



# Road Map of Core Competencies for the Direct Service Workforce



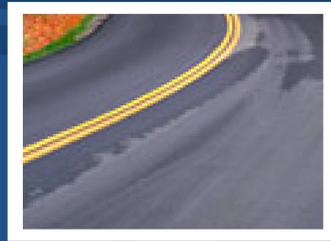
## Phase IIIA: Stakeholder Consensus

*(Phase I: Competency Inventory)*

available in separate document

*(Phase II: Direct Service Worker Competency Analysis)*

available in separate document



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**PREPARED By** the University of Minnesota Research and Training Center on Community Living, with input from The Lewin Group, The Annapolis Coalition on the Behavioral Health Workforce, PHI, LeadingAge Center for Applied Research, The Westchester Consulting Group, and The Family Caregiver Alliance.

**PREPARED For** the **CENTERS for MEDICARE & MEDICAID SERVICES**

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## Acknowledgments

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The National Direct Service Workforce Resource Center gratefully acknowledges the stakeholder organizations’ representatives who served as participants of a Delphi panel during the first part of the Phase III research process. The representatives dedicated their time to this project and made significant contributions in the research process. The overall research findings were derived from the integrated expert feedback of all study participants, and should not be interpreted as expressing the views of any individual participant or the policies of the organizations she or he represents. The following is a list of representatives who contributed to this research project through providing review of the core competency set.

Name	Organization
Gayle Alston	Rosalynn Carter Institute for Caregiving
Jim Austin	Ohio State University Center on Education and Training for Employment
Katie Bess	National Association of County Behavioral Health and Developmental Disabilities Director
Bonnie-Jean Brooks	OHI
Valerie Bradley	Human Services Research Institute
Natasha Bryant	LeadingAge
Don Carlson	National Institute of Disability and Rehabilitation Research
Doreen Cavanaugh	Georgetown University Health Policy Institute
Laura Chenven	Department of Labor
Danielle Copeland	Department of Labor
Cyndy Cordell	Alzheimer’s Association
Chris Curtin	Community Services Network of Michigan
Steve Edelstein	PHI
Farida Ejaz	Benjamin Rose Institute
Charlotte Eliopoulos	American Association for Long Term Care Nursing
Kathy Foley	LEAP
Larry Fricks	Appalachian Consulting Group
Kimberly Fuson	Cedar Sinai Park
Karen Galarneau	New York Office for People With Developmental Disabilities (OPWDD)
Laura Ginsburg	Education & Training Administration
Casey Ward Goldberg	US Psychiatric Rehabilitation Association (USPRA)
Amy Hewitt	University of Minnesota

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Name	Organization
Scott Heller	US Psychiatric Rehabilitation Association (USPRA)
Tom Hill	Faces and Voices of Recovery
Isabel Hodge	Administration on Developmental Disabilities
Michael Hoge	The Annapolis Coalition on the Behavioral Health Workforce
Mary Imbornone	Devereaux
Meg Kabat	Veterans Health Administration
Linda Kaplan	Substance Abuse and Mental Health Services Administration
Kate King	Centers for Medicare & Medicaid Services Disabled and Elderly Health Programs Group
Kirk Koyama	Health Resources and Services Administration
Laurie Krom	Addiction Technology Transfer Center Network
Carol Britton Laws	National Alliance for Direct Support Professionals
Charlie Lakin	National Institute of Disability and Rehabilitation Research
Sherri Larson	University of Minnesota
Traci Lepicki	Ohio State University Center on Education and Training for Employment
Erin McGaffigan	Boston College
Colleen McLaughlin	Boggs Center
John Morris	The Annapolis Coalition on the Behavioral Health Workforce
Regis Objjiski	Mid Hudson Coalition
Renee Pietrangelo	ANCOR
Peggy Powell	PHI
Nanette Relave	American Public Human Services Association
Rhonda Richards	AARP
Casey Sanders	Boston College
Betsy Schwartz	National Council for Community Behavioral Health Care
Mark Sciegaj	Boston College
Carol Sheets	Veterans Health Administration
Jodi Smith	US Psychiatric Rehabilitation Association (USPRA)
Anita M Stineman	University of Iowa
Mary St. Pierre	National Association for Home Care and Hospice
Jill Tabbutt-Henry	PHI
Nancy Thaler	National Association of State Directors of Developmental Disabilities
Hollis Turnham	PHI
Linda Velgouse	Administration on Aging
David Ward	Direct Care Alliance
Leanne Winchester	PHCAST (MA)

## Executive Summary

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The Centers for Medicaid & Medicare Services (CMS) funded the *Road Map of Core Competencies for the Direct Service Workforce*, a multi-phased research project implemented through the *National Direct Service Workforce (DSW) Resource Center*. The purpose of this project is to:

- ▶ identify a common set of core competencies across community-based long-term services and supports (LTSS) sectors: aging, behavioral health (including mental health and substance use), intellectual and developmental disabilities, and physical disabilities; and
- ▶ assist states to take a more comprehensive and standardized approach to direct service workforce training and workforce quality improvement through the creation of a nationally-validated core competency set.

The project is implemented in support of the Federal interagency *Community Living Initiative*, which was created by the Department of Health and Human Services in 2009 to develop innovative strategies that increase opportunities for Americans with disabilities and older adults to enjoy meaningful community living.

Previous research, conducted by partners of the *DSW Resource Center*, recommended a national core competency set for the community-based LTSS direct service workforce (The Lewin Group, 2008). Phase II of the **Road Map of Core Competencies for the Direct Service Workforce** project indicated that a significant number of “core” competencies exist across sectors. It also was determined that building consensus and validating core competencies across sectors is an effective strategy toward resolving workforce challenges, such as high worker turnover rate, as well as limited and varied training requirements (DSW RC, 2011; The Lewin Group, 2008).

Phase IIIA of the Road Map of Core Competencies project was conducted in collaboration with stakeholders to synthesize results of the competency analysis and reach consensus on a set of core competencies for direct service workers. A large national sample of workforce stakeholders, including federal, state, and provider representatives and competency development experts from different sectors, participated in this study through a modified Delphi research process. Stakeholders completed multiple surveys and participated in facilitated dialogue through this research process. Quantitative and qualitative data were collected to inform the ongoing development of this core competency set for community-based LTSS direct service workers, as outlined below.

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**Table 1: Phase IIIA Modified Delphi Study Process**

Stage	Description of Activities
<b>1: Initial Survey</b>	Stakeholders participated in an online survey where they provided extensive feedback on the initial draft of core competencies and identified which statements were core within their LTSS sectors.
<b>2: Stakeholder Summit</b>	Data collected in the initial survey were analyzed and results were presented to the stakeholder group during a <i>Summit on Core Competencies for the Direct Service Workforce</i> held September 10, 2012 in Arlington, Virginia. During the Summit, stakeholders were engaged in a facilitated discussion from which further feedback was gathered and used to revise the draft set of core competencies.
<b>3: Final Survey</b>	Stakeholders participated in a final review of the draft set of core competencies via an online survey to determine the level of agreement achieved on the revised content. The findings are summarized in the current report on this phase of the project.

Appendix A presents the finalized DSW core competency set. This set includes a preamble discussing application and context and is based on stakeholders’ iterative review process, described in detail within sections III, IV, and V. The *DSW Resource Center* anticipates conducting field-testing and further validation activities with this set of Core Competencies for the Direct Service Workforce at some point in the future as Phase IIIB.

The DSW core competencies resulting from this project phase were developed using rigorous research methods and with the goal of supporting efforts to strengthen and grow the community-based LTSS direct service workforce across all sectors. The finalized DSW core competency set may also be used to establish evidence-based practices for training and employment of direct service workers, through the following activities:

- ▶ Framing training objectives and guiding curriculum development across all sectors of the community-based LTSS direct service workforce.
- ▶ Developing measures of initial direct service worker skills and planning for entry-level training and competency development across sectors.
- ▶ Cultivating skill development and measuring competencies within the current community-based LTSS direct service workforce.
- ▶ Serving as the foundation for developing community-based LTSS DSW career ladders and lattices across sectors inclusive of a wide variety of worker roles.
- ▶ Supporting and facilitating DSW competency throughout community-based LTSS. The core competencies provide a basis for states and organizations to assess workforce capacity and promote effective training policies to meet individuals’ service needs.

The core competency set is designed to inform direct support service delivery and promote best practices in community-based LTSS. These competencies have relevance to the work of both tenured and new direct service workers and serve as a resource in developing worker training, and

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performance improvement practices for the community-based LTSS direct service workforce across LTSS sectors. Moreover, the core competency set is intended to serve as the foundation for career lattices and ladders that further recognize the many competencies needed for direct service workers across service sectors. The core competency set is not intended to impose requirements for community-based LTSS direct service workers upon entry to the workforce. Rather, they provide guidance for the development of initial and ongoing training to promote direct service workers' continuing competency development.

The core competency set may be customized in practice to reflect the needs of individuals in need of services and organizations that provide the services. Performance indicators may be developed from the core competencies; these would provide a greater degree of specificity in describing direct service skills and further facilitate activities of best practices within each competency area. Effective direct service workforce tools and activities, such as performance evaluation tools and recruitment, hiring, and selection activities, can be developed based on the set. These efforts in operationalizing the core competency set will lead to improved quality of training to direct service workers, improved quality of service provision and, ultimately, improved quality of life for participants. Further specialized competencies may be developed to inform specific LTSS sectors and delivery models. Through sustained efforts, a more competent, stable community-based LTSS direct service workforce will be developed to meet the growing demand conditions within community-based LTSS.

## Background

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CMS funded the *Road Map of Core Competencies for the Direct Service Workforce*, a multi-phased research project implemented through the Direct Service Workforce Resource Center (DSW RC) to identify a common set of core competencies across community-based long-term services and supports (LTSS) sectors: aging, behavioral health (including mental health and substance use), intellectual and developmental disabilities, and physical disabilities. The purpose of this research project is to assist states to take a more comprehensive and standardized approach to direct service workforce training and workforce quality improvement through the creation of a nationally validated core competency set. The project is implemented in support of the Federal interagency Community Living Initiative, which was created by the Department of Health and Human Services in 2009 to develop innovative strategies that increase opportunities for Americans with disabilities and older adults to enjoy meaningful community living.

The *Road Map of Core Competencies for the Direct Service Workforce* project supports the CMS goal of achieving a coordinated, inclusive, and person-driven system in which people with disabilities and chronic conditions have choice, control and access to a full array of quality services that assure optimal outcomes, including independence, health and quality of life<sup>1</sup>. It is necessary to develop a highly

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<sup>1</sup> Medicaid's Long-Term Services & Support website, <http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Long-Term-Services-and-Support/Long-Term-Services-and-Support.html>

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competent workforce prepared to carry out this mission. A highly competent direct service workforce is critical to the wellbeing and safety of individuals who need support to live in the community. The achievement of optimal outcomes among service participants is dependent on the delivery of quality direct services and supports. Competency standards constitute a foundation in key processes of direct service workforce development, including recruitment, curriculum development, training, apprenticeship programs, credentialing and certification systems, performance evaluation, and ongoing staff development. Direct service worker competencies influence the foci of LTSS, and therefore provide means to measure and influence quality outcomes.

During the initial project phase, it was found that a single nationally recognized and validated competency set did not exist to guide the training and development of the entire LTSS workforce. Each LTSS sector had identified training needs and competency sets, but the application and influence of these standards in the field was limited. With little interdisciplinary research and dialogue, the existing competency sets represented varied practice concepts due to the unique histories of service models and sectors. The competency sets also reflected inconsistencies due to various methods applied in developing, validating, and operationalizing competency standards in the field. These factors implicate an increasing problem, where state policies have perpetuated low expectations in direct services by failing to support adequate training and application of DSW competencies. This has ultimately resulted in lower quality standards of service delivery. It also represents missed opportunities to strengthen the workforce and resolve challenges faced daily by service participants. Based on previous research (DSW RC, 2011), it was projected that a national DSW core competency set may be applied and utilized to achieve the following results:

- ▶ Establishment of evidence-based practices for training and employment of direct service workers.
- ▶ Facilitation of interagency collaboration on federal and state levels in activities related to workforce development.
- ▶ Creation of a consistent basis for states and organizations to assess workforce capacity and promote effective training policies in order to meet individuals' service needs.

In a collaborative effort to resolve challenges across sectors in the direct service workforce, the recent report based on the *CMS Leadership Summit on the Direct Service Workforce and Family Caregivers* recommended an immediate next step as, "Convene stakeholders across populations to reach consensus on a common set of core competencies, and additional competencies beyond the core set depending on the needs of the person they support and types of services they provide" (DSW RC, 2011, p. vii). In congruence, interdisciplinary workforce researchers recommended a key strategy to identify core competencies and specialization competencies across sectors. Such a foundational and coordinated approach was deemed "critical to preparing greater numbers of workers for direct service work as well as ensuring the quality of supports and services provided to consumers" (The Lewin Group, 2008, p. 30). The current project phase addresses a significant step of determining consensus on a common set of DSW core competencies.

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CMS has recognized and addressed these recommendations. This has resulted in implementation of the *Road Map of Core Competencies for the Direct Service Workforce* project through the *DSW RC*. In support of the implementation of the Road Map, CMS funded Phase I and II of this project during FFY2011, and Phase IIIA during FFY2012. Phase I and II accomplished the first key steps towards a more unified approach to competency development, encompassing the identification and analysis of existing competency standards among sectors of the direct service workforce:

- ▶ **Phase I of the Road Map of Core Competencies (2011)** project provided an inventory and overview of competency initiatives developed in the United States to improve training and proficiency of the direct service workforce within and across LTSS sectors. It also identified the roles of Federal agencies in the development, improvement, and oversight of this workforce, and contextualized how government initiatives relate to one another in the area of workforce development.
- ▶ **Phase II of the Road Map of Core Competencies (2011)** project provided findings from a comparative analysis and systematic review of DSW competency sets identified during Phase I. Results of the analysis indicated that a significant number of “core” competencies exist across sectors, which supported the notion that building consensus and validating core competencies across sectors is an effective strategy toward resolving workforce challenges. This phase included a proposal for next steps related to competency development.
- ▶ **Phase IIIA of the Road Map of Core Competencies (2012)**, the focus of the current report, involved collaborating with stakeholders to synthesize the results of the competency analysis (Phase II) to reach consensus on a set of core competencies for direct service workers through a modified Delphi research process. This effort engaged representatives of Federal agencies who contribute to direct service workforce competency development initiatives, and supported the participation of stakeholders across sectors.

It is recommended that the final stages of this project (Phase IIIB) involve the following application and evaluation activities: (1) field testing and a national study to validate the core competency set among the workforce; (2) establishing the core competency set in the public domain; and (3) providing technical assistance to promote the development of specializations within each sector.

## Methods Overview

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As described earlier, in Phase IIIA of the *Road Map of Core Competencies* project, a core competency set for community-based LTSS direct service workers was developed through a multi-phased research study conducted through the *DSW RC*. A large sample of workforce stakeholders, including state and provider representatives from different LTSS sectors and competency development experts, participated in this study through a modified Delphi process.

The purpose of Delphi research is to measure consensus on an issue or topic among a panel of participants who represent stakeholders and subject-matter experts within a field (Hasson, Keeney, & McKenna, 2000). The Delphi research methodology is designed not to force opinion among participants, but rather to discover points of consensus and dissonance (Gliddon, 2006). The

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foundation for empirically determining consensus and dissonance is based on the application of comparative analyses using within-group and between-group data. The Delphi methodology provides a research structure for determining consensus between participants and researchers through an interactive and iterative process. Each iteration involves a survey or point of data collection in which the participants provide feedback on a given issue or topic (Stines, 2003).

It is important to note that numerous studies have applied rigorous Delphi research methods to identify competencies and have demonstrated successful outcomes (Gliddon, 2006). An exemplary case is the competency set developed for the Maternal and Child Health (MCH) Training Program of the U.S. Department of Health & Human Services, Health Resources and Services Administration (MCH Leadership Competencies Workgroup, 2009). This competency set was developed over several years and initially validated through a modified Delphi process. The goal of the process was to provide “a framework that that guides assessment and curriculum design for MCH interdisciplinary training programs and should serve as a tool for practicing MCH professionals” (Reed, 2009, p. 29). It was further noted that the “creation, validation, and adoption of the MCH Leadership Competencies are key to this shared understanding. This initial validation of the competencies is sufficient to gain broad consensus” (p. 29).

As a result of research activities conducted during Phase II of the *Road Map of Core Competencies* project, an initial draft of potential DSW core competencies was created based on the content analysis of existing competency sets across LTSS sectors. (The initial draft of potential DSW core competencies was created in part from of a comprehensive inventory and review of relevant initiatives conducted during Phase I of the project.) During Phase IIIA of the project, stakeholders across LTSS sectors were identified by partners of the *DSW RC* and invited to participate in the current modified Delphi study to review the synthesized cross-sector core competency set. For this study design, the Delphi procedure was modified in that it was not used to generate the core competency set from inception. Based on research guidelines provided by Hasson et al. (2000), it is not uncommon or necessary to conduct the procedure with a list of items that has already been developed. Stakeholders completed multiple surveys and participated in facilitated stakeholder dialogue through the modified Delphi process. Quantitative and qualitative data was collected to inform the ongoing development and revisions of the DSW core competency set.

**Table 2: Phase IIIA Modified Delphi Study Process**

Stage	Description of Activities
<b>1: Initial Survey</b>	Stakeholders participated in an online survey where they provided extensive feedback on the initial draft of core competencies and identified which statements were core within their LTSS sectors.
<b>2: Stakeholder Summit</b>	Data collected in the initial survey were analyzed and results were presented to the stakeholder group during a <i>Summit on Core Competencies for the Direct Service Workforce</i> held September 10, 2012 in Arlington, Virginia. During the Summit, stakeholders were engaged in a facilitated discussion from which further feedback was gathered and used to revise the draft set of core competencies.

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Stage	Description of Activities
<b>3: Final Survey</b>	Stakeholders participated in a final review of the draft set of core competencies via an online survey to determine the level of agreement achieved on the revised content. The findings are summarized in the current report on this phase of the project.

The research process was carefully coordinated based on a project protocol created by the *DSW RC*. The protocol included plans for the *DSW RC* to establish and convene a project research team, comprised of *DSW RC* partners with backgrounds across LTSS sectors, which was involved in oversight of project implementation. Throughout study design and coordination, the project research team provided instructional and supplemental information to guide stakeholder participation. This included the delivery of webinar presentations discussing the Delphi methodology and clarifying expectations of participants, the dissemination of overview documentation describing the background and purpose of the research project, and contextual information such as operational definitions and key considerations to use in the review of core competencies for the DSW. In addition, researchers coordinating the project fielded several questions posed by stakeholders and others who indicated interest in this effort. Further details regarding the modified Delphi methodology used in this study are described in the following sections based on each stage of the iterative process.

The *DSW RC* gratefully acknowledges the stakeholder organization representatives who participated in this process for their significant contribution to this research. The overall research findings were derived from the integrated feedback of all participants, and should not be interpreted as expressing the views of any individual participant or the policies of the organizations he or she represents.

## Stage 1: Initial Survey

This section summarizes the methods and results based on the initial survey. This information represents the first stage of the Delphi research process, and should be considered in context with the subsequent stages 2 and 3 discussed in the following sections.

### Methods

The initial online survey completed by participants was populated with a draft of potential DSW core competencies and skills statements. The competencies and skills statements emerged from the content analysis of existing competency sets across LTSS sectors conducted in Phase II. These were considered to be "potentially" core because of their representation in multiple competency sets from different LTSS sectors. The content analysis included competency sets that were "(1) developed and completed competency sets, (2) applied to the delivery of direct service for adults, and (3) nationally recognized" (DSW RC, 2011, p. 8). Thus, the competency areas and skill statements presented in the survey were based on synthesized and revised content from the following sources:

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- ▶ Addiction Counseling Competencies: TAP 21; Center for Substance Abuse Treatment, 2006). Note: The eight “Practice Dimensions” were used. The four areas of “Foundations” were not used due to limited applicability among other sets.
- ▶ Adult Psychiatric Rehabilitation/Recovery-Oriented Mental Health Services for Adults Competencies (CPRP; The US Psychiatric Rehabilitation Association [USPRA], 2011).
- ▶ Alaskan Core Competencies (Hoge & McFaul, 2010).
- ▶ Community Residential Core Competencies (CRCC; Hewitt, 1998b).
- ▶ Community Support Skills Standards (CSSS; Taylor et al., 1996).
- ▶ Competency Standards for Physical Health and Aging (PHI, n. d.). Note: This includes competencies for Certified Nursing Assistants (CNA), Home Health Aides (HHA), and Health Support Specialists (HSS).
- ▶ National Alliance for Direct Support Professionals (NADSP) Competencies (NADSP, 2011).

Participants were instructed to review 79 skill statements within 14 competency areas. For each skill statement, stakeholders were asked to indicate whether they considered each skill statement as a “Core” function of direct service work or “Not Core” to direct service work, from the perspective of the primary LTSS sector that they represented (i.e. aging, behavioral health: mental health or substance use, intellectual and developmental disabilities, and physical disabilities).

*If a participant selected “Core” for a given statement, then they were asked to indicate the degree: High Priority, Medium Priority, or Low Priority.*

### Core: High Priority

The statement describes DSW skills that are necessary and of high priority to provide most community-based services within the primary sector you represent.

### Core: Medium Priority

The statement describes DSW skills that are necessary and of medium priority to provide most community-based services within the primary sector you represent.

### Core: Low Priority

The statement describes DSW skills that are necessary and of low priority to provide most community-based services within the primary sector you represent.

### Not Core

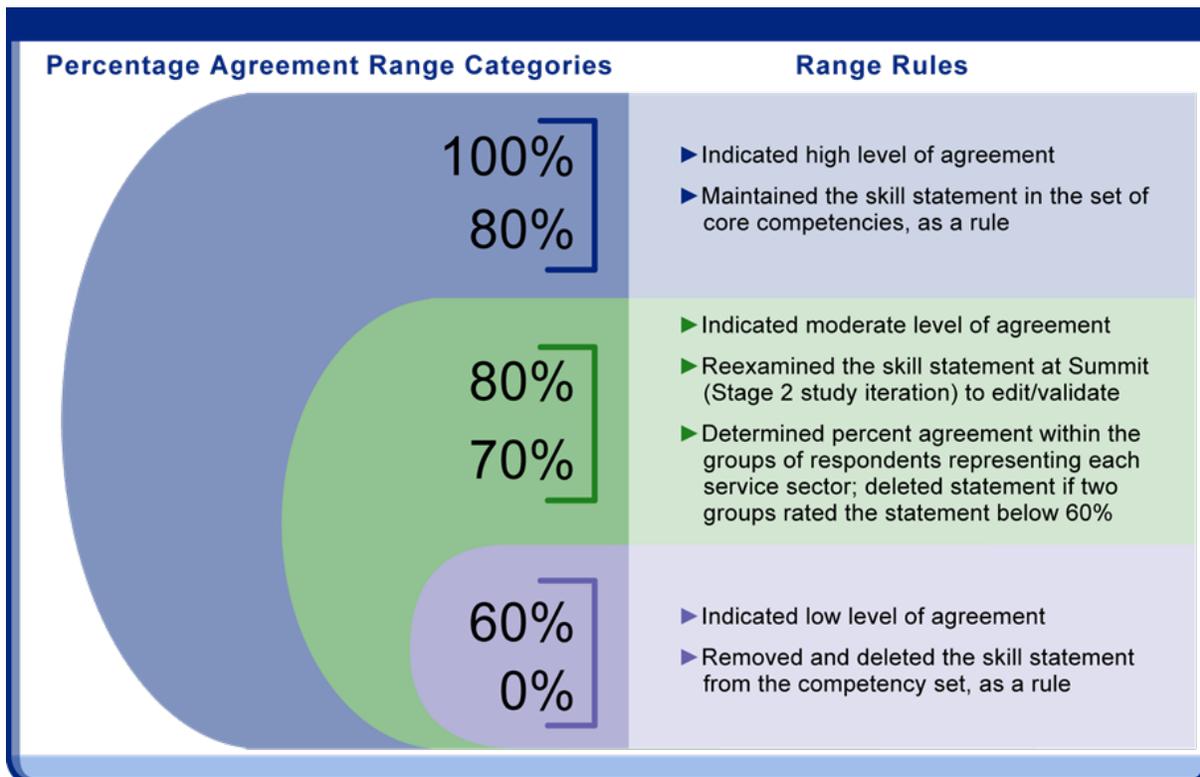
The statement describes skills that are NOT necessary to provide most community-based services within the primary sector you represent.

Summary analyses were applied as a basis for determining levels of consensus among stakeholders within and among LTSS sectors. The percentage agreement among stakeholders who rated statements as “Core” (high, medium, or low priority) or “Not Core” was calculated. Based on Delphi research methods (Hsu & Sandford, 2007; Hasson et al., 2000), the research team determined a threshold of

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greater than 80 percent as indication of high level of agreement among respondents; this measure was used as the guiding rule in the consensus determination and revision process (as outlined in [Figure 1](#)). Skill statements rated “Core” (high, medium, or low priority) by at least 80 percent of the respondents were regarded with a high level of agreement and maintained in the set of core competencies. Skill statements that were not rated core by at least 70 percent of the respondents were removed and deleted from the competency set. For skill statements falling between 70 to 80 percent agreement, the researchers determined percent agreement within the groups of respondents representing each LTSS sector, and deleted statements if two or more groups rated the statement below 60 percent. The skill statements falling between 70 percent to 80 percent agreement were re-examined at the Summit (stage 2) to discuss and confirm actions of revision or deletion from the competency set.

**Figure 1. Rules for Primary Analysis and Initial Revisions to Competency Set (Applied to Total Participants Who Rated Skill Statement as Core)**



While quantitative analysis guided researchers in determining levels of consensus among stakeholders, qualitative analysis identified themes and the information necessary to revise and refine the content of the core competency set. Within the initial survey, participants recommended edits and revisions that might be appropriate for each statement in order to increase the relevance of the statement across all DSW positions in LTSS. For example, in addition to categorical questions of “Core” or “Not Core,” participants were asked optional open-ended questions after rating each skill statement:

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*What changes to the statement would ensure that it applies to DSW practice within the primary sector you represent?*

Additional information was sought based on the terminology and any potential gaps to be addressed in revisions of the draft core competency set. Participants had the option to provide more overarching feedback within each of the 14 competency areas, in response to the questions:

*What content and/or additional skills statements could be added to more effectively represent DSW practice in your sector?*

*Is there terminology that you think would be better understood by people in your sector to describe this entire Competency Area or particular skill statements?*

Final questions in the survey prompted further feedback and comments based on the participants’ review of the entire draft core competency set.

Members of the research team carefully examined qualitative data collected from the initial survey. In this process, the researchers developed a codebook based on team-based qualitative research methods (MacQueen, McLellan, Kay, & Milsten, 1998). The codebook was reviewed and discussed by members of the research team in advance to reach consensus on codebook content to serve as a comprehensive framework of rules and definitions for determining revisions. The codebook contained three overarching sections in which codes were organized based on content of open-ended responses submitted in the survey. These sections include: (I) Sector Representation, (II) Content and Organizational Context, and (III) Structure of Competencies. The codebook contained 20 discrete codes, which are displayed in **Table 3**. Among these codes, there were an additional 20 related sub-codes that were used to further categorize and interpret relevant themes inherent in the qualitative data. Each entry in the codebook contained a brief definition, as well as instructions for application and usage in review and interpretation of the data, and example of quotes where the code may be applied. A coding labeling system also was developed and included for shorthand usage during the analysis process.

**Table 3: Summary of Coding System Used for Qualitative Analysis**

Codebook Section	I: Sector Representation	II: Content and Organizational Context	III: Structure of Competencies
<b>Code</b>	Aging	Applicability	Breadth
	Behavioral Health	Best Practice	Overlap
	Intellectual and Developmental Disabilities	Demographic	Rephrase

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Codebook Section	I: Sector Representation	II: Content and Organizational Context	III: Structure of Competencies
	Physical Disabilities	Gap	Structure
		Key Term	Unclear
		OK	Vague
		Participant Direction	
		Role	
		Supplemental	
		Technical	

Raters were trained to use the codebook to apply codes and sub-codes with consistency and reliability in order to review data collected. The raters achieved a mutual understanding of the coding system by reviewing examples of select responses to questions and discussing parameters of coding rules. Each code was discussed and deliberated until inter-rater reliability was achieved. The raters then worked independently and collaboratively to review and code all qualitative data. An example of main codes applied in responses to skill statements are provided in Appendix B.

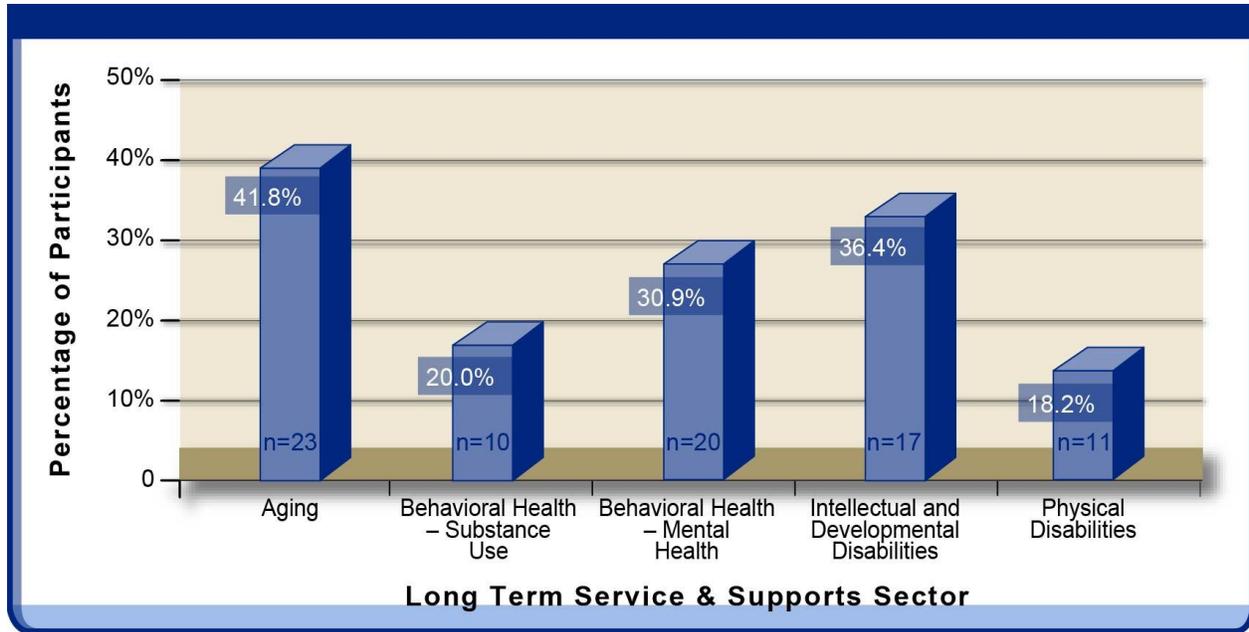
The researchers interpreted results of the qualitative analysis in order to implement content revisions in the core competency set. Nearly all skill statements were revised based on qualitative data collected. Revisions varied from grammatical edits, to rephrasing statements and incorporating key themes relevant among sectors to increase generalizability of the core competency set. (Examples illustrating skill statement revisions based on qualitative data analysis are provided in Appendix B. Additionally, the competency set was restructured slightly as a result of the qualitative analysis. For example, competency areas were reordered based on the grouping of similar or overlapping themes. The restructure also included elimination of one competency area and the subsuming of skill statements within two relevant competency areas. Comprehensive results and suggestions for revisions were presented to participants during the second iteration of data collection (stage 2, the Summit on DSW Core Competencies). During this summit, participants discussed skill statements that yielded least agreement among survey respondents. Notes and data from the discussion were collected to further inform the final draft of the competency set, which was reviewed by participants during stage 3, the final online survey.

**Sample**

The number of participants who completed the initial survey was 51. This number represented a 56 percent survey response rate based on a total of 91 individual stakeholders nominated to participate in the project and invited to take the initial survey.

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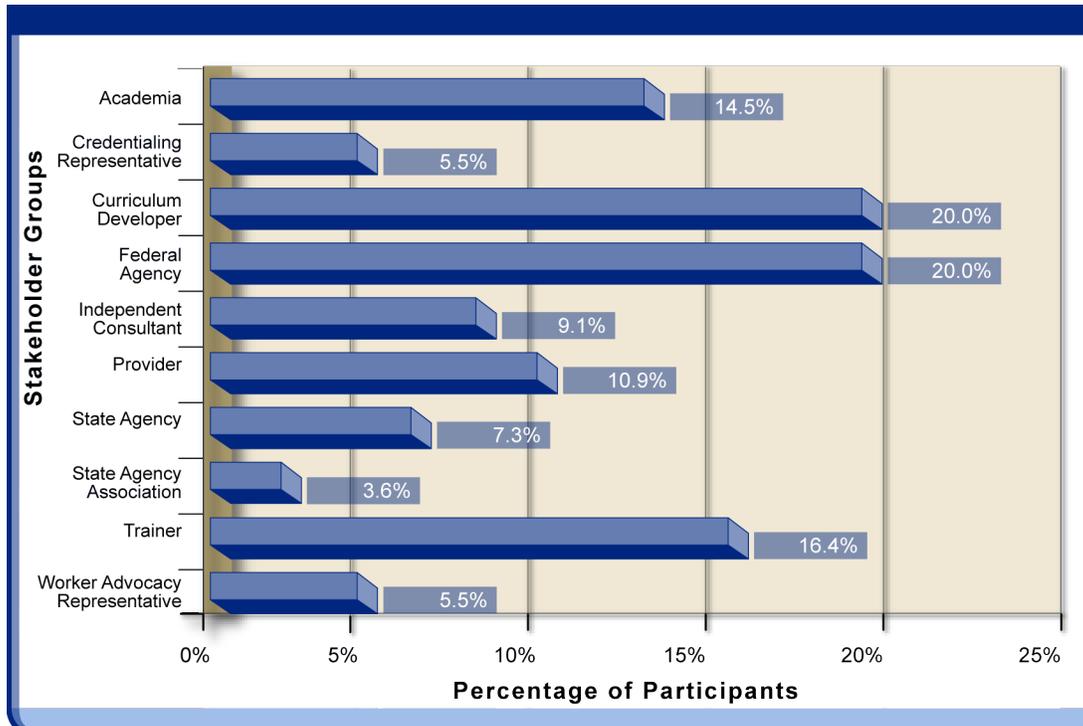
Figure 2: Initial Survey Respondent Representation Across LTSS Sectors



Stakeholder respondents were asked to indicate the primary LTSS sector they represented. Figure 2 illustrates a summary of these responses. It is important to note that some individuals identified more than one LTSS sector.

Since many stakeholders indicated in the survey that they represented more than one LTSS sector, the research team did not apply weighting in the analyses based on percentage agreement across LTSS sectors (which is further demonstrated in this report). While the various respondent groups do not reflect equal numbers, the research team coordinated with *DSW RC* partners to identify, recruit, and follow-up with nominated participants in efforts to achieve a relatively balanced number of stakeholders from each LTSS sector in this study. Please see limitations section for further discussion about sampling methods related to the Delphi process.

**Figure 3: Initial Survey Respondent Representation Based on Organizational Role or Affiliation Related to DSW**



In addition to indicating LTSS sector, participants were asked to select which categories best described their current employment setting or organizational role. [Figure 3](#) illustrates the wide diversity of respondent roles within the direct service workforce.

In this study it was important to invite and engage the participation of stakeholders who represented a national panel of leaders and experts within LTSS. Each participant’s perspective is relevant and important given his/her experience with leading and/or influencing DSW policies and practices.

### Quantitative Analysis Results

The percentage agreement among stakeholders who rated statements as “Core” (high, medium, or low priority) or “Not Core” was calculated and measured against a threshold of greater than 80 percent. This measure indicated a high level of agreement among respondents, as outlined in the previous subsection on the initial survey methods (see Figure 1).

The initial survey results indicated a high degree of consensus among stakeholders of core competencies across LTSS sectors. Sixty-eight (68) of the 79 skill statements presented in the initial survey (or 86.1 percent of total skill statements in the original draft) met the greater than 80 percent threshold. This finding is outlined by competency area in **Table 4**. All of the skill statements contained in nine of fourteen competency areas met the greater than 80 percent agreement threshold. There

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was less consensus among respondents regarding the following competency areas: *Assessment; Advocacy; Community and Service Networking; Cultural Competency; and Education, Training and Self-Development.*

**Table 4: Number and Percentage of Skill Statements Within Competency Areas Rated Core By At Least 80 Percent of Stakeholders**

Competency Areas (Initial Version)	Skill Statements Rated Core: High, Medium, or Low By > 80%
1. Communication	(4 of 4) 100%
2. Facilitation of Individualized Services	(8 of 8) 100%
3. Assessment	(2 of 5) 40%
4. Participant Crisis Prevention and Intervention	(6 of 6) 100%
5. Professionalism and Ethics	(8 of 8) 100%
6. Participant Empowerment	(4 of 4) 100%
7. Advocacy	(3 of 6) 50%
8. Documentation	(5 of 5) 100%
9. Community Living Skills and Supports	(7 of 7) 100%
10. Supporting Health and Wellness (+1)	(8 of 8) 100%
11. Safety	(5 of 5) 100%
12. Community and Service Networking	(2 of 3) 66.7%
13. Cultural Competency	(3 of 5) 60%
14. Education, Training and Self-Development	(3 of 5) 60%
<b>Total:</b>	<b>(68 of 79) 86.1%</b>

While 68 of the 79 skill statements presented in the initial survey were rated “Core” by over 80 percent of respondents, the remaining 11 skill statements ranged in “Core” ratings from 61.5 to 78.7 percent. Findings and resultant actions for the remaining 11 skill statements are as follows:

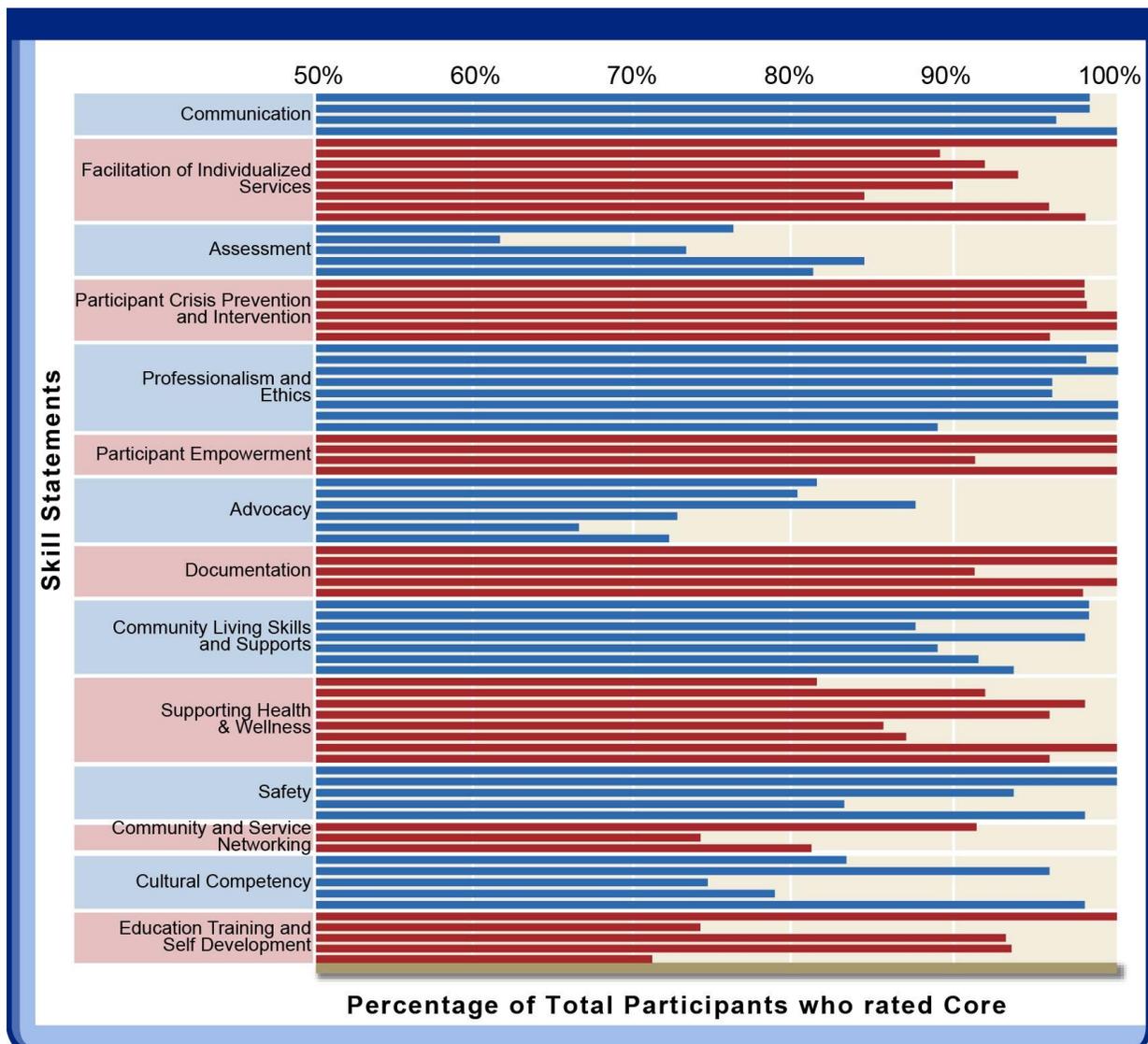
- ▶ Nine (9) skill statements fell within 70.0 to 79.9 percent range.
  - When examining percentage agreement within LTSS sector groups, it was found that three (3) of those skill statements were rated with less than 60 percent agreement as “Core” by two or more group sectors. These were deleted based on consensus guidelines determined by the research team.
  - The remaining six (6) skill statements were revised to incorporate qualitative feedback and were presented and discussed in the second iteration to determine validity (stage 2, the Summit on DSW Core Competencies).

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- Two (2) statements fell within 61.5 to 69.9 percent range. These were deleted based on consensus guidelines determined by the research team.

Figure 4 provides a comprehensive snapshot of the results based on the total percentages of core responses by skill statement. The figure includes a bar representing each skill statement, and the extent of the bar indicates the percentage of total participants who rated the skill statement as “Core” for direct service workers (high, medium, or low priority). The alternation in bar color indicates delineation between competency areas. For complete information regarding the percentage of core responses among total participants and within LTSS sector groups, please see the table entitled “Core Ratings by Total Participants and Within LTSS Sector Groups” in Appendix B.

**Figure 4. Percentage of Total Participants Who Rated Each Skill Statement as Core**



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It is also important to note which competency areas and skill statements received “Core: High Priority” ratings. **Table 5** presents initial survey results based on the calculation of average skill statement ratings of “Core: High Priority” within each competency area. Therefore this table provides a summary of mean ratings within each area. The five competency areas with highest and lowest percentage ratings within groups (in each column) are highlighted. These rankings showed a high degree of similarity across LTSS sector groups, which further indicated consensus among the respondents regarding content validity of the core competency set. The competency areas that indicated a lesser degree of consensus across LTSS sectors, such as *Participant Empowerment; Supporting Health and Wellness; and Cultural Competency*, required more substantial content revisions.

**Table 5: Average percentage of “Core: High Priority” responses within competency areas**

Competency Areas (Initial Version)	Average percentage of “Core: High Priority” responses* (Based on calculation of skill statement ratings within each area)					
	Total (N=51)	Aging(n=23)	Behavioral Health Substance Use (n=10)	Behavioral Health Mental Health (n=20)	Intellectual and Developmental Disabilities (n=17)	Physical Disabilities (n=11)
<b>1. Communication</b>	<b>77.23</b>	<b>80.58</b>	<b>87.95</b>	<b>78.68</b>	<b>76.83</b>	<b>80.00</b>
2. Facilitation of Individualized Services	68.19	65.15	68.75	72.05	60.79	58.50
3. Assessment	45.60	40.32	52.28	55.74	42.22	34.42
4. Participant Crisis Prevention and Intervention	<b>82.45</b>	<b>79.67</b>	70.00	<b>84.02</b>	<b>88.55</b>	70.65
5. Professionalism and Ethics	<b>80.74</b>	<b>83.59</b>	<b>78.75</b>	<b>80.79</b>	76.24	<b>84.04</b>
6. Participant Empowerment	58.75	47.23	<b>82.50</b>	70.60	58.93	51.95
7. Advocacy	35.10	21.43	46.12	43.60	31.54	24.02
8. Documentation	<b>83.56</b>	<b>84.94</b>	<b>85.56</b>	<b>79.36</b>	75.94	<b>80.68</b>
9. Community Living Skills and Supports	74.57	68.93	76.99	74.37	<b>81.60</b>	72.70
10. Supporting Health and Wellness	72.56	77.43	64.45	58.41	<b>78.55</b>	<b>76.60</b>
11. Safety	<b>80.02</b>	<b>81.62</b>	74.00	<b>76.46</b>	<b>87.26</b>	<b>85.78</b>
12. Community and Service Networking	44.97	25.90	66.67	56.87	33.80	27.03

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Competency Areas (Initial Version)	Average percentage of “Core: High Priority” responses* (Based on calculation of skill statement ratings within each area)					
	Total (N=51)	Aging(n=23)	<i>Behavioral Health Substance Use (n=10)</i>	<i>Behavioral Health Mental Health (n=20)</i>	<i>Intellectual and Developmental Disabilities (n=17)</i>	<i>Physical Disabilities (n=11)</i>
<b>13. Cultural Competency</b>	64.56	61.28	<b>78.00</b>	69.42	55.66	57.36
<b>14. Education, Training and Self-Development</b>	53.88	54.88	59.12	59.86	49.80	50.00

\*Note: Bold number text indicates ranking of the five areas with highest percentage ratings within the group (column); Italicized number text indicates ranking of the five areas with lowest percentage ratings within the group.

For complete information regarding the average percentage of responses by competency area stratified by LTSS sector groups, please see the second table in Appendix B entitled “Average Percentage of Responses within Competency Areas.” This table also provides the average percentages of responses by each of the four response categories, which included: (1) “Core: High Priority,” (2) “Core: Medium Priority,” (3) “Core: Low Priority,” and (4) “Not Core.” It is important to note that this information may be utilized in future research activities to draft further language for more specialized competencies based on each LTSS sector. The survey results provide content that can be used to describe more particular role delineation and further skill details that frame direct service worker responsibilities within each LTSS sector.

### Qualitative Analysis Results

The initial survey provided an opportunity for respondents to comment on the DSW core competency set as a whole and/or address particular details within competency areas and skill statements. As the Delphi process is a mixed methods research model, the qualitative data factored heavily into the research and revision process. Delphi researchers refer to qualitative data as a primary means for “discovery of opinion” among survey respondents (Hasson et al., 2000, p. 1011). As described previously in the research methods section, the raters carefully reviewed and coded qualitative data based on each statement and area. The research team utilized themes and feedback noted in the qualitative data to inform the revision process.

Throughout the initial survey, there were a total of 96 open-ended questions that were posed as optional opportunities for stakeholders to provide input and feedback on revisions of the competency set. This yielded a comprehensive collection of content-rich data. The number of responses to the 96 open-ended questions ranged from 5 to 28 per question. In their responses, stakeholders provided recommendations for changes to skill statements in order to ensure that they apply to DSW practice within the primary sector that they represented. Stakeholders also provided further suggestions of content and terminology to inform core competencies needed by direct service workers from the

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perspective of each respective LTSS sector. There were numerous themes that emerged as a result of the qualitative data coding process. Each of the five key themes is outlined in the following subsection.

The researchers interpreted the qualitative coding process to modify the competency set. Revisions were proposed in the following stage of the study in order to discuss and maximize each statement's validity and reach greater consensus. Of the 68 skill statements that were rated as core in the initial survey, nearly all underwent revision based on substantive responses to open-ended questions. Implementation of the editing process may be summarized by three guiding concepts, described here:

- ▶ **Best practices:** Respondents provided feedback based on the representation of best practices within LTSS sectors.
- ▶ **Context:** Specific language was revised to better reflect skills necessary and relevant across all sectors.
- ▶ **Breadth:** Respondents provided comments related to the breadth of concepts and skills that were reflected in skill statements. This feedback was captured in the coding process and researchers took action to edit and focus skill statements and/or skills as much as possible. This is intended to increase the ability to translate core competencies into curriculum and other related activities of workforce tool development.

The research team implemented further structural revisions of the competency set based on qualitative data. For example, some statements were moved and subsumed into different competency areas based on feedback. **Documentation** was removed as its own competency area, and most of the skill statements were integrated within other areas. The qualitative analysis provided a means to revise both the content and structure of the DSW core competency set. This analysis ensured that the comprehensive review provided by stakeholders was captured and integrated to increase both the utility and generalizability of the DSW core competency set across LTSS sectors.

## Stage 2: Stakeholder Summit

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This section summarizes the methods and results of the Stakeholder Summit. This information represents the second stage of the iterative modified Delphi research process, and should be considered in context of the previous and following stages discussed in other sections of this report.

### Methods and Facilitation

The second data collection point in this modified Delphi research process was the DSW Stakeholder Summit held in Arlington, VA, on September 10, 2012. Researchers analyzed initial survey data and provided the results to participants during this in-person summit conference. The event provided a forum to discuss DSW core competencies and results of the initial survey. The summit also served as a basis for determining consensus on core competencies through an interactive process between the participants and researchers. Participants had an opportunity to engage with other stakeholders from within and across LTSS sectors regarding proposed revisions and competency areas that yielded least agreement, in order to increase the validity of cross-sector DSW core competencies. The researchers

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guided this interactive process through facilitated discussion. Upon receiving data collected from the facilitated discussion, the researchers again analyzed this data and applied the results to create the final survey.

The purpose and structure of Stage 2 was to share and discuss the results of the Initial Survey from Stage 1, engage participants in discussion (particularly in areas in which there was low consensus), and collect additional data for the next stage of the **Phase IIIA DSW Core Competency** project. The summit process began with welcoming comments and participant introductions in which those in attendance identified the LTSS sector they represented. The presentation that served to guide the discussion process was outlined as follows:

- 1) Initial overview of the DSW Core Competency Initiative (including history, process, key considerations and operational definitions);
- 2) Presentation and discussion of initial survey findings (including analytic methodology, summary of quantitative and qualitative results, and the delineation between competency areas with greatest and least degree of consensus); and,
- 3) Identification and discussion of main themes found in qualitative analysis from the initial survey.

The process of revising individual skill statements based on the qualitative data collected and analyzed from the initial survey was described to the participants by the researchers (see Stage 1 results). The researchers highlighted competency areas that yielded the greatest consensus. These included:

- ▶ **Communication**
- ▶ **Participant Crisis Intervention and Prevention**
- ▶ **Professionalism and Ethics**
- ▶ **Documentation**
- ▶ **Community Living Skills and Supports**
- ▶ **Supporting Health and Wellness**
- ▶ **Safety**

The average skill statement ratings of “Core: High Priority” within the aforementioned competency areas ranged from 83.56-72.56 percent among total participants, as illustrated in **Table 5**. This indicated a high level of agreement based on content validity within the areas.

Participants used the majority of time at the summit to discuss and deliberate on skill statements that yielded least agreement among survey respondents. These were statements rated within the 70-80 percent agreement range (see Figure 1) and had been significantly edited to incorporate feedback. Competency areas in which initial survey results revealed least consensus included:

- ▶ **Assessment**
- ▶ **Advocacy**
- ▶ **Cultural Competency**

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- ▶ **Education, Training and Self-Development**
- ▶ **Community and Service Networking**

The average skill statement ratings of “Not Core” within the aforementioned competency areas ranged from 24.80-13.74 percent among total participants, as shown in the second table of Appendix B. This suggested a low level of agreement, and indicated weak content validity within these areas. During the summit discussion, participants presented potential language changes and identified particular aspects of the statement that did not apply or were not an expectation of direct service workers in their respective sectors.

Lastly, the themes that crossed competency areas were discussed as they related to the role of the DSW now and in the future, as well as the purpose of the competency set as a whole. These themes included; 1) DSW role variability within community-based LTSS settings, 2) reimbursement for direct services, 3) participant direction and self-determination, 4) person- and family-centered services, and 5) cultural competency.

During the summit, *DSW RC* staff members were assigned to take notes on specific LTSS sectors. Four note-takers observed and gathered information from the unique perspectives presented by each LTSS sector during the discussion. This data collection informed the researchers in creating the final survey (see Stage 3). The *DSW RC* staff members’ observations and note-taking also served in supporting the summit discussion process, as staff members provided a review of points covered, and reflected statements back to participants to ensure accuracy of understanding when needed.

In addition to collecting data through discussion, the research team distributed input forms to attendees. Summit participants were asked to use this form to provide written evaluation based on the skill statements and competency areas discussed. This constituted a supplemental method for collecting data to inform competency set revisions and creation of the final survey. One skill statement (“A” of **Supporting Health and Wellness**) was not included in the initial survey due to a computing error. Therefore, summit participants provided the initial review ratings on this form, by indicating their level of agreement or disagreement with the statement as part of the DSW core competency set.

### Summit Participants

All participants who had completed the initial survey were formally invited through email communication to attend the summit. The *DSW RC* partners further promoted attendance by contacting these stakeholders directly to encourage their attendance and participation. Stakeholders were not paid to attend, nor were any associated travel expenses covered by the *DSW RC*. However, the summit was held in conjunction with the National Home and Community Based Services Conference, which facilitated attendance for many stakeholders who participated in the study.

Representatives from all LTSS sectors attended and participated in the summit. There were a total of 25 participants from a variety of backgrounds and disciplines related to community-based LTSS direct service workforce development. The group included representatives of federal agencies, worker

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associations, advocacy groups, workforce development professionals, and academic institutions. **Table 6** highlights the DSW stakeholder organizations represented by summit participants.

**Table 6: List of Organizations that Summit Participants Represented**

DSW Stakeholder Organizations	
AARP	Alzheimer’s Association
American Public Human Services Association, Center for Workers with Disabilities	The Annapolis Coalition on the Behavioral Health Workforce
Centers for Medicare & Medicaid Services (CMS)	Department of Education, National Institute of Disability and Rehabilitation Research (NIDRR)
Department of Labor, Health Care Advancement Program	Direct Care Alliance
Georgetown University Health Policy Institute	Health Resources and Services Administration, PHCAST
Human Services Research Institute (HSRI)	Leading Age
Linking Employment, Abilities & Potential (LEAP)	Mid-Hudson Coalition
National Association of State Directors of Developmental Disabilities (NASDDDS)	National Council for Community Behavioral Health Care
National Resource Center for Participant-Directed Services (NRCPDS), Boston College	PHI
Research and Training Center on Community Living, University of Minnesota	Rosalynn Carter Institute for Caregiving
Substance Abuse and Mental Health Services Administration	US Psychiatric Rehabilitation Association (USPRA)
Veterans Health Administration	

**Results**

The feedback captured during the summit provided comprehensive data to inform the revision and next iteration of the Direct Service Workforce Core Competencies. Significant changes occurred in this revision process. Changes were based on the information gathered through discussion and consensus-building, as evidenced by focused observation and recorded notes, as well as data received on the input form. A summary of key structural and content changes to the full core competency set resulting from the initial survey and summit is provided in **Table 7**. The research team compiled feedback and implemented significant changes in the core competency set, which was later presented in the final survey for stakeholder review and validation (see Stage 3).



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**Table 7: Summary of Structural and Content Revisions Resultant of Stages 1 and 2**

Competency Areas (Final Survey Version)	Structural Revisions	Key Content Revisions	Number of Skill Statements
<b>1. Communication</b>		<ul style="list-style-type: none"> <li>▶ Incorporated concepts to increase applicability (e.g. DSW using participant’s preferred language when possible)</li> <li>▶ Added key terms (e.g. augmentative/alternative communication)</li> </ul>	4
<b>2. Facilitation of Individualized Services</b>	<ul style="list-style-type: none"> <li>▶ Added 2 SS from Documentation</li> <li>▶ Deleted 1 SS*</li> </ul>	<ul style="list-style-type: none"> <li>▶ Clarified role delineation between DSWs and other support team members</li> <li>▶ Framed DSW’s involvement as based on participant choice</li> </ul>	9
<b>3. Evaluation and Observation</b>	<ul style="list-style-type: none"> <li>▶ Renamed CA title from “Assessment”</li> <li>▶ Deleted 1 SS *</li> </ul>	<ul style="list-style-type: none"> <li>▶ Clarified role delineation between DSWs and other support team members</li> <li>▶ Removed “assessment” term from set as much as possible to prevent misinterpretation across professions and LTSS sectors</li> </ul>	4
<b>4. Participant Crisis Prevention and Intervention</b>		<ul style="list-style-type: none"> <li>▶ Incorporated concepts to promote best practices addressing participant crises more commonly addressed by DSPs across LTSS sectors</li> </ul>	6
<b>5. Safety</b>	<ul style="list-style-type: none"> <li>▶ Renumbered CA: Moved up from #11</li> </ul>	<ul style="list-style-type: none"> <li>▶ Clarified statements to delineate from previous CA (crises)</li> <li>▶ Added key terms to frame emergency preparedness activities</li> </ul>	5
<b>6. Professionalism and Ethics</b>		<ul style="list-style-type: none"> <li>▶ Reframed professionalism skills based on promotion and respect for DSW (e.g. appearance and personal wellness)</li> <li>▶ Incorporated participant direction in practice of confidentiality</li> </ul>	8
<b>7. Participant Empowerment</b>		<ul style="list-style-type: none"> <li>▶ Framed DSW’s involvement as based on participant choice</li> </ul>	4
<b>8. Advocacy</b>	<ul style="list-style-type: none"> <li>▶ Deleted 2 SS *</li> </ul>	<ul style="list-style-type: none"> <li>▶ Removed skills of systems/policy advocacy; reframed (e.g. DSW identifies barriers and how these impact the participant)</li> <li>▶ Framed DSW’s involvement as based on participant choice</li> <li>▶ Rephrased to increase applicability across LTSS sectors</li> </ul>	4
<b>9. Supporting Health and Wellness</b>		<ul style="list-style-type: none"> <li>▶ Framed DSW’s involvement as based on participant choice and support setting</li> <li>▶ Addressed dissent based on medication administration; framed as “in accordance with state regulations and agency policy and procedures</li> <li>▶ Promoted participant direction in spirituality and faith-based practices</li> </ul>	9



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Competency Areas (Final Survey Version)	Structural Revisions	Key Content Revisions	Number of Skill Statements
<b>10. Community Living Skills and Supports</b>	<ul style="list-style-type: none"> <li>▶ Renumbered CA: Moved down from #9</li> <li>▶ Moved 2 SS to Community and Service Networking</li> </ul>	<ul style="list-style-type: none"> <li>▶ Framed DSW's involvement as based on participant choice</li> <li>▶ Incorporated concepts to promote best practices addressing community living across LTSS sectors (e.g. removed decorating; changed teaching skills to "building on participant strengths and capabilities, and providing skills training when needed.")</li> </ul>	5
<b>11. Interpersonal and Family Relationships</b>	<ul style="list-style-type: none"> <li>▶ Added CA based on summit feedback</li> <li>▶ Developed 7 SS; rated "core or not core" on final survey</li> </ul>	<ul style="list-style-type: none"> <li>▶ Developed content for seven (7) SS utilizing review of existing DSW competency sets from Phase II</li> </ul>	7
<b>12. Community and Service Networking</b>	<ul style="list-style-type: none"> <li>▶ Deleted 1 SS *</li> <li>▶ Added 2 SS from Community Living Skills and Supports</li> </ul>	<ul style="list-style-type: none"> <li>▶ Clarified role delineation between DSWs and other support team members</li> <li>▶ Framed DSW's involvement as based on participant choice</li> </ul>	4
<b>13. Cultural Competency</b>		<ul style="list-style-type: none"> <li>▶ Reframed conceptualization of cultural competency and simplified language to increase application within the workforce</li> <li>▶ Incorporated concepts of value for diversity; rephrased statements to promote effective adapting of supports as needed</li> </ul>	5
<b>14. Education, Training and Self-Development</b>	<ul style="list-style-type: none"> <li>▶ Deleted 1 SS *</li> <li>▶ Deleted 1 SS based on summit feedback</li> <li>▶ Added 1 SS from Documentation</li> </ul>	<ul style="list-style-type: none"> <li>▶ Redeveloped the CA with structural revisions</li> <li>▶ Reframed the use of "evidence-based skills" as pertinent to the participant's plan</li> <li>▶ Incorporated the role of participant in DSW's feedback/evaluation activities</li> </ul>	4
<i>Other: Documentation</i>	<ul style="list-style-type: none"> <li>▶ Removed Documentation CA (3 SS subsumed; 2 SS deleted based on feedback)</li> </ul>		<b>TOTAL: 78</b>

Note: CA = Competency Area; SS = Skill Statement; \*= refers to 80 percent Core Percentage Agreement Guideline (see *Figure 1*); DSW = Direct Service Worker

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### Key Competency Areas Addressed in Summit Discussion

The summit was implemented as a platform for discussion regarding competency areas that yielded least agreement among respondents of the initial survey. In this discussion, the participants shared differences of opinion and explored the applicability of skill statements across LTSS sectors, community-based settings, and individuals receiving services. This highlighted the nuances of service ideologies and terminology that have been challenging in bridging the LTSS sectors. It also demonstrated ways in which best practices of direct service delivery are diverse and yet interrelated across LTSS sectors.

The following subsections summarize key results of summit participants' discussion regarding competency areas that yielded the least agreement: **Assessment; Advocacy; Cultural Competency; and Education, Training and Self-Development**. The last subsection describes **Family and Interpersonal Relationships**, a competency area developed based on significant themes that emerged from the survey data and summit discussion.

#### Assessment

**Assessment** was a competency area in which there was a great degree of variance in identifying it as "Core or Not Core" across LTSS sectors. Many DSW representatives recognized other direct service practitioners (such as nurses and social workers) as designated with responsibility of assessment. There was rich discussion of whether the direct service worker has a role in conducting and initiating formal assessments, versus a role in informal assessment activities (*such as observations*) that might contribute to an assessment. After much discussion and feedback regarding the revision of this area, it was determined that the role of the direct service worker across LTSS sectors is more accurately reflected as **Evaluation and Observation**. As a result of the discussion, the researchers revised the competency area and skill statements to clarify the role delineation between direct service workers and other support team members, and removed the "assessment" term from the set as much as possible to prevent misinterpretation and boundary issues across professions and LTSS sectors.

#### Advocacy

The competency area of **Advocacy** was significantly restructured based on initial survey results, as two skill statements were deleted based upon the research team's guidelines for low core percentage ratings. Discussion at the summit assisted the research team to reframe the skill statements to more accurately capture the role of direct service workers in advocacy activities. Participants discussed the advocacy role of direct service workers as fluid and dependent on the service recipient's circumstances, needs, and most importantly, choice. The participants were not in favor of such statements that may guide direct service workers in providing systems advocacy and "the removal of institutional barriers," as this role may be more delegated to attorneys and policy advocates. Rather, the participants were largely in favor of the direct service worker *identifying and understanding* the barriers a service recipient might face, so that the worker may support the person "to overcome barriers when his or her service needs are not being sufficiently met" (as stated in statement C,

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[see Appendix A](#)). Consensus among summit participants was reached based on the reframing of skill statements.

### **Cultural Competency**

The majority of stakeholders expressed approval of *Cultural Competency* as a necessary competency area for direct service workers. However, the content required deconstructing and reconstructing to become specific enough in providing direction to the workforce, while also being applicable across LTSS sectors. Through facilitated discussion, stakeholders provided rich information to guide the development of revisions. This input focused on reframing the construct by incorporating concepts of value for diversity and rephrasing statements to promote effective adapting of supports to be more culturally appropriate. Stakeholders also indicated that it was important to simplify language to describe skills related to complex concepts, such as ethnocentrism and cultural encapsulation.

### **Education, Training and Self-Development**

The competency area of *Education, Training and Self-Development* was significantly restructured based on initial survey results, as two skill statements were deleted and one statement was subsumed from another competency area. Summit participants agreed that the competency area is necessary. There was dissonance based on the variance of opinion and expectation across LTSS sectors regarding how much DSW training is needed and the way in which training is delivered. Discussion at the summit assisted the researchers in the reframing skill statements to more accurately capture core DSW requirements and activities of *Education, Training and Self-Development* across LTSS sectors and service settings. This included coming to agreement on expectations of a DSW's expertise in particular areas, meaning his or her depth of knowledge and ability to apply the knowledge in practice. Stakeholders also recognized the role of individuals receiving services and their family members, as appropriate, in providing feedback on DSW job performance, as is critical in the provision of participant-directed services.

### **Interpersonal and Family Relationships**

Summit participants advocated for the inclusion of a competency area that would recognize the skills needed for DSWs to build effective working relationships with family members involved in the lives of individuals receiving services. The direct service worker's role and responsibilities when working within the family context was found lacking within the competency set by summit participants. Given the role of family in most individual's lives, the skill to work with families was identified as a critical gap to address. It was noted that LTSS systems have historically and at times continue to be a hindrance in involving the family and has at times created separation that has strained or cutoff individuals' relationships with family members and their community. Opportunities for family involvement serve as an important catalyst in the movement toward community living.

Stakeholders stressed that direct service workers are often ill equipped to work with family members. When providing direct services within the context of a family home, an individual's own home or other

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community-based settings, it was deemed necessary for the direct service worker to understand and interact professionally with family members and important others, such as colleagues and co-workers. Based upon the summit discussion and feedback from input forms, the competency set was revised to incorporate *Interpersonal and Family Relationships*. As a result of the discussion, this competency area was developed based on a crosswalk of existing DSW competencies and review of best practices. This new competency area was posed for validation in the final survey.

### Stage 3: Final Survey

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This section summarizes the methods and results presented based on the final survey. This information represents the third and final stage of the iterative modified Delphi research process, and should be considered in the context of the previous stages discussed in earlier sections.

#### Methods

The final survey was completed by participants online (similar to the initial survey), but with a revised format for response. The survey contained content based on the outcomes and revisions from the initial survey and stakeholder summit. In this last stage of the modified Delphi process, the purpose was to present the revised DSW core competency set and assess stakeholders' agreement or disagreement to each skill statement and set as a whole. The final survey was distributed to all stakeholders invited to participate in this project. In the survey, respondents were asked to review and compare each original skill statement (as it had been presented in the initial survey) with the post-summit revised statement. They were asked if they agreed or disagreed with the revised statement as indicative of a core competency, from the perspective of the primary LTSS sector in which they represented. No qualitative data was gathered in the stakeholders' process providing feedback on skill statement ratings.

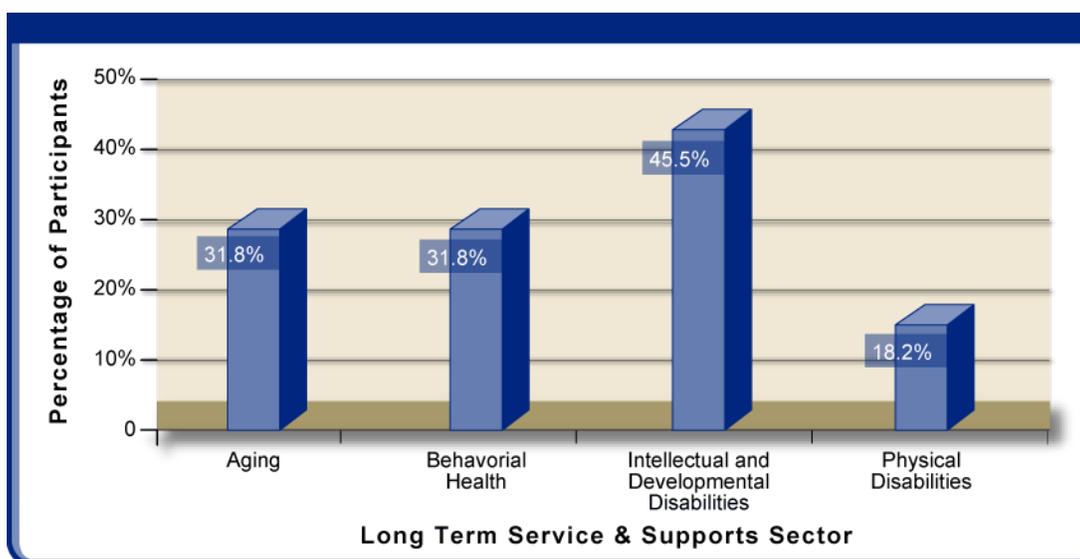
Results of the final survey were based on the threshold of percentage agreement that was set as a guideline by the research team (see Figure 1). This was a predetermined guideline and was communicated in the instructions provided to respondents on each survey page. For each skill statement within a competency area, the outcome of at least 80 percent of respondents who indicated agreement with the revised skill statement resulted in its maintenance within the final set. If less than 80 percent of respondents were in agreement with the revised statement that had been implemented based on results of the initial survey and stakeholder summit, then the original statement was retained.

An optional open-ended question was posed upon completion of the final stakeholder review requesting any additional feedback, comments, or questions about the revised core competency set. Analysis of this qualitative data is summarized in the following section (VI), in discussion of Phase IIIA overall findings.

### Sample

The number of participants who completed the final survey was 23. This number represented a survey response rate of 25.3 percent, as 91 individual stakeholders were nominated to participate in the project and invited to take the initial survey.

**Figure 5. Final Survey Respondent Representation Across LTSS Sectors**



Stakeholder respondents were asked to indicate the primary LTSS sector that they represent. Figure 5 illustrates a summary of these responses. It is important to note that some individuals identified with more than one LTSS sector.

Since many stakeholders represented more than one LTSS sector, the research team did not apply weighting in the analyses based on percentage agreement across sectors. While the various respondent groups do not reflect equal numbers of representation, the research team coordinated with *DSW RC* partners to identify, recruit, and follow-up with nominated participants in efforts to achieve a relatively balanced number of stakeholders from each LTSS sector in this study. Please see limitations section for further discussion about sampling methods related to the Delphi process.

### Results

In the final survey process, 70 skill statements (or 93.3 percent of the 75 total skill statements that were rated in the final survey’s proposed core competency set) were accepted by over 80 percent of participants. The skill statements that did not meet this percentage agreement threshold were dropped from the set, and the previous skill statement (as posed in the initial survey) was maintained. The failure for more than 80 percent of stakeholders to accept the skill statement suggested that the

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revised language moved the content, applicability or terminology further away from what was initially determined as “Core.”

A total of seven original skill statements were maintained in the final DSW core competency set, based on:

- ▶ Four (4) revised statements were rated below 80 percent agreement in the final survey.
- ▶ Three (3) original statements were maintained (unrevised) from the first survey based on high core agreement ratings across sectors (as stakeholders did not rate these statements in final survey).

In addition, one statement in the new competency area of *Interpersonal and Family Relationships* (added based on Summit feedback) failed to yield responses above the 80 percent agreement threshold (based on “Core or Not Core”) in the final survey. This statement was dropped from the set.

The following subsections highlight results within each core competency area.

### 1. Communication

Three of the four skill statements in this competency area met the 80 percent threshold. Participant responses indicating approval of statements ranged from 75 to 100 percent, as illustrated in **Table 8**. Skill Statement B did not meet the 80 percent threshold, and thus the original statement posed in the initial survey was retained in the final core competency set. In the initial survey, 98.1 percent of total participants rated skill statement B as “Core” (High, Medium, or Low Priority), as illustrated in the first table in Appendix B.

**Table 8: Percentage Response Results within Competency Area #1**

Skill Statement	Original*	Revised*	Percent Approved of Revised Statement in Final Survey
A. The DSW uses effective, respectful communication skills. This includes active listening, paraphrasing, and using open-ended questions to create open communication with participant.		Yes	95.2%
B. The DSW has knowledge of and uses positive communication strategies (verbal and nonverbal) that are appropriate and specific to the needs of participants.	Yes		75.0%
C. The DSW uses service terminology as needed for effective service delivery, explaining as necessary to participants and family members to ensure understanding.		Yes	95.2%
D. The DSW communicates with participants and their natural support systems in a respectful and culturally appropriate manner, using preferred language when possible, respecting cultural differences, and recognizing non-verbal communications.		Yes	100.0%

\*Note: Yes denotes the version of skill statement (original or revised) that was maintained in the final core competency set.

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## 2. Facilitation of Individualized Services

Eight of the nine skill statements in this competency area met the 80 percent threshold. Participant responses indicating approval of statements ranged from 70 to 100 percent, as illustrated in **Table 9**. Skill Statement D did not meet the 80 percent threshold, and thus the original statement posed in the initial survey was retained in the final core competency set. In the initial survey, 93.7 percent of total participants rated skill statement D as “Core” (High, Medium, or Low Priority).

**Table 9: Percentage Response Results within Competency Area #2**

Skill Statements	Original*	Revised*	Percent Approved of Revised Statement in Final Survey
A. The DSW maintains collaborative professional relationships with the participant and all support team members (including family/friends, as desired by participant).		Yes	90.0%
B. The DSW assists in the development of an individualized plan based on participant strengths, preferences, needs, and goals.		Yes	100.0%
C. The DSW implements a participant’s individualized plan to achieve goals collaboratively identified with participant, based upon his or her preferences, strengths, needs, and interests.		Yes	95.0%
D. The DSW contributes as part of a multidisciplinary team, participating in team building and group processes.	Yes		70.0%
E. The DSW reviews progress towards participant outcomes, and collaborates with participant to identify alternative goals to be shared with multidisciplinary team.		Yes	100.0%
F. The DSW supports successful transitions across services, including promoting delivery of appropriate services based on the participant’s strengths and needs, and facilitating transition into home and community-based settings.		Yes	100.0%
G. The DSW fosters a supportive environment, providing person-centered supports and services using a strengths-based approach to promote the participant’s development of knowledge, skills, and attitudes necessary to achieve goals.		Yes	100.0%
H. The DSW collects, compiles, documents, and reviews pertinent participant information to ensure effective service provision, consistent with agency standards and in compliance with applicable administrative rules.		Yes	85.0%
I. The DSW uses documentation effectively and submits records to appropriate sources in a timely manner to promote consistent delivery of services.		Yes	90.0%

\*Note: Yes denotes the version of skill statement (original or revised) that was maintained in the final core competency set.

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### 3. Evaluation and Observation

Three of the four revised skill statements in this competency area met the 80 percent threshold. Participant responses indicating approval of statements ranged from 77.8 to 100 percent, as illustrated in **Table 10**. Skill Statement A did not meet the 80 percent threshold, and thus the original statement posed in the initial survey was retained in the final core competency set.

**Table 10: Percentage Response Results within Competency Area #3**

Skill Statements	Original*	Revised*	Percent Approved of Revised Statement in Final Survey
A. The DSW initiates or assists in the initiation of an assessment process by gathering information from multiple sources including formal and informal networks.	Yes		77.8%
B. The DSW can review and discuss findings from the various assessments and evaluations that inform individualized services and plans.		Yes	88.9%
C. The DSW collects data regarding the progress and achievement of goals, and regularly seeks input from the participant, and his or her family as requested, regarding satisfaction with progress towards goals to inform the plan and services.		Yes	100.0%
D. The DSW conducts observations from a culturally relevant perspective and uses results to support the independence, health and wellness of the participant.		Yes	94.4%

\*Note: Yes denotes the version of skill statement (original or revised) that was maintained in the final core competency set.

In the initial survey, 76.1 percent of total participants rated Skill Statement A as “Core” (High, Medium, or Low Priority). Since this did not meet percentage agreement guidelines, the skill statement was discussed at the summit. During the discussion, the stakeholders deemed content within Skill Statement A was relevant among direct service workers, and stakeholders suggested revisions to increase validity. Based on the results, the researchers revised the statement and removed the term “assessment.” The original and revised versions are presented below:

**Original Skill Statement A (Final):** The DSW initiates or assists in the initiation of an assessment process by gathering information from multiple sources including formal and informal networks.

**Revised Skill Statement A (Rejected):** The DSW secures information and provides ongoing feedback on participant's condition, as agreed upon by participant, to support ongoing adjustment to the plan to best meet the participant's needs.

Since fewer than 80 percent of total respondents indicated acceptance of the revised skill statement, the original statement was maintained. While the statement was reframed based on summit feedback, it is assumed that the revised language moved the content further away from what was

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initially determined by many as “Core.” Also, it is important to note that the researchers did not remove the “assessment” term from this finalized skill statement in order to maintain fidelity to the research design.

**4. Participant Crisis Prevention and Intervention**

Four of the six revised skill statements in this competency area met the 80 percent threshold. Participant responses indicating approval of statements ranged from 78.9 to 100 percent, as illustrated in **Table 11**.

Skill Statement C did not meet the 80 percent threshold, and thus the original statement posed in the initial survey was retained in the final core competency set. In the initial survey, 97.9 percent of total participants rated skill statement C as “Core” (High, Medium, or Low Priority), as illustrated in the first table of Appendix B.

**Table 11: Percentage Response Results within Competency Area #4**

Skill Statements	Original*	Revised*	Percent Approved of Revised Statement in Final Survey**
A. The DSW recognizes the indicators of risks and participant crisis situations, and identifies appropriate person-centered prevention strategies.		Yes	100.0%
B. The DSW uses positive behavior support strategies to promote wellness, recovery and crisis prevention when a participant engages in potentially challenging or dangerous behavior.		Yes	94.7%
C. The DSW uses appropriate intervention strategies to defuse a crisis situation.	Yes		78.9%
D. The DSW recognizes the need for and seeks additional assistance at any point of a crisis.	Yes		n/a
E. The DSW continues to monitor situations and effectively communicates with the participant and/or family or team members to reduce risk while complying with regulations for reporting.		Yes	89.5%
F. The DSW recognizes his or her role during conflict or crisis situations, identifies how his or her behavior affected the situation, and changes behavior to minimize potential for crisis or conflict.		Yes	94.7%

\*Note: Yes denotes the version of skill statement (original or revised) that was maintained in the final core competency set;

\*\*n/a denotes the exclusion of skill statement in the final survey due to high consensus reached in the initial survey

Skill Statement D included in this competency area was not a response item in the final survey, as it had reached a high a threshold across all sectors. In the initial survey, 100 percent of total participants,

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as well as all LTSS sector groups, rated skill statement A as “Core” (High, Medium, or Low Priority), as illustrated in the first table of Appendix B.

**5. Safety**

All five revised skill statements in core competency area **Safety** were approved by research participants; responses ranged from 94.7 to 100 percent. This finding indicates consensus and is illustrated in the following table. (Please note that the **Safety** competency area was re-numbered, moved up next to **Participant Crisis Prevention and Intervention** from where it had been initially placed as #11.)

**Table 12: Percentage Response Results Within Competency Area #5 (Final version)**

Skill Statements	Original*	Revised*	Percent Approved of Revised Statement in Final Survey
A. The DSW understands and demonstrates his/her responsibility to identify, prevent, and report abuse, exploitation, and neglect.		Yes	100.0%
B. The DSW understands types and indicators of abuse according to state law and organizational policies, including physical abuse, psychological abuse, exploitation, neglect, and improper use of physical and chemical restraints, and implements methods to prevent them.		Yes	94.7%
C. The DSW is prepared to maintain the participant's health and safety in the event of emergency (fire, natural disaster, terror threat, etc.), and is practiced in emergency procedures.		Yes	100.0%
D. The DSW facilitates learning and assists a participant to develop and retain safe community living skills.		Yes	94.7%
E. The DSW provides first aid and safety procedures based on the needs of the participant when responding to emergencies.		Yes	94.7%

\*Note: Yes denotes the version of skill statement (original or revised) that was maintained in the final core competency set

**6. Professionalism and Ethics**

Seven out of seven skill statements were retained as they reached the 80 percent threshold. Participant responses indicating approval of statements ranged from 84.2 to 100 percent (illustrated in **Table 13**). Skill Statement F for this competency area was not a response item in the final survey; the initial survey results for this item reflected a high agreement across all LTSS sectors. In the initial survey, 100 percent of total participants, as well as all LTSS sector groups, rated skill statement A as “Core” (High, Medium, or Low Priority), as illustrated in the first table of Appendix B.

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**Table 13: Percentage Response Results within Competency Area #6  
(Final version)**

Skill Statements	Original*	Revised*	Percent Approved of Revised Statement in Final Survey**
A. The DSW is aware of his/her professional performance and compares this to ethical, legal, and professional standards to enhance performance.		Yes	84.2%
B. The DSW understands and demonstrates his/her collaborative role in relation to the participant and adheres to boundaries in various settings.		Yes	94.7%
C. The DSW demonstrates professionalism and responsibility, including timeliness, accountability, and appearance appropriate to his/her work environment.		Yes	100.0%
D. The DSW conducts all professional activities in accordance with relevant Code of Ethics (NADSP, USPRA, etc.) and applicable laws, regulations, and agency policies.		Yes	100.0%
E. The DSW understands the importance of stress reduction and uses strategies to promote personal wellness.		Yes	100.0%
F. The DSW respects and promotes the participant's right to privacy, respect, and dignity.	Yes		n/a
G. The DSW respects the confidentiality of participant information in all verbal and written communication, as directed by the participant, and adheres to the Health Insurance Portability and Accountability Act of 1996 (HIPAA).		Yes	94.7%
H. The DSW informs the participant of his or her rights, and procedures that safeguard these rights.		Yes	100.0%

\*Note: Yes denotes the version of skill statement (original or revised) that was maintained in the final core competency set;

\*\*n/a denotes the exclusion of skill statement in the final survey due to high consensus reached in the initial survey.

## 7. Participant Empowerment

All four revised skill statements for this competency area met the 80 percent threshold. No original skill statements were retained. Participant responses indicating approval of statements ranged from 89.5 to 100 percent, as shown in **Table 14**. This indicated that the revised language moved the content, applicability or terminology further toward what was initially determined as core skill statements.

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**Table 14: Percentage Response Results within Competency Area #7 (Final version)**

Skill Statements	Original*	Revised*	Percent Approved of Revised Statement in Final Survey
A. The DSW supports the participant to identify goals, make informed choices, and follow-through on responsibilities.		Yes	100.0%
B. The DSW promotes participant engagement in the design of support services, involving the participant and others at the request of the participant in the process, and inquiring about satisfaction with current services.		Yes	89.5%
C. The DSW supports the participant to advocate for oneself by increasing awareness of self-advocacy methods, providing information on peer support and self-advocacy groups, and assisting the participant to speak on his or her own behalf.		Yes	94.7%
D. The DSW provides information about human, legal, civil rights and other resources, and supporting access to information that allows the participant make informed decisions about community living, work, and social relationships.		Yes	88.9%

\*Note: Yes denotes the version of skill statement (original or revised) that was maintained in the final core competency set.

## 8. Advocacy

All four revised skill statements for this competency area met the 80 percent threshold. No original skill statements were retained. Participant responses indicating approval of statements ranged from 88.9 to 100 percent for these skill statements, as shown in **Table 15**. This largely approved response to revisions suggested that the researchers had provided sufficient edits and restructuring (as a result of previous stages) that increased content validity in this area.

**Table 15: Percentage Response Results within Competency Area #8 (Final version)**

Skill Statements	Original*	Revised*	Percent Approved of Revised Statement in Final Survey
A. The DSW supports the participant to identify, gather information, and review aspects of an issue concerning the participant's rights to promote self-advocacy.		Yes	88.9%

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B. The DSW has awareness of participant rights, services, and community resources, or knows where to direct the participant to learn more and secure needed supports.		Yes	100.0%
C. The DSW supports the participant to overcome barriers when his or her service needs are not being sufficiently met.		Yes	100.0%
D. The DSW identifies the barriers that sustain stigma, oppression, discrimination, and prejudice in our society and service system, and how this impacts the participant.		Yes	94.4%

\*Note: Yes denotes the version of skill statement (original or revised) that was maintained in the final core competency set.

**9. Supporting Health and Wellness**

All nine revised skill statements for this competency area met the 80 percent threshold. Participant responses indicating approval statements ranged from 83.3 to 100 percent, shown in **Table 16**. The skill statements in this competency area showed the greatest differential amongst the total statements that met threshold. No original skill statements were retained. It is assumed that the revisions resultant of previous stages had increased content validity within the competency area.

**Table 16: Percentage Response Results within Competency Area #9 (Final version)**

Skill Statements	Original*	Revised*	Percent Approved of Revised Statement in Final Survey
A. The DSW promotes the health and wellness of the participant in the areas of physical, spiritual, emotional, and social wellbeing.		Yes	100.0%
B. The DSW accurately administers medications, or assists participants to self-administer medications, in accordance with state regulations and agency policy and procedures.		Yes	100.0%
C. The DSW supports the participant to express his or her personal faith and observe religious or spirituality practices, as directed by the participant.		Yes	94.4%
D. The DSW promotes the participant's knowledge and skills in disease prevention and maintenance of his or her own health, including sexual health and wellbeing.		Yes	100.0%
E. The DSW demonstrates and assists the participant to apply standard infection control procedures in all activities.		Yes	94.4%

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Skill Statements	Original*	Revised*	Percent Approved of Revised Statement in Final Survey
F. The DSW supports the participant in implementing health and medical treatments, including assisting with the use of prescribed equipment, supplies, and devices as appropriate, and as determined by the needs and desires of the participant.		Yes	94.4%
G. The DSW facilitates healthy nutrition by assisting the participant to develop or maintain knowledge and skills with meal planning, food preparation and serving, food shopping and handling, in accordance with the participant's preference and plans.		Yes	94.4%
H. The DSW recognizes and promotes participant knowledge of abnormal signs and symptoms of common diseases and conditions of body systems, and takes necessary informed action in collaboration with the participant.		Yes	88.9%
I. The DSW recognizes and promotes participant knowledge of abnormal signs and symptoms of common diseases and conditions of body systems, and takes necessary informed action in collaboration with the participant.		Yes	83.3%

\*Note: Yes denotes the version of skill statement (original or revised) that was maintained in the final core competency set.

**10. Community Living Skills and Supports**

All five revised skill statements of this competency area met the 80 percent threshold. Participant responses indicating approval of statements ranged from 94.4 to 100 percent. No original skill statements were retained in the final core competency set, as listed in **Table 17**.

**Table 17: Percentage Response Results Within Competency Area #10 (Final Version)**

Skill Statements	Original*	Revised*	Percent Approved of Revised Statement in Final Survey
A. The DSW assists the participant to meet his or her physical (e.g., health, grooming, toileting, eating) and personal management needs (e.g., human development, sexuality), building on participant strengths and capabilities, and providing skills training when needed.		Yes	94.4%

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Skill Statements	Original*	Revised*	Percent Approved of Revised Statement in Final Survey
B. The DSW assists the participant with household management (e.g., meal preparation, laundry, cleaning) and with transportation needs, as directed by participant and his or her plan, to maximize independence, high quality of life, and community living.		Yes	94.4%
C. The DSW supports the participant in identifying, securing, and using needed equipment (e.g., adaptive equipment) and therapies (e.g., physical, occupational and communication) to promote health and safety.		Yes	100.0%
D. The DSW supports the participant in the development and/or maintenance of friendships and other relationships as chosen by the participant based on his or her interest and preference.		Yes	94.4%
E. The DSW encourages and supports the participant to develop and continue fulfillment of chosen, desired, and valued social roles.		Yes	100.0%

\*Note: Yes denotes the version of skill statement (original or revised) that was maintained in the final core competency set.

### 11. Interpersonal and Family Relationships

Based on results of the initial survey and summit, a new competency area was developed to convey and frame the application of DSW interpersonal skills in the context of individuals’ family members and significant others. The description and content of this core competency area is provided below, and within **Table 18**.

*Competency Description: The DSW engages in support that recognizes, respects, and values the role of family and social relationships as an essential component of the participant’s quality of life and community living.*

As a result of the final survey, six of the seven skill statements for this competency area met the 80 percent threshold. The percentage of “Core” responses by participants ranged from 82.4 to 100 percent. Skill Statement G in the new area of Interpersonal and Family Relationships was rated below 80 percent agreement in the final survey, at 76.5 percent. As a result, this statement was excluded from the final set. It was recognized that DSW skills of problem solving and conflict resolution within this statement may constitute boundary issues outside the scope of the direct service worker’s role.

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**Table 18: Percentage Response Results Within Competency Area #11 (Final Version)**

Skill Statements	Not Accepted as Core*	Accepted as Core*	Percentage of Core responses in Final Survey
A. The DSW understands and respects the leadership role of family members in planning, guiding, and supporting services and supports with and/or for the participant, as appropriate based on the participant's experience.		Yes	82.4%
B. The DSW seeks information and builds knowledge to understand the nature and dynamics of family and social relationships within the participant's life.		Yes	82.4%
C. The DSW tailors services and supports to unique characteristics and experiences of the participant, family, and community.		Yes	82.4%
D. The DSW establishes and maintains appropriate social and physical boundaries in relation to the participant and his/her family members (and other members of his/her natural support system, including friends and those who the participant considers significant in his/her life).		Yes	94.1%
E. The DSW utilizes clear, effective, and respectful communication skills in all interactions with the participant's family members and other members of his/her natural support system.		Yes	100.0%
F. The DSW provides support that is informed by and respectful of the participant's rights to privacy and confidentiality within the home environment, community settings, and service system.		Yes	100.0%
G. The DSW supports problem solving and conflict resolution within the context of the participant's family relationships and natural support system.	Yes		76.5%

\*Note: Yes denotes whether the skill statement was maintained in the final core competency set.

## 12. Community and Service Networking

All four revised skill statements for this competency area met the 80 percent threshold. **Table 19** shows participant responses indicating approval of statements ranged from 88.9 to 100 percent. No original skill statements were retained. This largely approved response to revisions suggested that the researchers had provided sufficient edits (*such as clarifying role delineation*) and restructuring (*deletion and addition of skill statements*) that increased content validity in this area.

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**Table 19: Percentage Response Results Within Competency Area #12**

Skill Statements	Original*	Revised*	Percent Approved of Revised Statement in Final Survey
A. The DSW assists the participant to identify his or her preferences and needs for community supports using a person-centered approach, and works with informal and formal support systems to identify and access community connections.		Yes	100.0%
B. The DSW provides coordination, support, and follow-through to promote the participant’s access to available community resources as determined by, or in collaboration with the participant.		Yes	94.4%
C. The DSW assists the participant to access and participate in integrated, meaningful activities, promoting the participant’s ability to live in a community of choice.		Yes	100.0%
D. The DSW promotes the use of natural supports (including family, friends, neighbors, and coworkers), within the participant’s neighborhood, community, and workplace.		Yes	88.9%

\*Note: Yes denotes the version of skill statement (original or revised) that was maintained in the final core competency set.

**13. Cultural Competency**

All five revised skill statements for this competency area met the 80 percent threshold. Participant responses indicating approval of statements ranged from 88.9 to 100 percent, as listed in **Table 20**. No original skill statements were retained. This largely approved response to revisions suggested that the researchers had provided sufficient edits, such as reframing the concept and simplifying language, which increased content validity in this area.

**Table 20: Percentage Response Results Within Competency Area #13**

Skill Statements	Original*	Revised*	Percentage Approved of Revised Statement in Final Survey
A. The DSW supports participants from diverse backgrounds by engaging in self-reflection and learning opportunities designed to increase awareness of diversity and cultural competence.		Yes	88.9%
B. The DSW recognizes his or her own personal biases, stereotypes, and prejudices and does not allow them to interfere with interactions with others.		Yes	94.4%
C. The DSW respects unique cultural needs and preferences of each participant to provide culturally competent services and supports.		Yes	94.4%

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Skill Statements	Original*	Revised*	Percentage Approved of Revised Statement in Final Survey
D. The DSW provides culturally relevant learning, social, and recreational opportunities for participants.		Yes	94.4%
E. The DSW provides support based on the individual characteristics of the participant and his or her family as appropriate, incorporating sensitivity to culture, religion, race, ethnicity, linguistics, disability, developmental level, age, health status, sexual orientation, and gender into daily practices and interactions.		Yes	100.0%

\*Note: Yes denotes the version of skill statement (original or revised) that was maintained in the final core competency set

**14. Education, Training and Self-Development**

All revised skill statements for this competency area met the 80 percent threshold as a result of the final survey. Participant responses indicating approval of statements ranged from 94.4 to 100 percent. This largely approved response to revisions suggested that the researchers had provided sufficient edits (*such as incorporating the service participant’s role in the skill-based activities*) and restructuring (deletion and addition of skill statements) that increased content validity in this area.

Skill Statement A for this competency area was not a response item in the final survey. It had reached a high threshold of agreement across all sectors in the previous iteration of the core competency set. In the initial survey, 100 percent of total participants, as well as all LTSS sector groups, rated skill statement A as “Core” (High, Medium, or Low Priority), as illustrated in the first table of Appendix B.

**Table 21: Percentage Response Results within Competency Area #14**

Skill Statements	Original*	Revised*	Percent Approved of Revised Statement in Final Survey**
A. The DSW completes required training education/certification and continues professional development.	Yes		n/a
B. The DSW seeks feedback from multiple sources, including participants and family members as appropriate, and uses performance evaluations to improve performance.		Yes	100.0%
C. The DSW learns about and uses evidence-based skills as identified in participant’s plan.		Yes	94.4%
D. The DSW learns and remains current with appropriate documentation protocols, tools, and technologies.		Yes	94.4%

\*Note: Yes denotes the version of skill statement (original or revised) that was maintained in the final core competency set;

\*\*n/a denotes the exclusion of skill statement in the final survey due to high consensus reached in the initial survey.

## Limitations

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The current research implemented in the first part of Phase III has limitations. It was conducted as a modified Delphi study with a national sampling of experts and leaders who represented various organizations invested in community-based LTSS. This constituted a panel of stakeholders ranging in professional roles and experience, as well as policy and LTSS sector interests in relation to the direct service workforce. Delphi research methods call for “a fine balance” in selecting experts who may be relatively impartial “so that the information obtained reflects current knowledge and/or perceptions, yet [the experts] also have an interest in the research topic” (Hasson et al., 2000, p. 1010). Therefore, while the Delphi technique is an important way to broaden the knowledge base within health and human sciences, it is exposed to inherent risks of researcher and subject bias. The design of the current Road Map of Core Competencies project has included various strategies to mitigate the effect of such biases, however, bias may exist.

The stakeholders were purposively identified and selected by partners of the National *DSW RC* to participate in the study. This selection was based on the partners’ view of stakeholders’ DSW leadership and expertise. Therefore, the panel was representative of national DSW experts and leaders based on the extent of professional knowledge and relationships previously established by members of the seven partnering organizations: The Lewin Group, The University of Minnesota’s Research and Training Center on Community Living, PHI, LeadingAge Center for Applied Research, The Westchester Consulting Group, The Annapolis Coalition on The Behavioral Health Workforce, and The Family Caregiver Alliance (FCA). A list of participants and their affiliations is included in the first section.

The Delphi research method is an iterative participatory process, with multiple points of data collection and analysis. This involves informing the sample of results from each stage. Given the high level of involvement and investment of time on behalf of participants, it is a noted challenge for Delphi researchers to sustain stakeholder participation throughout the data collection processes (Cycyota & Harrison, 2006; Landeta, Barrutia, & Lertxundi, 2011). The *Road Map of Core Competencies* project research team conducted recruitment and coordination efforts to stimulate and encourage participation among all 91 stakeholders nominated. The initial survey in stage one yielded a response rate of 56.0 percent, which is considered adequate by standards of online survey methods (Instructional Assessment Resources, 2011; Hamilton, 2003), but less than the suggested response rate of 70 percent for Delphi methods (Hasson et al., 2000). As expected, participation rates decreased in the following iterations of the Delphi process, whereas the attendance rate of the Summit meeting was 27.5 percent (stage 2), and the response rate of the final online survey was 25.3 percent (stage 3). It is important to note that all 91 stakeholders in the sampling pool were kept abreast of the results of each iteration of the survey through reports and webinar presentations, distributed via email and website communications through the *DSW RC*. Thus, there were ample opportunities provided to stakeholders to express views of agreement or dissent throughout the Delphi process,

## Summary of Findings

During project Phase I of the **Road Map of Core Competencies (2011)**, it was found that not a single nationally recognized and validated competency set existed to guide the training and development of the entire LTSS workforce. Each LTSS sector had identified training needs and competency sets, but the application and influence of these standards in the field was limited. With little interdisciplinary research and dialogue, the existing competency sets represented varied practice concepts due to the unique trajectories of LTSS service models and sectors. These factors have resulted in an increasing problem where state policies have perpetuated low expectations in the delivery of direct services by failing to support adequate training and application of DSW competencies. This ultimately has resulted in lower quality standards of service delivery inconsistent with the vision of the Federal initiative for community living. In a comprehensive synthesis of DSW demographics and challenges, partners of the *DSW RC* recommended that a national DSW core competency set be developed for the entire community-based LTSS direct service workforce (The Lewin Group, 2008). Findings of the Phase II project indicated that this project was a feasible endeavor, as a significant number of “Core” competencies exist across LTSS sectors (DSW RC, 2011). Building consensus and validating core competencies across sectors was deemed an effective strategy toward resolving workforce challenges (DSW RC, 2011).

Phase IIIA of the *Road Map of Core Competencies* project involved collaborating with stakeholders to synthesize the results of the competency analysis (Phase II) and reach consensus on a set of core competencies for DSWs through a modified Delphi research process. This effort engaged representatives of government agencies and stakeholder organizations who contribute to direct service workforce development initiatives. The initial draft of potential core competencies was drawn from a content analysis of existing competency sets across LTSS sectors, which was conducted during Phase II of the project, and resulted from a comprehensive inventory and review of relevant initiatives from Phase I. During the first part of Phase III of the project, stakeholders across LTSS sectors were identified by partners of the *DSW RC* and invited to participate in the modified Delphi study. Stakeholders completed multiple surveys and participated in facilitated dialogue through this process. Data was collected to inform the ongoing development of this core competency set for direct service workers of community-based LTSS.

Appendix A presents the finalized DSW core competency set, which includes a preamble discussing application and context. The finalized competency areas, listed in **Table 22**, summarize the content of the competency set. See Appendix A for the full set resulting from Phase IIIA.

**Table 22: Summary of DSW Core Competency Set, Based on Phase IIIA Results**

Finalized Core Competency Areas (Version 3.0)	Number of Skill Statements
1. Communication	4
2. Facilitation of Individualized Services	9
3. Evaluation and Observation	4

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Finalized Core Competency Areas (Version 3.0)	Number of Skill Statements
4. Participant Crisis Prevention and Intervention	6
5. Safety	5
6. Professionalism and Ethics	8
7. Participant Empowerment	4
8. Advocacy	4
9. Supporting Health and Wellness	9
10. Community Living Skills and Supports	5
11. Interpersonal and Family Relationships	6
12. Community and Service Networking	4
13. Cultural Competency	5
14. Education, Training and Self-Development	4
<b>Total:</b>	<b>77</b>

Upon completion of the final stakeholder review, an optional open-ended question was posed requesting additional feedback, comments, or questions about the revised DSW core competency set. This qualitative data contained remarks regarding approval of the DSW core competency set. The theme of agreement and approval of the revised core competency set was shared during a webinar presentation and discussion with stakeholders facilitated by the *DSW RC* to communicate initial results and findings from the Phase IIIA research process. The theme of agreement and approval suggests that the researchers provided sufficient edits and restructuring that increased content validity of the DSW core competency set. Thus, the initial validation of the core competency set has been sufficient to gain broad consensus among various sectors of LTSS.

The DSW core competencies constitute a tool developed using rigorous research methods with the goal to provide support to the direct service workforce. The finalized DSW core competency set may be used to establish evidence-based practices for training and employment of direct service workers, through the following activities:

- ▶ Frame training objectives and guide curriculum development across all sectors of the community-based LTSS direct service workforce.
- ▶ Develop measures of initial worker skills and plan for entry-level training and competency development across sectors.
- ▶ Cultivate skill development and measure competencies within the current direct service workforce.
- ▶ Serve as the foundation for the development of DSW career ladders and lattices across sectors inclusive of a wide variety of DSW roles.
- ▶ Support and facilitate DSW competency throughout community-based LTSS. The core competencies provide a basis for States and organizations to assess workforce capacity and promote effective training policies to meet individuals' service needs.

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*CMS* has made a significant commitment to and investment in the DSW Core Competencies. The process of identifying and revising the competencies has involved stakeholders from various roles of workforce leadership and expertise across all LTSS sectors. One of the most significant results from this process is stakeholder buy-in, as well as interdisciplinary collaboration toward the goals of DSW development and community living. It will be important to build on this work to fulfill the goals of guiding the development of career lattices, curriculums, and workforce development tools. It will be important to promote and adopt the core competencies so that they may be applied as valuable assets in direct service training and practice. Through sustained efforts in operationalizing the core competency set, a more competent, stable workforce will emerge to meet the growing demand of community-based LTSS.

### Proposed Next Steps

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Building on the initial validation completed as a result of Phases I, II, and IIIA, the *DSW RC* recommends field testing and measured application of the DSW core competency set as Phase IIIB.

In addition, the *DSW RC* proposes to provide technical assistance and support to individual LTSS sector stakeholders to identify or develop sector-specific competencies that complement the core set. This guidance will be critical to ensuring the core competencies are embedded in more specialized DSW career pathways and career lattices. It will be important to build on the core competency set to fulfill the vision of effective career lattices, curriculums, and workforce development tools.

Finally, the *DSW RC* will work with *CMS* and other federal partners to establish the core competency set in the public domain, provide guidance for how it aligns with existing training and certification programs, and provide technical assistance to states across agencies and sectors to promote and pilot the development of uniform training policy, common training programs, basic curricula for all entry level HCBS workers, and specializations within each sector. Thus, the core competency set would be applied as a valuable asset in direct service training and practice. Through these coordinated efforts of validating and operationalizing the core competency set, a more competent, stable workforce will emerge to meet the growing demand of community-based LTSS.

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## Appendix A: Core Competencies for the Direct Service Workforce Version 3.0

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### Preamble

April 3, 2013

### Background

This set of ***Core Competencies for the Direct Service Workforce*** has been developed in support of the Federal interagency *Community Living Initiative*. This initiative was created by the Department of Health and Human Services in 2009 to develop and implement innovative strategies that increase opportunities for U.S. Americans with disabilities and older adults to enjoy meaningful community living. The *Centers for Medicaid & Medicare Services (CMS)* funded the ***Road Map of Core Competencies for the Direct Service Workforce***, a multi-phased research project implemented through the *National Direct Service Workforce Resource Center (DSW RC)* to identify a common set of core competencies across community-based long-term services and supports (LTSS) sectors: aging, behavioral health (including mental health and substance use), intellectual and developmental disabilities, and physical disabilities. This research project assists states to take a more comprehensive and standardized approach to direct service workforce training and workforce quality improvement through the creation of a nationally validated core competency set.

This project supports the *CMS* goal to achieve a coordinated, inclusive, and person-driven system in which people with disabilities and chronic conditions have choice, control and access to a full array of quality services that assure optimal outcomes, such as independence, health and quality of life. It is necessary to develop a highly competent workforce prepared to carry out this mission. A highly competent direct service workforce is critical to the wellbeing and safety of individuals who need support to live in the community. The achievement of optimal outcomes among service participants is dependent on the delivery of quality direct services and supports.

### Purpose

The core competency set is designed to inform direct support service delivery and promote best practices in community-based LTSS. These competencies have relevance to the work of both tenured and new direct service workers and serve as a resource in developing worker training, and performance improvement practices for the community-based LTSS direct service workforce across LTSS sectors. Moreover, the core competency set is intended to serve as the foundation for career lattices and ladders that further recognize the many competencies needed for direct service workers across service sectors. The core competency set is not intended to impose requirements for community-based LTSS direct service workers upon entry to the workforce. Rather, they provide guidance for the development of initial and ongoing training to promote direct service workers' continuing competency development.

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The core competency set may be customized in practice to reflect the needs of individuals in need of services and organizations that provide the services. Performance indicators may be developed from the core competencies; these would provide a greater degree of specificity in describing direct service skills and further facilitate activities of best practice within each competency area. Effective direct service workforce tools and activities, such as performance evaluation tools and recruitment, hiring, and selection activities, can be developed based on the set. These efforts in operationalizing the core competency set will lead to improved quality of training to direct service workers, improved quality of service provision and, ultimately, improved quality of life for participants. Further specialized competencies may be developed to inform specific LTSS sectors and delivery models. Through sustained efforts, a more competent, stable community-based LTSS direct service workforce will be developed to meet the growing demand conditions within community-based LTSS.

### Research Methodology

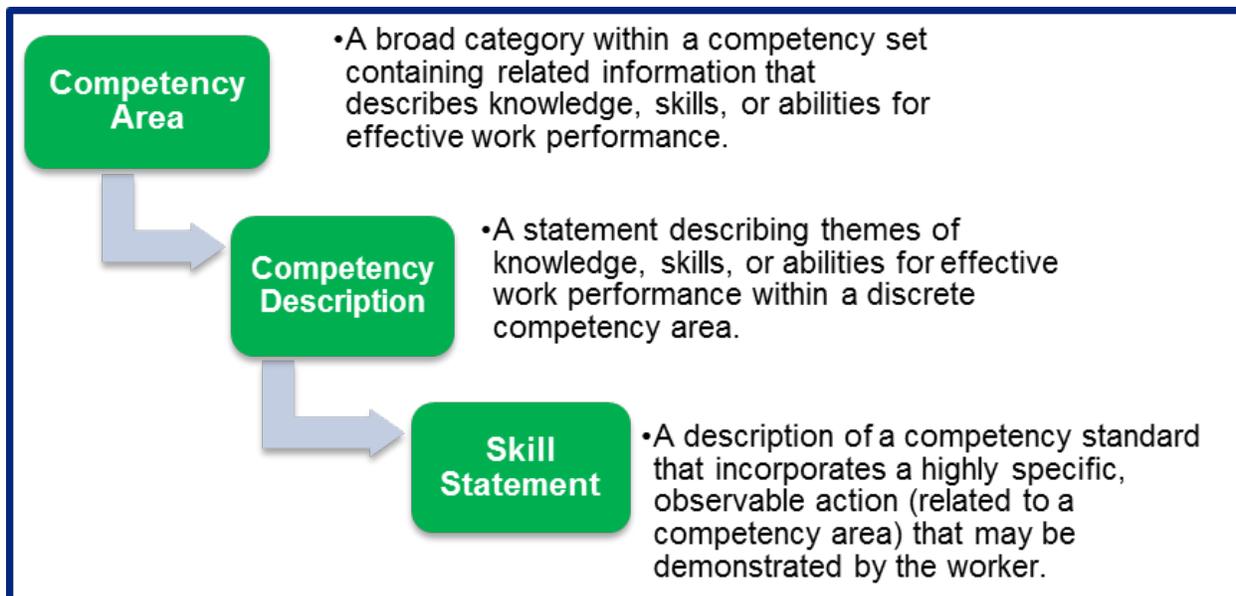
The core competency set has been developed through a multi-phased research study implemented through the *DSW RC*. A large sample of workforce stakeholders, including state and provider representatives from different sectors, and competency development experts, participated in this study through a modified Delphi process.

The initial draft of potential core competencies was drawn from a content analysis of existing competency sets across LTSS sectors, which was conducted during project phase II, and resultant of a comprehensive inventory and review of relevant initiatives from phase I. During project Phase IIIA, stakeholders across sectors were identified by partners of the DSW Resource Center and invited to participate in the modified Delphi study. Stakeholders completed multiple surveys and participated in facilitated dialogue through this process. Quantitative and qualitative data was collected to inform the ongoing development of this core competency set. Specific steps were as follows:

**Table 1: Phase IIIA Modified Delphi Study Process**

Stage	Description of Activities
<b>1: Initial Survey</b>	Stakeholders participated in an online survey where they provided extensive feedback on the initial draft of core competencies and identified which statements were core within their LTSS sectors.
<b>2: Stakeholder Summit</b>	Data collected in the initial survey was analyzed and results were presented to the stakeholder group during a <i>Summit on Core Competencies for the Direct Service Workforce</i> held September 10, 2012 in Arlington, Virginia. During the Summit, stakeholders were engaged in a facilitated discussion from which further feedback was gathered and used to revise the draft set of core competencies.
<b>3: Final Survey</b>	Stakeholders participated in a final review of the draft set of core competencies via an online survey to determine the level of agreement achieved on the revised content. The findings are summarized in the current report on this phase of the project.

**Figure 6. Competency and Skill Statement Logic Model**



**Table 2: Summary of DSW Core Competency Set, Based on Phase IIIA Results**

Finalized Core Competency Areas (Version 3.0)	Number of Skill Statements
1. Communication	4
2. Facilitation of Individualized Services	9
3. Evaluation and Observation	4
4. Participant Crisis Prevention and Intervention	6
5. Safety	5
6. Professionalism and Ethics	8
7. Participant Empowerment	4
8. Advocacy	4
9. Supporting Health and Wellness	9
10. Community Living Skills and Supports	5
11. Interpersonal and Family Relationships	6
12. Community and Service Networking	4
13. Cultural Competency	5
14. Education, Training and Self-Development	4
<b>TOTAL:</b>	<b>77</b>

## Phase IIIA DSW Core Competency Set

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### Acknowledgements

The DSW Resource Center gratefully acknowledges the stakeholder organization representatives who participated in this process for their significant contribution to this research. The overall research findings were derived from the integrated feedback of all participants, and should not be interpreted as expressing the views of any individual participant or the policies of the organizations she or he represents. The DSW RC recommends building on this set of **Core Competencies for the Direct Service Workforce** and plans to conduct field-testing and further validation activities as the second part of Phase III.

### 1. Communication

*Competency Description: The DSW recognizes communication as a core function of support, and uses person first language and effective communication skills to establish a supportive and collaborative relationship with the participant and his or her family.*

#### Skill Statements:

- A. The DSW uses effective, respectful communication skills. This includes active listening, paraphrasing, and using open-ended questions to create open communication with participant.
- B. The DSW has knowledge of and uses positive communication strategies (verbal and nonverbal) that are appropriate and specific to the needs of participants.
- C. The DSW uses service terminology as needed for effective service delivery, explaining as necessary to participants and family members to ensure understanding.
- D. The DSW communicates with participants and their natural support systems in a respectful and culturally appropriate manner, using preferred language when possible, respecting cultural differences, and recognizing non-verbal communications.

### 2. Facilitation of Individualized Services

*Competency Description: The DSW provides person-centered services to support participant's preferences, strengths, interests and goals, and participates in multidisciplinary teams, with participant approval.*

#### Skill Statements:

- A. The DSW maintains collaborative professional relationships with the participant and all support team members (including family/friends, as desired by participant).

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- B. The DSW assists in the development of an individualized plan based on participant strengths, preferences, needs, and goals.
- C. The DSW implements a participant's individualized plan to achieve goals collaboratively identified with participant, based upon his or her preferences, strengths, needs, and interests.
- D. The DSW contributes as part of a multidisciplinary team, participating in team building and group processes.
- E. The DSW reviews progress towards participant outcomes, and collaborates with participant to identify alternative goals to be shared with multidisciplinary team.
- F. The DSW supports successful transitions across services, including promoting delivery of appropriate services based on the participant's strengths and needs, and facilitating transition into home and community-based settings.
- G. The DSW fosters a supportive environment, providing person-centered supports and services using a strengths-based approach to promote the participant's development of knowledge, skills, and attitudes necessary to achieve goals.
- H. The DSW collects, compiles, documents, and reviews pertinent participant information to ensure effective service provision, consistent with agency standards and in compliance with applicable administrative rules.
- I. The DSW uses documentation effectively and submits records to appropriate sources in a timely manner to promote consistent delivery of services.

### 3. Evaluation and Observation

*Competency Description: The DSW understands formal and informal assessment practices and is able to respond to the needs, desires and interests of the participants.*

#### **Skill Statements:**

- J. The DSW initiates or assists in the initiation of an assessment process by gathering information from multiple sources including formal and informal networks.
- K. The DSW can review and discuss findings from the various assessments and evaluations that inform individualized services and plans.
- L. The DSW collects data regarding the progress and achievement of goals, and regularly seeks input from the participant, and his or her family as requested, regarding satisfaction with progress towards goals to inform the plan and services.
- M. The DSW conducts observations from a culturally relevant perspective and uses results to support the independence, health and wellness of the participant.

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### 4. Participant Crisis Prevention and Intervention

*Competency Description: The DSW identifies potential risks, crisis situations, and/or behaviors, and uses appropriate procedures to de-escalate the situation and minimize potential for danger, using strategies specific to the environment and as outlined in the participant's plan.*

#### **Skill Statements:**

- A. The DSW recognizes the indicators of risks and participant crisis situations, and identifies appropriate person-centered prevention strategies.
- B. The DSW uses positive behavior support strategies to promote wellness, recovery and crisis prevention when a participant engages in potentially challenging or dangerous behavior.
- C. The DSW uses appropriate intervention strategies to defuse a crisis situation.
- D. The DSW recognizes the need for and seeks additional assistance at any point of a crisis.
- E. The DSW continues to monitor situations and effectively communicates with the participant and/or family or team members to reduce risk while complying with regulations for reporting.
- F. The DSW recognizes his or her role during conflict or crisis situations, identifies how his or her behavior affected the situation, and changes behavior to minimize potential for crisis or conflict.

### 5. Safety

*Competency Description: The DSW understands ways to support a participant to be safe and adhere to procedures necessary to maintain a safe environment, in order to reduce risks and be prepared for emergencies.*

#### **Skill Statements:**

##### *Abuse and neglect:*

- A. The DSW understands and demonstrates his/her responsibility to identify, prevent, and report abuse, exploitation, and neglect.
- B. The DSW understands types and indicators of abuse according to state law and organizational policies, including physical abuse, psychological abuse, exploitation, neglect, and improper use of physical and chemical restraints, and implements methods to prevent them.

##### *Emergency preparedness:*

- A. The DSW is prepared to maintain the participant's health and safety in the event of emergency (fire, natural disaster, terror threat, etc.), and is practiced in emergency procedures.
- B. The DSW facilitates learning and assists a participant to develop and retain safe community living skills.
- C. The DSW provides first aid and safety procedures based on the needs of the participant when responding to emergencies.

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**6. Professionalism and Ethics**

*Competency Description: The DSW demonstrates professionalism by respecting participant rights in accordance with relevant ethical standards and legal protections, and recognizes his or her own personal wellness as it relates to effective service provision.*

**Skill Statements:**

- A. The DSW is aware of his/her professional performance and compares this to ethical, legal, and professional standards to enhance performance.
- B. The DSW understands and demonstrates his/her collaborative role in relation to the participant and adheres to boundaries in various settings.
- C. The DSW demonstrates professionalism and responsibility, including timeliness, accountability, and appearance appropriate to his/her work environment.
- D. The DSW conducts all professional activities in accordance with relevant Code of Ethics (NADSP, USPRA, etc.) and applicable laws, regulations, and agency policies.
- E. The DSW understands the importance of stress reduction and uses strategies to promote personal wellness.
- F. The DSW respects and promotes the participant's right to privacy, respect, and dignity.
- G. The DSW respects the confidentiality of participant information in all verbal and written communication, as directed by the participant, and adheres to the Health Insurance Portability and Accountability Act of 1996 (HIPAA).
- H. The DSW informs the participant of his or her rights, and procedures that safeguard these rights.

**7. Participant Empowerment:**

*Competency Description: The DSW supports the participant to lead a self-determined life by providing information necessary to make informed decisions and advocate on his or her own behalf.*

**Skill Statements:**

- A. The DSW supports the participant to identify goals, make informed choices, and follow-through on responsibilities.
- B. The DSW promotes participant engagement in the design of support services, involving the participant and others at the request of the participant in the process, and inquiring about satisfaction with current services.
- C. The DSW supports the participant to advocate for oneself by increasing awareness of self-advocacy methods, providing information on peer support and self-advocacy groups, and assisting the participant to speak on his or her own behalf.

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- D. The DSW provides information about human, legal, civil rights and other resources, and supporting access to information that allows the participant make informed decisions about community living, work, and social relationships.

### 8. Advocacy

*Competency Description: The DSW understands diverse challenges facing participants (e.g., human rights, legal, administrative and financial) and is able to identify and use effective advocacy strategies to overcome such challenges.*

#### **Skill Statements:**

- A. The DSW supports the participant to identify, gather, and review information and aspects of an issue concerning the participant's rights to promote self-advocacy.
- B. The DSW has awareness of participant rights, services, and community resources, or knows where to direct the participant to learn more and secure needed supports.
- C. The DSW supports the participant to overcome barriers when his or her service needs are not being sufficiently met.
- D. The DSW identifies the barriers that sustain stigma, oppression, discrimination, and prejudice in our society and service system, and how this impacts the participant.

### 9. Supporting Health and Wellness

*Competency Description: The DSW assists the participant and supports the development of skills to maintain health and wellness in all areas of his or her life.*

#### **Skill Statements:**

- A. The DSW promotes the health and wellness of the participant in the areas of physical, spiritual, emotional, and social wellbeing.
- B. The DSW accurately administers medications, or assists participants to self-administer medications, in accordance with state regulations and agency policy and procedures.
- C. The DSW supports the participant to express his or her personal faith and observe religious or spirituality practices, as directed by the participant.
- D. The DSW promotes the participant's knowledge and skills in disease prevention and maintenance of his or her own health, including sexual health and wellbeing.
- E. The DSW demonstrates and assists the participant to apply standard infection control procedures in all activities.
- F. The DSW supports the participant in scheduling, keeping, and following through on all health appointments, as desired by the participant or according to his or her plan.

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- G. The DSW supports the participant in implementing health and medical treatments, including assisting with the use of prescribed equipment, supplies, and devices as appropriate, and as determined by the needs and desires of the participant.
- H. The DSW facilitates healthy nutrition by assisting the participant to develop or maintain knowledge and skills with meal planning, food preparation and serving, food shopping and handling, in accordance with the participant's preference and plans.
- I. The DSW recognizes and promotes participant knowledge of abnormal signs and symptoms of common diseases and conditions of body systems, and takes necessary informed action in collaboration with the participant.

### 10. Community Living Skills and Supports

*Competency Description: The DSW collaborates with the participant to identify specific supports and interventions to meet his or her unique strengths, needs, and preferences, and promote chosen and valued social roles.*

#### **Skill Statements:**

- A. The DSW assists the participant to meet his or her physical (e.g., health, grooming, toileting, eating) and personal management needs (e.g., human development, sexuality), building on participant strengths and capabilities, and providing skills training when needed.
- B. The DSW assists the participant with household management (e.g., meal preparation, laundry, cleaning) and with transportation needs, as directed by participant and his or her plan, to maximize independence, high quality of life, and community living.
- C. The DSW supports the participant in identifying, securing, and using needed equipment (e.g., adaptive equipment) and therapies (e.g., physical, occupational and communication) to promote health and safety.
- D. The DSW supports the participant in the development and/or maintenance of friendships and other relationships as chosen by the participant based on his or her interest and preference.
- E. The DSW encourages and supports the participant to develop and continue fulfillment of chosen, desired, and valued social roles.

### 11. Interpersonal and Family Relationships

*Competency Description: The DSW engages in support that recognizes, respects, and values the role of family and social relationships as an essential component of the participant's quality of life and community living.*

#### **Skill Statements:**

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- A. The DSW understands and respects the leadership role of family members in planning, guiding, and supporting services and supports with and/or for the participant, as appropriate based on the participant's experience.
- B. The DSW seeks information and builds knowledge to understand the nature and dynamics of family and social relationships within the participant's life.
- C. The DSW tailors services and supports to unique characteristics and experiences of the participant, family, and community.
- D. The DSW establishes and maintains appropriate social and physical boundaries in relation to the participant and his/her family members (and other members of his/her natural support system, including friends and those who the participant considers significant in his/her life).
- E. The DSW utilizes clear, effective, and respectful communication skills in all interactions with the participant's family members and other members of his/her natural support system.
- F. The DSW provides support that is informed by and respectful of the participant's rights to privacy and confidentiality within the home environment, community settings, and service system.

## 12. Community and Service Networking

*Competency Description: The DSW is familiar with formal and informal supports available in his or her community and skilled in assisting the participant to identify and gain access to such supports.*

### Skill Statements:

- A. The DSW assists the participant to identify his or her preferences and needs for community supports using a person-centered approach, and works with informal and formal support systems to identify and access community connections.
- B. The DSW provides coordination, support, and follow-through to promote the participant's access to available community resources as determined by, or in collaboration with the participant.
- C. The DSW assists the participant to access and participate in integrated, meaningful activities, promoting the participant's ability to live in a community of choice.
- D. The DSW promotes the use of natural supports (including family, friends, neighbors, and coworkers), within the participant's neighborhood, community, and workplace.

## 13. Cultural Competency

*Competency Description: The DSW engages in support that recognizes and values diverse worldviews and experiences and is capable of adapting supports to the unique needs of participants in a culturally competent way.*

### Skill Statements:

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- A. The DSW supports participants from diverse backgrounds by engaging in self-reflection and learning opportunities designed to increase awareness of diversity and cultural competence.
- B. The DSW recognizes his or her own personal biases, stereotypes, and prejudices and does not allow them to interfere with interactions with others.
- C. The DSW respects unique cultural needs and preferences of each participant to provide culturally competent services and supports.
- D. The DSW provides culturally relevant learning, social, and recreational opportunities for participants.
- E. The DSW provides support based on the individual characteristics of the participant and his or her family as appropriate, incorporating sensitivity to culture, religion, race, ethnicity, linguistics, disability, developmental level, age, health status, sexual orientation, and gender into daily practices and interactions.

## 14. Education, Training and Self-Development

*Competency Description: The DSW identifies and seeks opportunities for professional development, education, and training as appropriate to the participant and reflecting emerging evidence-based practices.*

### **Skill Statements:**

- A. The DSW completes required training education/certification and continues professional development.
- B. The DSW seeks feedback from multiple sources, including participants and family members as appropriate, and uses performance evaluations to improve performance.
- C. The DSW learns about and uses evidence-based skills as identified in participant's plan.
- D. The DSW learns and remains current with appropriate documentation protocols, tools, and technologies.

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## Appendix B: Comprehensive Quantitative Results of the Initial Survey

Table I: Core Ratings by Total Participants and Within LTSS Sector Groups

Competency Area (Initial Version)	Skill Statement	Percent of Respondents Rated Core: High, Medium, or Low Priority					
		Long-Term Services and Supports (LTSS) Sector					Total (N=51)
		Aging (n=23)	Behavioral Health		Intellectual and Developmental Disabilities (n=17)	Physical Disabilities (n=11)	
		Substance Use (n=10)	Mental Health (n=20)				
<b>1. Communication</b>	A	95.5	100.0	100.0	100.0	90.0	98.1
	B	100.0	100.0	100.0	94.7	100.0	98.1
	C	95.5	80.0	87.5	95.0	90.0	96.3
	D	100.0	100.0	100.0	100.0	100.0	100.0
<b>2. Facilitation of Individualized Services</b>	A	100.0	100.0	100.0	100.0	100.0	100.0
	B	84.2	90.0	98.2	84.2	80.0	88.9
	C	90.9	90.0	88.2	89.5	90.0	91.8
	D	90.5	70.0	88.2	88.9	77.8	93.7
	E	81.0	90.0	88.2	83.3	80.0	89.4
	F	73.7	70.0	88.2	75.0	55.6	84.1
	G	95.0	100.0	100.0	94.4	100.0	95.7
	H	100.0	90.0	100.0	100.0	100.0	97.9
<b>3. Assessment</b>	A	66.7	77.8	81.2	72.2	55.6	76.1
	B	44.4	75.0	73.3	58.8	33.3	61.5
	C	61.9	77.8	81.2	72.2	44.4	73.3
	D	65.0	90.0	94.1	88.2	55.6	84.1
	E	78.9	75.0	81.2	87.8	62.5	81.0
<b>4. Participant Crisis Prevention and Intervention</b>	A	95.2	100.0	100.0	100.0	100.0	97.8
	B	95.0	100.0	100.0	94.4	88.9	97.8
	C	100.0	90.0	94.1	100.0	100.0	97.9
	D	100.0	100.0	100.0	100.0	100.0	100.0
	E	100.0	100.0	100.0	100.0	100.0	100.0
	F	95.0	100.0	100.0	100.0	100.0	95.7
<b>5. Professionalism and Ethics</b>	A	100.0	100.0	100.0	100.0	100.0	100.0
	B	95.5	90.0	94.1	94.4	90.0	97.9

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Competency Area (Initial Version)	Skill Statement	Percent of Respondents Rated Core: High, Medium, or Low Priority					
		Long-Term Services and Supports (LTSS) Sector					Total (N=51)
		Aging (n=23)	Behavioral Health		Intellectual and Developmental Disabilities (n=17)	Physical Disabilities (n=11)	
		Substance Use (n=10)	Mental Health (n=20)				
	C	100.0	100.0	100.0	100.0	100.0	100.0
	D	100.0	90.0	100.0	100.0	100.0	95.7
	E	100.0	100.0	100.0	100.0	100.0	95.7
	F	100.0	100.0	100.0	100.0	100.0	100.0
	G	90.0	100.0	94.1	94.1	88.9	100.0
	H	95.0	100.0	100.0	88.9	88.9	88.9
<b>6. Participant Empowerment</b>	A	90.0	100.0	94.1	94.4	80.0	100.0
	B	85.7	100.0	100.0	89.5	80.0	100.0
	C	81.0	100.0	100.0	94.4	77.8	91.1
	D	70.0	100.0	94.1	94.4	66.7	100.0
<b>7. Advocacy</b>	A	68.4	90.0	94.1	88.2	62.5	81.4
	B	70.0	100.0	88.2	88.9	55.6	80.0
	C	81.8	90.0	88.2	89.5	80.0	87.2
	D	52.6	90.0	82.4	83.3	44.4	72.7
	E	55.0	90.0	82.4	66.7	44.4	66.7
	F	65.0	88.9	87.5	70.6	66.7	72.1
<b>8. Documentation</b>	A	100.0	100.0	100.0	100.0	100.0	100.0
	B	100.0	100.0	100.0	100.0	100.0	100.0
	C	85.7	100.0	93.3	100.0	88.9	91.1
	D	100.0	100.0	100.0	100.0	100.0	100.0
	E	100.0	100.0	100.0	94.4	100.0	97.8
<b>9. Community Living Skills and Supports</b>	A	100.0	90.0	100.0	100.0	100.0	97.9
	B	100.0	90.0	100.0	100.0	100.0	97.9
	C	76.2	80.0	94.1	94.4	66.7	87.5
	D	95.5	100.0	94.1	100.0	90.0	97.9
	E	85.0	100.0	93.7	94.1	77.8	88.6
	F	81.0	100.0	94.1	100.0	88.9	91.3
	G	86.4	90.0	87.5	94.1	80.0	93.5

Table I: Core Ratings by Total Participants and Within LTSS Sector Groups

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Competency Area (Initial Version)	Skill Statement	Percent of Respondents Rated Core: High, Medium, or Low Priority					
		Long-Term Services and Supports (LTSS) Sector					Total (N=51)
		Aging (n=23)	Behavioral Health		Intellectual and Developmental Disabilities (n=17)	Physical Disabilities (n=11)	
		Substance Use (n=10)	Mental Health (n=20)				
<b>10. Supporting Health and Wellness</b>	A*						
	B	77.3	90.0	88.2	89.5	70.0	81.2
	C	86.4	100.0	94.1	89.5	90.0	91.7
	D	95.5	100.0	100.0	100.0	100.0	97.9
	E	100.0	90.0	94.1	100.0	100.0	95.7
	F	81.8	90.0	94.1	89.5	70.0	85.4
	G	90.0	77.8	75.0	94.4	87.5	86.7
	H	100.0	100.0	100.0	100.0	100.0	100.0
	I	100.0	90.0	94.1	94.4	100.0	95.7
<b>11. Safety</b>	A	100.0	100.0	100.0	100.0	100.0	100.0
	B	100.0	100.0	100.0	100.0	100.0	100.0
	C	85.7	100.0	100.0	94.4	88.9	93.5
	D	77.3	90.0	100.0	84.2	80.0	83.0
	E	100.0	100.0	94.1	94.7	100.0	97.9
<b>12. Community and Service Networking</b>	A	90.0	100.0	94.1	94.1	87.5	91.1
	B	55.0	100.0	88.2	83.3	55.6	73.9
	C	72.7	100.0	94.1	89.5	60.0	80.9
<b>13. Cultural Competency</b>	A	81.0	100.0	94.1	88.2	88.9	83.0
	B	95.0	100.0	100.0	88.9	88.9	95.7
	C	75.0	100.0	88.2	66.7	87.8	74.5
	D	65.0	100.0	88.2	73.4	50.0	78.7
	E	94.7	100.0	100.0	94.1	88.9	97.8
<b>14. Education, Training and Self-Development</b>	A	100.0	100.0	100.0	100.0	100.0	100.0
	B	66.7	90.0	93.7	82.4	55.6	73.9
	C	89.5	100.0	100.0	94.1	87.5	93.0
	D	85.7	100.0	100.0	94.4	87.8	93.3
	E	50.0	80.0	81.2	72.2	33.3	71.1

\*Note: Denotes a skill statement that was not included in the stage 1 initial survey due to an error; however stakeholders rated this skill statement during stage 2 and 3.

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Table II: Average Percentage of Responses by Competency Areas

Competency Area (Initial Survey Version)	Average Percentage of Responses (Based on calculation of skill statement ratings within each area)						
	Response Category*	Long-Term Services and Supports (LTSS) Sector					Total (N=51)
		Aging (n=23)	Behavioral Health		Intellectual and Developmental Disabilities (n=17)	Physical Disabilities (n=11)	
		Substance Use (n=10)	Mental Health (n=20)				
<b>1. Communication</b>	C-High	80.58	87.95	78.68	76.83	80.00	77.23
	C-Med	16.03	7.05	18.20	15.50	12.50	18.10
	C-Low	1.13	0.00	0.00	5.15	2.50	2.83
	NC	2.25	5.00	3.13	2.58	5.00	1.88
<b>2. Facilitation of Individualized Services</b>	C-High	65.15	68.75	72.05	60.79	58.50	68.19
	C-Med	17.95	13.75	15.43	18.04	17.74	18.79
	C-Low	6.30	5.00	5.16	10.63	9.16	5.69
	NC	10.59	12.50	7.38	10.59	14.58	7.31
<b>3. Assessment</b>	C-High	40.32	52.28	55.74	42.22	34.42	45.60
	C-Med	12.10	17.88	25.22	27.06	9.16	19.44
	C-Low	10.98	8.94	1.34	4.60	6.66	10.18
	NC	36.62	20.88	17.80	26.16	49.72	24.80
<b>4. Participant Crisis Prevention and Intervention</b>	C-High	79.67	70.00	84.02	88.55	70.65	82.45
	C-Med	14.53	23.33	13.02	8.50	21.93	12.38
	C-Low	3.33	5.00	2.03	2.05	5.55	3.33
	NC	2.47	1.67	0.98	0.93	1.85	1.80
<b>5. Professionalism and Ethics</b>	C-High	83.59	78.75	80.79	76.24	84.04	80.74
	C-Med	9.08	12.50	12.60	15.45	5.41	12.78
	C-Low	4.89	6.25	4.43	5.49	6.53	3.76
	NC	2.44	2.50	1.48	2.83	4.03	2.73
<b>6. Participant Empowerment</b>	C-High	47.23	82.50	70.60	58.93	51.95	58.75
	C-Med	20.38	12.50	23.53	28.73	13.33	21.95
	C-Low	14.23	5.00	2.95	5.58	10.83	9.13
	NC	18.10	0.00	2.95	6.83	23.88	10.20
<b>7. Advocacy</b>	C-High	21.43	46.12	43.60	31.54	24.02	35.10
	C-Med	21.63	30.18	31.57	27.10	12.77	23.97
	C-Low	22.40	15.18	10.85	22.55	22.12	17.62
	NC	34.53	8.52	12.87	18.80	41.07	23.32

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Competency Area (Initial Survey Version)	Average Percentage of Responses (Based on calculation of skill statement ratings within each area)						
	Response Category*	Long-Term Services and Supports (LTSS) Sector					Total (N=51)
		Aging (n=23)	Behavioral Health		Intellectual and Developmental Disabilities (n=17)	Physical Disabilities (n=11)	
		Substance Use (n=10)	Mental Health (n=20)				
<b>8. Documentation</b>	C-High	84.94	85.56	79.36	75.94	80.68	83.56
	C-Med	3.72	4.22	31.57	13.10	0.00	9.88
	C-Low	8.48	10.22	10.85	9.84	17.10	4.36
	NC	2.86	0.00	1.34	1.12	2.22	2.22
<b>9. Community Living Skills and Supports</b>	C-High	68.93	76.99	74.37	81.60	72.70	74.57
	C-Med	13.50	11.59	17.01	13.53	10.47	13.44
	C-Low	6.71	4.29	3.41	2.43	3.01	5.51
	NC	10.84	7.14	5.21	2.49	13.80	6.49
<b>10. Supporting Health and Wellness</b>	C-High	77.43	64.45	58.41	78.55	76.60	72.56
	C-Med	10.50	17.78	25.26	12.75	10.59	14.81
	C-Low	3.43	10.00	8.82	3.36	2.50	4.49
	NC	8.63	7.78	7.55	5.34	10.31	8.21
<b>11. Safety</b>	C-High	81.62	74.00	76.46	87.26	85.78	80.02
	C-Med	8.22	18.00	16.48	5.30	4.00	11.50
	C-Low	2.78	6.00	5.90	2.18	4.00	3.40
	NC	7.40	2.00	1.18	5.34	6.22	5.12
<b>12. Community and Service Networking</b>	C-High	25.90	66.67	56.87	33.80	27.03	44.97
	C-Med	36.83	30.00	31.37	46.07	29.90	31.03
	C-Low	9.83	3.33	3.93	9.07	10.73	7.30
	NC	27.43	0.00	7.87	11.03	32.30	18.03
<b>13. Cultural Competency</b>	C-High	61.28	78.00	69.42	55.66	57.36	64.56
	C-Med	15.02	12.00	21.18	23.24	13.10	17.10
	C-Low	5.86	10.00	3.54	3.42	8.44	4.26
	NC	17.86	0.00	5.90	17.68	21.10	14.06
<b>14. Education, Training and Self-Development</b>	C-High	54.88	59.12	59.86	49.80	50.00	53.88
	C-Med	12.78	14.44	22.66	25.04	7.22	21.34
	C-Low	10.72	20.44	12.54	13.80	13.60	11.06
	NC	21.62	6.00	5.02	11.38	29.16	13.74

\*Note: C-High = Core: High Priority; C-Med = Core: Medium Priority; C-Low = Core: Low Priority; NC = Not Core