints.

Other people want more support, but either do not know how to get it or have not asked. It is unclear to the ConsumerVoice whether the individuals need more care (that is, if doing an assessment would show they require more care) or if the desire for more is a feeling of insecurity or loneliness (or all of the above). Regardless of the reason, consumers definitively said that more care would increase their quality of life, as well as support their family members with the stress of unpaid caregiving.

**Consumers want workers to have flexibility**

Whether it is to change a light bulb, fix a curtain rod, take the consumer for a stroll around the neighborhood or have time carved out to just sit and visit, consumers want workers to have much more flexibility in their jobs. There was a sense from the interviews that workers may want this too, but that agency rules inhibit flexibility and limit work to whatever is on the care “list.” At a minimum, consumers suggest that scope of work must be better communicated. “It would be helpful if they were clear about the things that they can and cannot do for me. I think that they should be able to provide services that are needed by the client. For example, if I need to have lotion applied, but they tell me I have to do it myself. It is prescription medicine and I have limitations regarding what I am able to do.”

**Consumers want a role in choosing workers**

“Sometimes I don’t feel comfortable with the person that they send over. Some people do not do a good job and others are not very honest. They are coming into your home and this is very important.” Again, the relationship between the worker and the consumer is paramount to success; consumers want some way to assess whether a worker is a good fit for them and their household from the outset.
Home Care: What's Lacking?

- Consumers do not want to be told how personal their relationship can be with the worker

"The agency told me that the relationship with the homemaker should not be personal. That we cannot be friends." As discussed earlier, the relationship (whether very close or just a generally good rapport based on communication and trust) between the consumer and the worker appears to be one of the biggest factors influencing quality of care. As one consumer said, "It's really a problem that workers are encouraged to NOT form a bond with the consumer, as that special bond is what makes for good care; it also energizes."  

- Consumers want to get out of the house

Consumers are happy to live in their own homes, but they can still feel confined at home. Many interviewees said that they wish they could leave the house more frequently, for shopping trips or to get fresh air. Some of these individuals are not getting out because the agency does not allow the worker to assist the consumer in that way. Other individuals just do not have enough hours of support to receive the assistance they need to get out of the house regularly. One individual said, "I wish I could go do the grocery shopping with my worker. I am blind and I like to feel and smell what I am going to buy to eat."

- Consumers want workers to have more training

The individuals interviewed identified two key areas for additional worker training: 1) the "soft" skills like housekeeping and meal preparation, and 2) advanced medical skills, such as wound care. Coursework in cooking, interpersonal skills, housekeeping, cultural sensitivity, English and conflict management were some of the most frequently stated responses. Consumers also asked for more training of workers in medical and advanced medical care. Specific requests include: accurately taking and reading blood pressure, using assistive devices correctly, CPR certification, skin and wound care support, medication management, knowledge of how to handle special situations like a seizure, and managing conditions of dementia.

A number of consumers said they would like to see their worker better trained to provide better quality care and to enable the worker to make a higher wage.

- Consumers want workers to be better compensated

"If I could change one thing, I would offer night time workers benefits to keep them around because they have kids and families which makes it very hard for them to continue work. Low levels of pay for the night workers also affect this, causing lots of turnover in workers that I have had over the years. My daytime caregiver has been working with me for nine years now, but turnover is really high at night. They should be offered vacations and/or benefits." As will be discussed later in the policy recommendations, the Consumer Voice heard over and over again that consumers think home care workers deserve better pay and benefits and that increased compensation would mean better care (less turnover, a more educated/trained workforce, etc.).

- Consumers want better scheduling of workers

"It would be great if I could have more flexibility in terms of scheduling my worker’s days and hours. Having her come out two times a week instead of one would be better. I so enjoy the companionship, but the agency has many clients and they have indicated to me that this is not an option. I live in a rural area and I know that this makes things more challenging as well." Some consumers indicated that the schedule they were placed on prevents them from partaking in other activities, such as volunteering in the community. Consumers want some level of input into setting their worker's schedule.

- Other care concerns

Additional points made by the consumers include lack of care coordination (among agencies, caregivers, family), rude or disrespectful workers, poor management at the home health agency and frequent turnover of workers.
Summary

• Consumers have a voice and want to be heard

Policymaking, program development and advocacy should always start from a dialogue with the population impacted (the consumer); better yet, give consumers a seat at the decision-making table. Long-term care consumers across settings, including those receiving support in their homes, have a voice and want to be heard.

• There is a different power dynamic at home

Individuals living in their own homes feel more control over the situation they are in because of the location. The power dynamic is different than in other long-term care settings. Consumers at home often see themselves as the "boss" and are less hesitant to speak up (though some are still hesitant) than the Consumer Voice's experience with individuals in other settings.

The physical location of the consumer being in their own home appears to raise the level of quality in itself, in shifting power back into the hands of the individual. Even in the best culture change nursing home, an individual is living in a community setting where personal wishes and desires have to be balanced with the wishes and desires of others.

Summary

• The bases are yet to be covered

Lack of care hours and frustrating scheduling issues are reflective of where the United States is in supporting home and community-based services today. Consumers are still struggling to get the basic services they need at home, and this remains the major focus of most individuals. Some consumers are so grateful to have any service once they get it that quality of care may not be on their radar screen. That said, the interviewing was a wonderful way to engage consumers in conversations about quality they may not have yet had or know they could have.

• Home is viewed as better than a nursing home

Whether or not you can make an "apples-to-apples" comparison between institutional care and home care in terms of cost, services, physical environment, etc., what is ultimately important is the consumer's experience and perception of quality care. Consumers in this report perceive the quality of care at home as much better than nursing home care. They will do anything - including living without the hours of care they need or want - in order to stay out of a nursing home.

Summary

• Flexibility in a worker's tasks is critical

Worker flexibility is imperative to quality in the home care setting. Yet, flexibility is a challenging, double-edged sword. Flexibility can be good and improve quality of care and quality of life by meeting both the anticipated and unanticipated needs of the consumer. It can also give the worker great satisfaction to be able to help the consumer with whatever she or he needs. At the same time, too much flexibility can mean the worker might not be providing the services she or he is required to perform or taking on tasks that are dangerous to him or her. Too much flexibility can also mean the worker is expected to do things for the consumer that are not compensated, are out of their skill set or training and/or are potentially hazardous to the worker. Boundaries can be fuzzy and hard to set; this is a topic that needs continued exploration.

Public Policy Recommendations

• Let's turn it over to Robyn Grant, Director of Public Policy & Advocacy at the Consumer Voice to tell us about the specific public policy recommendations that stem from this report.
Public Policy Recommendations

- Ensure continued funding of critical programs like Medicare and Medicaid

The majority of interviewees are concerned for the funding of the services they receive. Without this support, many individuals could not receive care in the home (or even in a nursing home for that matter). Many individuals believed it is the government’s role to ensure that the Nation’s most vulnerable individuals have access to the care they need. Advocates must continue to make a strong case to Congress, the White House and to their state policymakers that these programs are essential in order to provide long-term care to those who cannot afford it privately.

- Make home and community-based services a mandated Medicaid service

Funding for home and community-based services is at the top of the list of consumer concerns - funding not only to maintain the service they have, but to allow them to access additional services. Eliminating “institutional bias” by requiring that home and community-based services be covered under Medicaid would help achieve both goals. This approach would ensure that more Medicaid dollars are available to help people get the care they need at home.

- Enact policies that increase training, wages and benefits for home care workers

Federal and state governments need to set training requirements for home care workers and create opportunities for workers to receive additional training to advance in their field. Furthermore, increasing wages for home care workers is an important step toward improving the quality of the job. Consumers themselves believe that improving the quality of the job attracts better people to the work, decreases turnover and makes the workers’ lives better by increasing job satisfaction, and improving morale - all which mean better care for individuals.

- Require that consumers have the right to choose their workers and schedules for care and services

Consumers were very clear that they wanted a say in who their worker is and when their services are provided. These choices are fundamental to person-centered care. Allowing consumers the choices in these areas makes care and services more responsive to consumer needs and improves not only quality of care, but quality of life as well. Without these choices, we are in essence “institutionalizing” people in their own homes.
Public Policy Recommendations

- Carry out background checks on all home health workers

*Although most states require that home health care agencies perform criminal background checks on their workers and carefully screen job applicants for these positions, the actual regulations will vary depending on where you live. Therefore, before contacting a home health care agency, you may want to call your local area agency on aging or department of public health to learn what laws apply in your state (Administration on Aging).* The consumers in this report placed a lot of trust in the home health agencies to assign appropriate people into their home; to protect the safety of consumers and continue to build this trust, the Consumer Voice believes background checks should be required for anyone providing paid services to people at home.

- Support home care ombudsman demonstrations

Although a number of consumers are able to resolve their concerns directly with the home health agency, others experienced the need for an advocate. In listening to consumers, we identified a number of areas in which ombudsman assistance could be helpful, such as advocating for more care, speaking up for those who cannot address a problem on their own or promoting better care coordination. The Consumer Voice recommends demonstration projects to explore the potential benefits of long-term care ombudsman coverage of home care clients, as well as a study to analyze how the ombudsman has helped consumers in states that currently conduct home care advocacy (including talking directly with consumers in those states) and what is needed for an effective home care ombudsman program.

Using e-mail communications to influence public policy

- Now that we’ve heard about this exciting report and the important policy work that needs to be done to help consumers, let’s turn it back over to Sarah Wells, Executive Director of the Consumer Voice to talk with us about using e-mail communications to influence policy
Using e-mail communications to influence public policy

• Two kinds of influential e-mail:
  1. Action Alerts you receive or send
  2. General e-mail contact with people you want to influence

What is an Action Alert?
An action alert is a message that an organization sends to mobilize people - often members of their group and supporters of a specific point of view - calling on them to take action to influence public policy

• If you receive an Action Alert
  • Check the deadline; many are a tight turnaround
  • Skim the contents and decide if it is an issue you understand already or one where you need to read the additional background information
  • If you want to take action, follow the instructions for sending an e-mail, letter or making a phone call to an elected official
  • If time permits, send an email to the organization that sent you the alert and let them know how your experience was (as just discussed, it helps the organization to know how they are doing!)

Personalizing the alert (or letter/e-mail) is key!
• ConsumerVoice or other organizations sending you an action alert may give you some sample or template language to use, and it’s fine to use that exactly or adapt it, but it’s also very important to personalize your content
Using e-mail communications to influence public policy

• Here’s an example of a Consumer Voice Action Alert that is live right now:

Using e-mail communications to influence public policy

• Preparing an Action Alert
  • What’s the goal?
    • What do you want to see happen as a result of your alert? (e.g., I want 10 people to call their state legislator and ask the representative to support XYZ bill, we want 100 people to visit our website and read our fact sheet on the misuse of antipsychotics in nursing homes)
  • How will you measure your success?
    • Can you track how many people click on the link in your email? Will you ask recipients to tell you if they reach out to a legislator’s office? You need to know how well you did so you can improve or keep same strategy the next time.
Using e-mail communications to influence public policy

- Who do I send the alert to?
  - If your organization keeps a database and/or e-mail lists, then to the people on those lists, provided they have given you permission to e-mail them.
  - If you are an individual or your organization doesn’t keep a database, start with family, friends and ask them to forward to a friend. Consider using a tool like Constant Contact to start collecting e-mail addresses for future outreach.

- Contacting elected officials via e-mail (and much of this applies to faxing and mailed letters too!)
  - It is important that you build positive, working relationships with elected officials well in advance of tapping them for support or opposition to your issue. Your goal should be to become the trusted expert they turn to for information on your issue.
  - E-mail is a common way to communicate with elected officials today.
  - Usually you can find the elected official’s e-mail address on their official website by going to google.com and then searching their name and state.
  - Sometimes the elected official website will not give you their actual e-mail address but will have a form for you to fill out, which is fine too (that form e-mails the content you write to the official’s staff).

- Here is an example of how to find your state legislator(s) e-mail address…

- Always be courteous and respectful.
- State the purpose of your letter up front and reference a bill number if applicable (reference the bill number in the subject line of the e-mail too).
- Identify yourself. Anonymous letters go nowhere. Definitely identify if you are a constituent of the legislator.
- Even in email, include your correct name, address, phone number and email address. If you don’t include at least your name and address, you are not likely to get a response.
- State any professional credentials or personal experience you may have, especially those pertaining to the subject of your letter.
- Keep your e-mail short and to the point.
- Use specific examples or evidence to support your position.
- Clearly state what it is you want done or recommend a course of action.
- Thank the official for taking the time to read your e-mail.
- NEVER use vulgarity, profanity or threats.
- Do not let your passion get in the way of making your point.
Bringing it all together...

• Let’s turn it back over to Robyn Grant, Director of Public Policy & Advocacy at the Consumer Voice to now tie it all together – how can we utilize e-mail to advance the public policy recommendations in the recent home care report?

Let’s look at one specific recommendation...

• Enact policies that increase training, wages and benefits for home care workers

Federal and state governments need to set training requirements for home care workers and create opportunities for workers to receive additional training to advance in their field. Furthermore, increasing wages for home care workers is an important step toward improving the quality of the job. Consumers themselves believe that improving the quality of the job attracts better people to the work, decreases turnover and makes the workers' lives better by increasing job satisfaction, and improving morale - all which mean better care for individuals.

Better Care Through Better Wages

• Currently about 1.7 million home care workers are not eligible to receive minimum wage and overtime protections.

• Why? Because they are not covered by regulations under the Fair Labor Standards Act (FLSA) which gives workers important wage protections.

http://www.theconsumervoice.org/advocate/better-care-through-better-wages

• Department of Labor proposed a rule. Comment period closed.

• Legislation has been introduced:
  • The Direct Care Job Quality Improvement Act – HR 2341, S. 1273
  • Would extend wage and overtime protections provided through the Fair Labor Standards Act to home care workers.
How can you advocate using email?

#1: Email your Congressperson and ask him/her to support the bill

Your legislator

- **Who it is**
  - Consumer Voice action alerts give you your legislator’s name
  - If you don’t know, go to: [http://votesmart.org/](http://votesmart.org/)

- **Email address**
  - Consumer Voice action alerts send it to your legislator
  - Use Sarah’s information to find email address

Your message

Use sample text message you receive through an Action Alert

Please support HR 2341 which would give home care workers the same minimum wage and overtime protections that other workers have. Increasing wages for home care workers is an important step toward improving the quality of the job. Improving the quality of the job makes workers’ lives better, increases job satisfaction, reduces stress and improves morale — which mean better care for consumers. It also means that people can stay in their homes because they get the care and services they need — without those services they would have to go to a nursing home.

HR 2341 would not only benefit home care workers by giving them basic protections they should have received decades ago, it would also benefit home care consumers by improving the care they receive and allowing them to receive care where they want it — in their homes.

Thank you so much for your consideration of this request.

Sincerely,

Personalize the sample text message

- Add a sentence about your situation/work:
  - My father receives help from a home care worker and that help has made an enormous difference in his life.

- Add a sentence about why you think this is important:
  - I believe home care workers should be paid minimum wage and have overtime protections because they work incredibly hard and deserve to make better money.
How can you advocate using email?

#2: Email people you know or those in your organization and ask them to contact their member of Congress

- **People you know**
  - Family, friends, members of groups you belong to
  - Add a message: I really care about this issue. Can you send an email to your legislator too?
- **Members of your organization**
  - Set a goal
  - Track action or ask members to let you know what they did

Conclusion

From Consumer Voices to Advocacy Action

- **Consumer Voices:**
  - Consumers want workers to be better compensated
- **Policy recommendation:**
  - Enact policies that increase training, wages and benefits for home care workers
- **Advocacy Action:**
  - Email asking member of Congress to support HR 2341

Thank you! Questions??

- About the report?
- Using e-mail as an advocacy technique?
- About “Better Care Through Better Wages?”

References

Read the Full Report Online
http://www.theconsumervoice.org/cpr

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