

State Strategies for Respite and Workforce Registries

NASHP Webinar

January 28th, 2026



NATIONAL ACADEMY
FOR STATE HEALTH POLICY



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Thank You Acknowledgements



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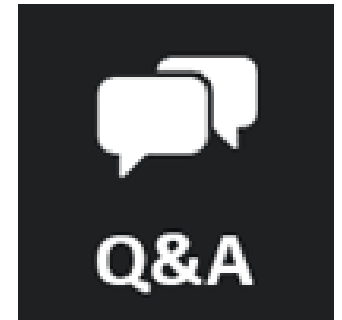
NASHP would also like to thank The John A. Hartford Foundation for providing the non-government matching funds for this project.

Speakers & Agenda

- **Welcome and Introductory Remarks**
 - *Emily Anozie, Aging Services Program Specialist, Administration for Community Living (ACL)*
- **Big Picture: NRCPT to Registry**
 - *Lisa Schneider, Executive Director, Respite Care Association of Wisconsin (RCAW)*
- **Overview of Recent Registry Research/Key Considerations for Registry Design and Use**
 - *Kezia Scales, Vice President of Research and Evaluation, PHI*
- **State Spotlight: Washington**
 - *Bea Rector, Assistant Secretary, Washington State Department of Social and Health Services*
- **State Spotlight: North Dakota**
 - *Nancy Nikolas-Maier, Director, North Dakota Health and Human Services*
- **Facilitated Q&A**

Webinar Logistics

- Use the Q&A function at the bottom of your screen to enter your questions and comments throughout the presentations
- We will address questions and comments at the end
- The close captioning button is located at the bottom of your screen
- The slides and webinar recording will be posted after the webinar on the NASHP website and sent out to all webinar registrants



nashp.org/respite-care/

Welcome and Introductory Remarks



***Emily Anozie, Aging Services Program Specialist
Administration for Community Living (ACL)***

Big Picture: NRCPT to Registry



RCAW
Respite Care Association
of Wisconsin

Presented by:
Lisa Schneider, Executive Director
lschneider@respitewi.org

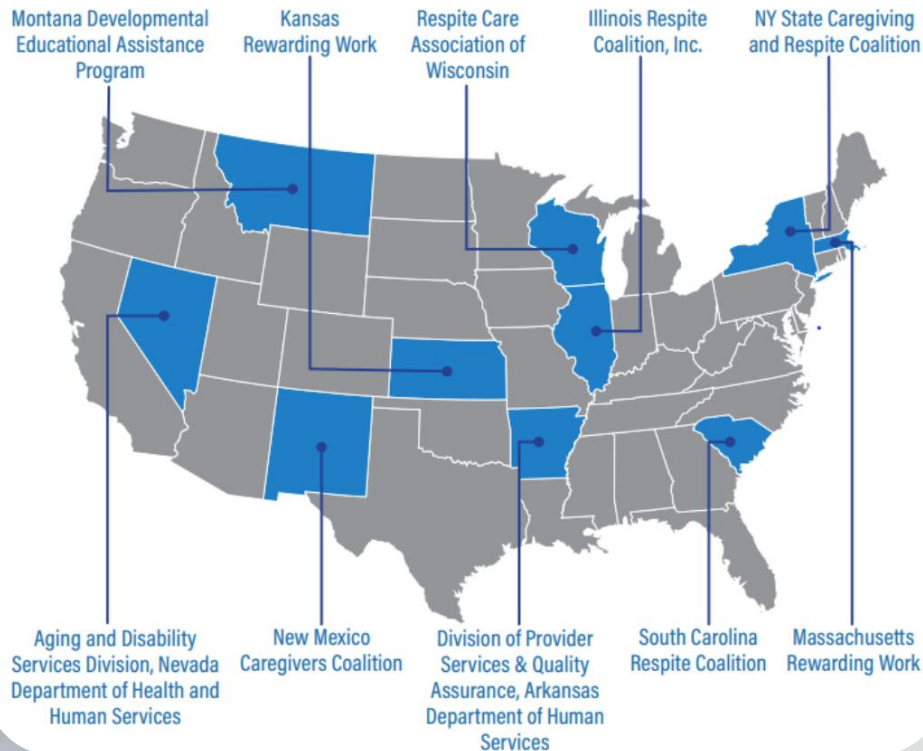
State Strategies for Respite and Workforce Registries

January 28, 2026

- National Respite Care Provider Training (NRCPT) Pilot
- Importance of registries
- WI registry as an example
- Legal considerations

The Pilot Project

PILOT SITES



Respite Provider Recruitment, Training, and Retention Project

- The National Respite Care Provider Training™ (NRCPT) Toolkit was developed through the ACL-funded Respite Provider Recruitment, Training, and Retention Pilot Project.
- The pilot project field-tested across 10 pilot sites for a one-year period.
- We documented successes and lessons learned in the NRCPT Toolkit.

One Key Lesson Learned

Importance of having a registry!

- The one-year pilot successfully engaged participants (learners), but outcomes were strongest in states with a provider registry or clear pathways to respite opportunities.
- Sites without these connections reported learner drop-off and loss of interest.
- When trained providers are directly linked to family caregivers in need, registration and completion rates increase.

Connection Tool

PROVIDERS

Search

Search by name

County

Wa... x x v

Type

In... x x v

Ages

Ch... x x v

Agency

All agenc... v

X

Wisconsin's Respite Registry

This is a FREE registry that connects those needing respite care with respite care providers. Only those who have completed the NRCPT can sign-up to be listed on the registry.

Family Caregiver can search this registry to find respite care that most closely meets their needs. Currently they can search using the following criteria:

- **County** or Tribe: 72 counties and 11 tribes
- **Type of Respite:** In-Home, Facility-Based
- **Age Group of Care Recipient:** Children, Adults, Older Adults
- **Agency** (if looking for an agency and not an individual worker)

Registry Profile

Registry Profile



Nathan Margrett

TYPE OF RESPITE

In-Home, Facility-Based

COUNTIES SERVED

Washington

AGES SERVED

Children

AVAILABILITY

Open availability

BIO

Dedicated youth development professional with a strong attention to detail and extensive cross-cultural expertise. I am deeply passionate about experiential education, data-driven program development, and the art of language acquisition.

EXPERIENCE

Early childhood education professional with a degree in child psychology and +10 years' experience working with children from birth through adolescence. Experience includes outdoor education; social skill support; ESL/EAL instruction; academic tutoring; ASD therapy & support; babysitting, nannying, household management; youth athletics; children's swim lessons; and group ECE settings. Education/ Certifications/ Licenses bachelor's degree in psychology (At-Risk Child & Youth Care); Basic Life Support and Lifeguarding certifications; TEFL certification; Level 15 - Wisconsin Registry - Tier 2 Trainer; NESTA Kid's Nutrition Specialist certification.

EMAIL

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PHONE

(262) 606-0539

Have disclaimers, acknowledgements, and terms & conditions at multiple points where end users utilize the website.

Legal Considerations

- **Informational Only:** *The registry is a community service and not a complete or verified list of providers.*
- **No Employment or Affiliation:** *Listing does not create an employer, contractor, or any formal relationship with RCAW.*
- **Hold Harmless & Indemnification:** *Providers agree to protect RCAW from any claims, costs, or damages related to use of the registry or services provided.*
- **Right to Refuse or Remove Listings:** *RCAW may deny or remove provider listings at any time, as permitted by law.*
- **No Endorsement:** *Being listed does not mean RCAW endorses a provider; not being listed does not imply lack of support.*
- **No Responsibility for Outcomes:** *RCAW is not responsible for claims, damages, or issues arising from use of the registry.*
- **No Verification/Vetting:** *Providers self-report information; RCAW does not conduct background checks or verify credentials.*
- **Acceptance of Terms Required:** *Use of the website, registry, and services means you agree to all terms and conditions—if you do not agree, you must stop using them.*

Matching Service and Respite Registries: Overview and Key Considerations

Kezia Scales, PhD, Vice President of Research & Evaluation



January 28, 2026



Introducing PHI



“Once I officially became an independent provider, I got access to resources and trainings I wish I had when I first cared for my grandfather. ... This work is rewarding in its own right, and I like being able to support individuals’ needs and help them do things they can’t do for themselves. But caring for someone as your job is a lot more demanding than people think.”

ZCHON POLON
Individual Provider
Colville, WA

Overview and Approach

What Do We Mean by “Registry”?

- Various terms: employment platforms, worker or training registries, matching service or respite registries
- Range of functions:
 - ❖ Document qualifications/credentials
 - ❖ Connect qualified workers with employers (individuals/families, agency employers)
 - ❖ Strengthen recruitment, training, retention
 - ❖ Facilitate workforce communication and data collection



DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop S2-26-12
Baltimore, Maryland 21244-1850



CMCS Informational Bulletin

DATE: December 12, 2023

FROM: Daniel Tsai
Deputy Administrator and Director
Center for Medicaid and CHIP Services

SUBJECT: Development and Maintenance of Direct Support Worker Registries: Benefits of Utilization and Enhanced Federal Funding Availability

The Center for Medicaid and CHIP Services (CMCS) is issuing this Informational Bulletin to remind states and stakeholders that the use of worker management platforms, often called registries, is an important strategy for ensuring that individuals receiving Medicaid-covered home and community-based services (HCBS) have awareness of and access to qualified workers who deliver services. Importantly, the use of these registries does not require CMCS approval.

Even before the COVID-19 public health emergency (PHE), CMCS was aware of a national shortage in the direct support workforce (DSW), and the PHE has exacerbated this crisis.¹ This Informational Bulletin is part of a series of steps CMCS is taking to maximize beneficiary access to Medicaid services they need, recognizing the critical role direct support workers have in delivering HCBS.

Background

Worker registries can serve as a critical bridge between individuals needing services, and individuals qualified and available to provide those services. Registries can be used for personal care and other HCBS, provided under traditional agency-delivered models and in self-directed delivery models. The types of workers included on a registry can vary according to state preference and can include position titles such as home worker, home care attendant, home health aide, personal care attendant, direct support worker, direct care worker, direct support professional, and others.

Use this QR code to access the Bulletin for more registry information and examples:



Background on this Research

- PHI has been tracking and cataloguing “matching service registries” for more than a decade
- In 2024, we joined the Respite Care Association of Wisconsin (RCAW) as a sub-awardee on their Lifespan Respite Special Projects grant from the Administration for Community Living (ACL)
 - Enabled us to conduct a 50-state update on matching service registries and build out our content on respite-specific registries as well



Inclusion Criteria

- Online resources that connect independent providers with consumers and family caregivers
- Registries that enable independent providers to create profiles that are searchable by geography, skills, experience, availability, etc.; may also allow consumers/family caregivers to post specific jobs
- Registries that cover a range of home care services *or* respite care only
- Registries supporting publicly funded self-direction and/or respite care programs; may also be available to agency employers and/or by private-pay consumers for recruitment purposes



Not Included in this Research

- Training registries only (e.g., federally required certified nurse aide registries)
- Registries that offer static lists of providers or that require a third-party navigator; i.e. that don't enable any degree of direct connection between workers and consumers
- Private employment platforms such as Care.com or MyCNAJobs.com

Our Approach

- Conducted desk research to identify registries and build dataset
- Outreach to identified registries: conducted 18 interviews representing 12 registries across 16 states
 - Some interviews led to exclusion of registry from the final list
- Categorized information to create detailed entries on each registry for the PHI website update
- Analyzed interview findings thematically to synthesize key considerations for a final report (in progress)

Findings and Considerations

Summary Findings

- We profiled 12 registry platforms operating in 16 states, including:
 - **Six matching service registries** in 11 states (California, Colorado, Connecticut, Kansas, Massachusetts, North Dakota, Oregon, Texas, Virginia, Washington State, Wisconsin); five with respite care option
 - **Six respite-specific registries** in six states (Illinois, Montana, Nebraska, New Mexico, New York, Wisconsin)
- Four of the registries operate across multiple states (Carina, Direct Care Careers, QuickMatch, RewardingWork)
- 11 registries are statewide; one operates regionally

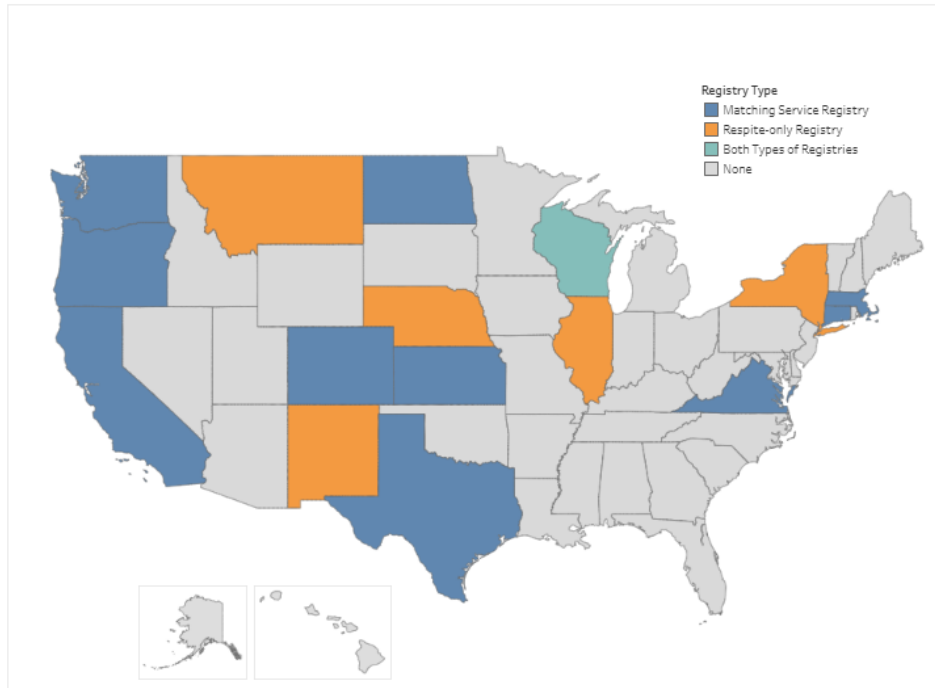
Summary Findings, cont'd.

- Six registries enable both independent providers and consumers/caregivers to create searchable posts; others allow independent providers to post searchable profiles (only)
- Four registries allow agency employers to use the registry for recruitment
- Six registries require users to register and create a profile before being able to search the registry, five are open access, and one varies by state
- Three registries require a background check
- Eight registries require users to communicate outside the registry; others allow for internal communication, or both

Matching Service Registries

We track matching service registries throughout the country, which "match" home care consumers with workers – based on needs, preferences, and availability.

MAP OVERVIEW & KEY FINDINGS KEY TERMS & LIST OF REGISTRIES



LIST OF REGISTRIES

Matching service registries are listed in alphabetical order; respite-only registries are listed separately at the end.

Name of Registry: Carina

Type: Matching service registry platform with a respite option

State(s): Oregon, Washington State

Region Covered by Registry: Statewide

Registry Users:

- Independent providers
- Self-directing Medicaid consumers
- Case managers, referral coordinators, and other staff who assist consumers in finding care

Number of Users – Oregon (as of July 2025):

- Independent providers: 8,573
- Consumers: 3,010
- Case managers, referral coordinators, and other staff: 1,142

Number of Users – Washington (as of July 2025):

- Independent providers: 28,638
- Consumers: 17,790
- Case managers, referral coordinators, and other staff: 407

Searchable Profiles/Posts: Independent providers (who are known as "individual providers" in Washington State) and consumers can create profiles/posts and search for each other.

Access: Closed – Users must register before being able to search the profiles or job postings.

Training: Independent providers can sign up for Carina prior to completing home care training but are not permitted to start working with a self-directing consumer until they have completed training and certification.

Background Check Required by the Registry?: Yes

Communication: Internal – Independent providers and consumers communicate with one another **within** the Carina platform.

Accessibility Considerations: Mobile-friendly; screen-reader compatible; text resizing available; text alternatives for non-text content; keyboard-only support; able to be translated into other languages with Google Translate or another translation service; phone support available



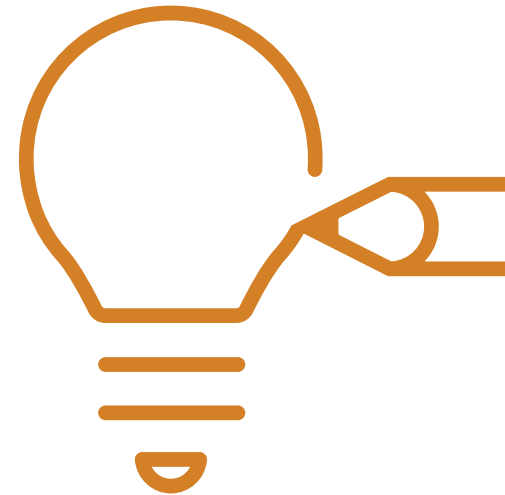
Key Considerations

- **Aims and Objectives**

- ❖ What problems does the registry aim to solve?
- ❖ What will success look like?

- **Reach**

- ❖ Who will be eligible (or required) to use the registry?
- ❖ What geography, programs, and services will be covered?



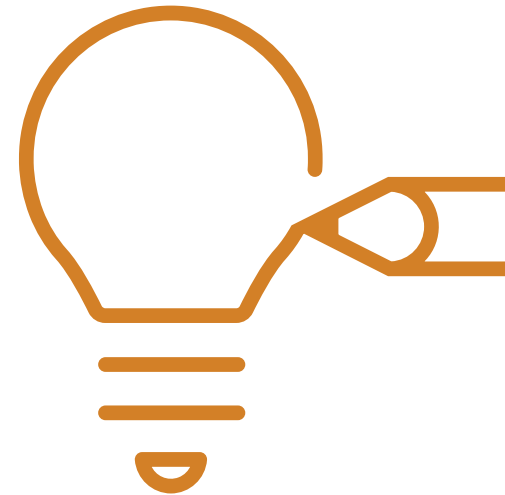
Key Considerations, cont'd.

- **Financing**

- ❖ What start-up and ongoing costs must be covered?
- ❖ Which sources of funding might be leveraged?

- **Partnerships**

- ❖ Which partners should be engaged from the outset?
- ❖ Who else should be involved over time?



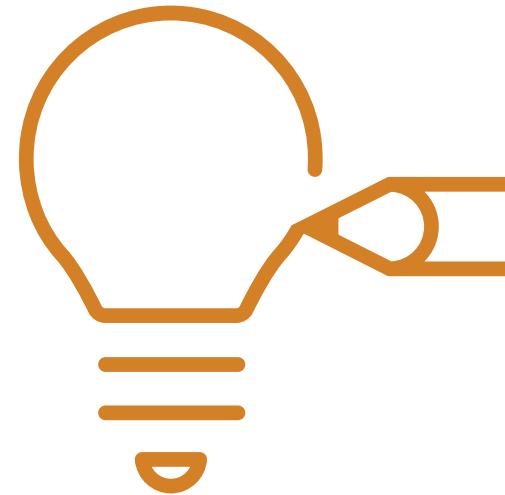
Key Considerations, cont'd.

- **Design and Development**

- ❖ How can the design best support the aims of the registry?
- ❖ How will intended users' input be incorporated?
- ❖ What priority functions and accessibility features should be built in?

- **Marketing**

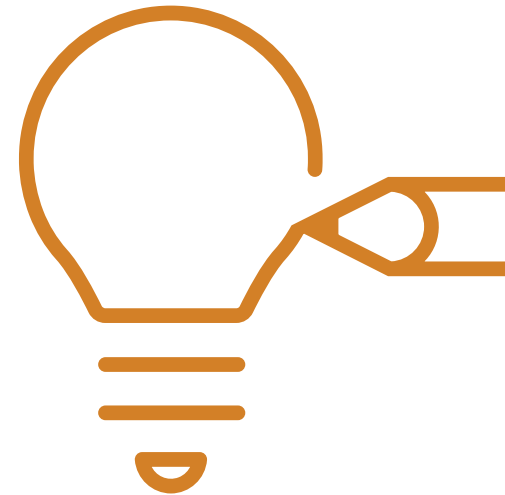
- ❖ How will the registry be promoted to different potential users?



Key Considerations, cont'd.

- **Evaluation**

- ❖ What metrics will be collected through the registry?
- ❖ How will data be tracked and reported?
- ❖ How will data be used to improve the registry over time?



MAKING THE RIGHT MATCH:

Evaluation of the Carina Matching Service
Registry in Washington State's Self-
Directed Home Care Program



Thematic Findings — Carina:

1. Attracts users for a range of reasons including choice, control, and convenience.
2. Generates strong endorsement from individual providers and consumers.
3. Promotes independent living and workforce retention.
4. Facilitates a good “fit” between consumers and individual providers.
5. Supports lasting caregiving relationships.
6. Enhances job quality for individual providers.





Kezia Scales, PhD

Vice President of Research & Evaluation

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Washington State Registry



Bea Rector, Assistant Secretary
Home and Community Living Administration

Home and Community Living Administration Services



115,000+

Seniors, adults with disabilities, children



78,000+

Direct Care Workers



72%

Family Members



Who We Serve

- Adults with developmental, physical, cognitive or other functional disabilities
- Children with developmental disabilities or in need of assistance with activities of daily living
- Older adults
- Family and kinship caregivers
- People who are deaf, deafblind or hard of hearing
- Direct care workers

Aims and Objectives of the Caregiver Registry



What Problems the Registry Helps Solve

- Self-directed caregivers need steady hours to stay in the workforce.
- Clients have a hard time finding caregivers who are nearby, available and have skills they are looking for.
- People using Medicaid, respite care, or WA Cares may wait too long for support.
- Need for substitute workers for absences due to vacation or sick time.



What Success Looks Like

- Caregivers get steady hours that fit their schedule and location.
- Clients find the caregivers that are the best fit for them.
- Clients can find substitutes.
- People using Medicaid, respite care, and WA Cares get care when they need it.
- More people stay supported in their home of choice.





Carina Registry

Carina is an **easy-to-use** website where Individual Providers can match with clients seeking in-home care.

HOW IT WORKS

STEP 1:
Caregivers and clients register.

STEP 2:
Match Users can then explore job posts and profiles and connect.

STEP 3:
Clients work with their case manager to finish the authorization and start services.





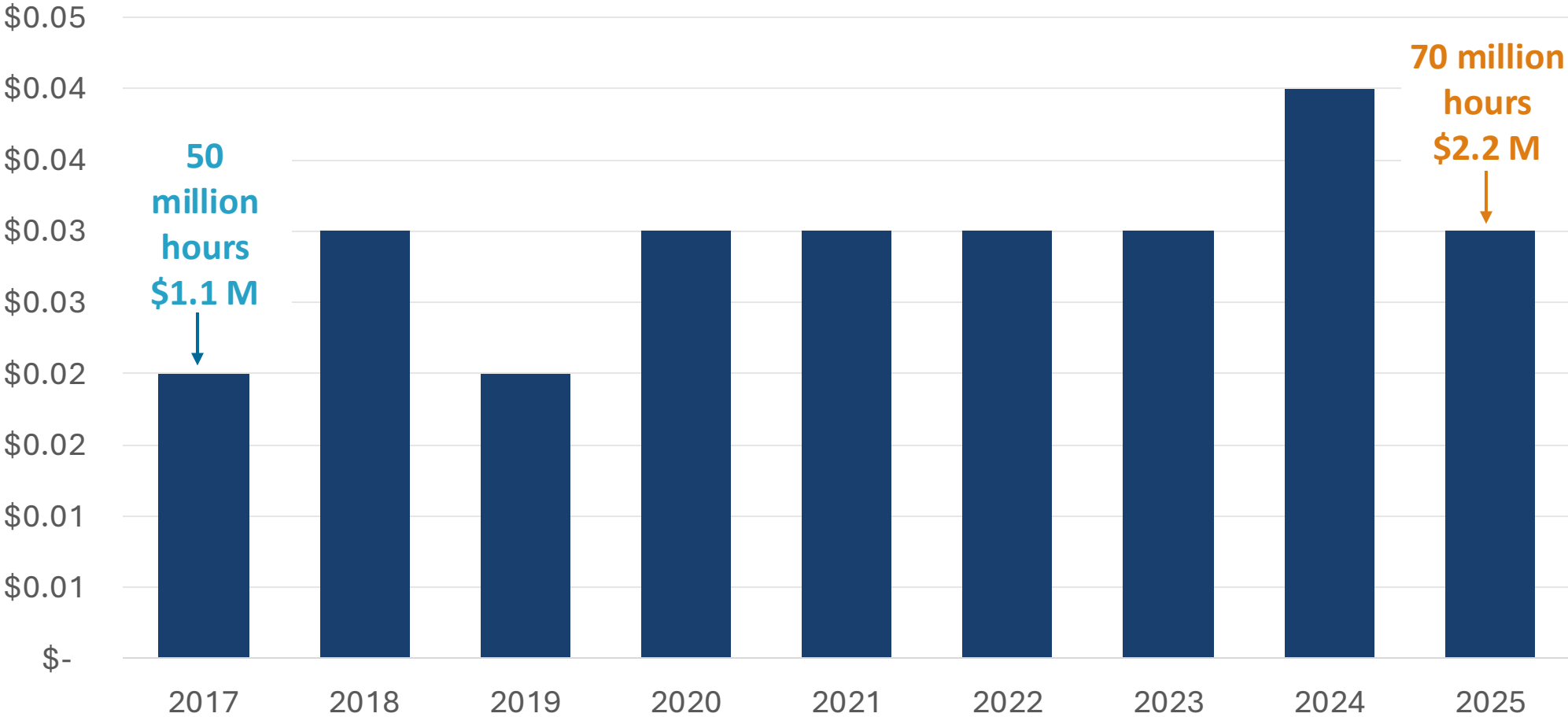
Partners

Type	Outset	Over time
State Agencies / Public Authorities	Lead agency; data access for eligibility verification; policy alignment and operational alignment	Additional state agencies (e.g. workforce); multi-state coordination; policy evaluation partners
Care Workers & Worker Representatives	Individual caregivers for early feedback loop and advisory; labor unions - policy alignment and operational alignment	Other worker advocacy organizations; training and credentialing bodies
Care Seekers & Families	Consumers and family caregivers as early users and as advisory group; user testing and co-design input	Advocacy organizations for older adults, people with disabilities, and family caregivers
Community-Based Organizations	Trusted local organizations for outreach and credibility	Expanded CBO network for outreach and feedback
Health & Social Service Providers	Referral partners (e.g., case managers, social workers)	Health systems, plans, and managed care organizations
Philanthropy		Funding to support learning and innovation
Research & Evaluation	Learning partners from the funding organization and key operational partners	Formal evaluators; longitudinal workforce and outcomes research



Funding

Cents Per Hour



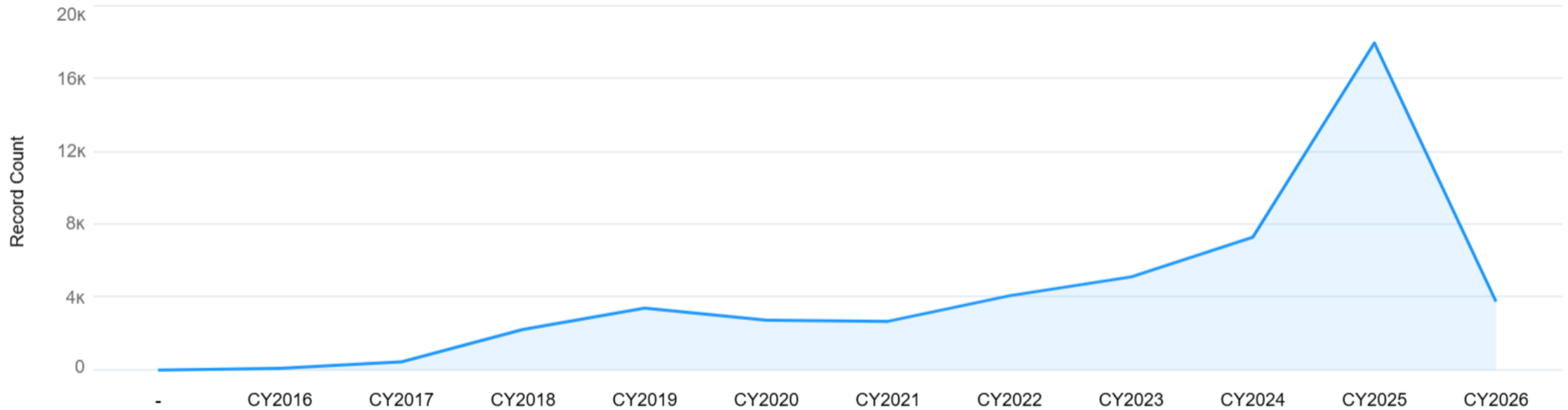
40%

of users logged in to search for care or work in 2025.

User Usage

4,000

Users logged in the first week of 2026.



49,949 Total Records





Priority Functions and Features

User Trust & Access

Security & Privacy

Profiles & Job Posts

Search & Magic Logic

Messaging

Notifications

Data Freshness

User Support & Safety

Accessibility & Inclusion

Outcome Tracking

Analytics & Reporting

Engagement & Retention





Making a Difference



18,000+

Self-Reported Matches



16M+

Hours of Care and Support



Key points for building and maintenance

- Honor the Relationship
- Engage all Partners
- Proactively Build
- Include in Broad System Changes
- Evaluate, Improve, and Educate



Thank You





Nancy Nikolas Maier, Director, North Dakota Department of Health and Human Services Adult and Aging Services Section

Administer Older Americans Act Services, Medicaid and state funded home and community-based services for older adults and adults with physical disability



Health & Human Services



Qualified Service Provider (QSP) Worker Registry

- Required by state law
- Who's Included
 - 238 agency QSPs
 - 1,326 individual QSPs
 - 32% are paid live-in family providers
- How It's Used
 - Public & Professionals
 - Case Managers
 - Aging & Disability Resource Link (ADRL)
 - Internally to manage provider records

QSP Worker Registry Design and Development

- Direct Care Careers.com
- A project of ADvancing States that offers states a customizable, enhanced platform to connect direct service workers with the clients and providers who need them. Direct Care Careers provides employers, states, and job seekers with an easy-to-use portal to manage workforce needs.
- ND uses the site to host the QSP Worker Registry

North Dakota

The North Dakota Department of Health and Human Services (HHS) administers state and federally funded home and community-based services (HCBS) to eligible older adults and individuals with physical disability so they can remain in their home and community. Services are provided by agency and individual qualified service providers (QSP) who meet the competency requirements necessary to provide various services. North Dakota uses this site as a QSP registry and to help QSPs access training. QSPs can also use this site to market their services and be linked with individuals who may be interested in employment as a direct support professional.

Search Worker's Registry



QSP Worker Registry Design and Development

QSP And QSP Agencies Public Registry

Provider's Name


Individual or Agency Name

City or Zip Code


Distance Within

10 miles 

State

Nothing selected 

Counties

Nothing selected 

Type of services operator

Search for QSP that list any services I select below 

Provider Type

- Any - 


Type of Services Needed

Adult Day Care

Adult Foster Care

Adult Residential Service

Case Management - Assessment

 Chat with us

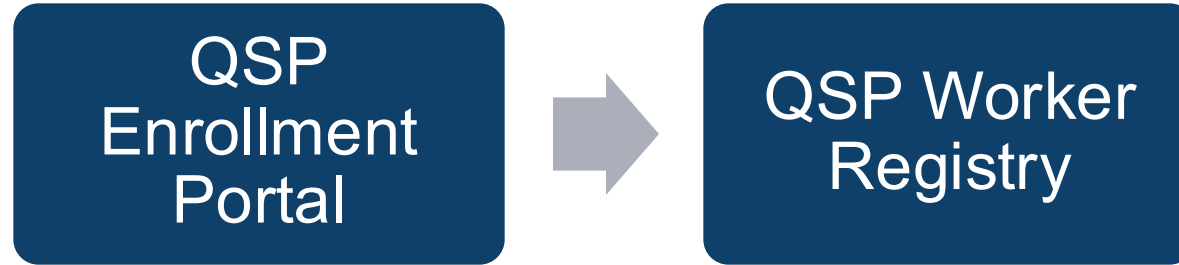


Search

Reset

Browse All QSPs or QSP Agencies

QSP Registry Design and Development



- **Key Features**

- Integrated with the provider enrollment portal
- Real-time data updates
- Print friendly search results
- Automated nightly data exchange keeps both systems aligned
- Provider updates in the QSP enrollment portal automatically populate the QSP Worker Registry
- Providers decide whether their information appears on the public registry



QSP Worker Registry Financing

QSP Enrollment Portal funded with Section 9817 American Rescue Plan funds

Direct Care Careers – ND Connect to Care was funded with Money Follows the Person (MFP) Capacity dollars

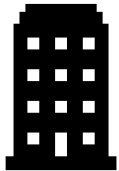
Using MFP Rebalancing funds for ongoing maintenance and operation fees for both systems

December 12, 2023, CMCS Informational Bulletin – Development and Maintenance of Direct Support Worker Registries: Benefits of Utilization and Enhanced Federal Funding Availability

QSP Worker Registry Outcomes



- Improves access to care – Individuals, families and professionals can quickly find available providers
- Supports informed choice – people can compare providers based on services, location etc.
- Increases transparency about which providers are enrolled in the Medicaid system



- Reduces administrative burden by automating updates which keeps information up to date
- Provides better visibility into provider capacity, geographic capacity, and service gaps
- Promotes provider accountability to keep their information up to date



Questions?

Submit in the Q&A box at the bottom of your screen.

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