

Connecticut Aging Services Workforce Profile

Workforce Development, Regulatory, Funding, and Legislative Systems Affecting the Direct Care and Aging Services Workforce

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1. Workforce Development System

Connecticut's workforce system runs on two tracks: a statewide strategy/policy layer (Governor's Workforce Council and the Office of Workforce Strategy) and five regional Workforce Development Boards (WDBs) that operate the American Job Center network and administer WIOA-funded services locally.

1.1 State Workforce Agency and Board Structure

Entity	Role	Key Details
Governor's Workforce Council (GWC)	Connecticut's federally recognized State Workforce Development Board	55 members spanning industry, government, K-12, higher education, unions, and community-based organizations. Chaired by Ryan Drajewicz (Bridgewater Associates); Vice Chair Kelli-Marie Vallieres, the state's Chief Workforce Officer. Meets quarterly; operates six subcommittees: Systems Alignment, Expand Access, Data and Accountability, Industry Leadership, Education and Career Pathways, and Sector Training. Sets statewide Pre-K-through-retirement workforce strategy and policy.
Office of Workforce Strategy (OWS)	Executive-branch coordinating agency; staffs the GWC	Created in 2020 and housed administratively within the Office of the Governor. Led by Chief Workforce Officer Kelli-Marie Vallieres. Coordinates sister agencies, K-12, higher education, and workforce boards; manages the state's WIOA Combined State Plan (2024-2027) and discretionary initiatives such as CT Health Horizons, Career ConneCT, and the Good Jobs Challenge.
Connecticut Department of Labor (CTDOL)	WIOA administrative/fiscal agent; labor market information; Apprenticeship office	Commissioner Danté Bartolomeo. Administers WIOA Title I formula funds passed to the five regional WDBs, operates the American Job Center network, registers apprenticeship programs, and produces labor market data used for CTE/Perkins and workforce planning.
CT State Department of Education (CSDE)	Administers Perkins V career and technical education funds; adult education	Sets the state's CTE career-cluster priorities (12 of 16 national clusters, including Health Science) and administers Perkins V formula funds to secondary CTE and community college partners.

Note: OWS's Chief Workforce Officer position functions as the state's de facto workforce cabinet lead, coordinating across CTDOL, CSDE, the community college system (CSCU/CT State), the Department of Social Services, and the Department of Aging and Disability Services.

1.2 Local Workforce Development Areas and Boards

Connecticut is divided into five Local Workforce Development Areas (LWDAs), each governed by a regional Workforce Development Board that contracts service delivery through the state's American Job Center (AJC) system — 20 centers statewide (6 comprehensive, 14 affiliate).

Region	Board	Headquarters	Notes
North Central	Capital Workforce Partners	Hartford	Serves Hartford and surrounding towns; largest urban WDB; active in Regional Sector Partnerships (e.g., Capital Area Tech Partnership).
South Central	Workforce Alliance	New Haven	Serves the New Haven region; partners closely with Gateway Community College (CT State) health science pathways.
Eastern	Eastern CT Workforce Investment Board (EWIB)	Franklin	Covers the largely rural/coastal eastern region; convenes the statewide Connecticut Workforce Development Council with the other four boards.
Northwest	Northwest Regional Workforce Investment Board (NRWIB)	Waterbury	Serves Litchfield and northern New Haven County towns.
Southwest	The WorkPlace, Inc.	Bridgeport	Serves Fairfield County; runs numerous sector-based and reentry workforce initiatives.

The five boards jointly form the Connecticut Workforce Development Council and coordinate regional employment priorities with CTDOL, community colleges, CTE/vocational-technical schools, and community-based organizations — the natural entry point for aging-services employers seeking WIOA-funded recruitment, on-the-job training (OJT), or incumbent-worker training funds.

1.3 Community College and Apprenticeship Partners

Partner	Role in Aging Services Workforce
CT State Community College (CSCU system, 12 unified campuses)	Primary public pipeline for CNAs, LPNs, and RNs. Offers a Certified Nurse Aide (CNA) program and a registered CNA Apprenticeship ("NUR* 0503 1199"), a Personal Care Aide (PCA) certificate for home-care work, and Associate Degree Nursing (ADN/RN) programs across campuses, several with dedicated long-term-care clinical rotations.
Registered Apprenticeship (CTDOL Office of Apprenticeship Training)	Registers and oversees CNA, PCA, and other healthcare apprenticeships combining paid on-the-job training with related classroom instruction; employer of record can be a nursing home, home care agency, or the college itself.
Goodwin University, Sacred Heart University, Southern CT State University, University of Bridgeport, UConn, and other CCIC/CSCU partners	Expanded nursing and social-work faculty capacity and tuition support through the CT Health Horizons initiative (see Section 3).
Hartford HealthCare / ReadyCT and district high schools (Hartford, East Hartford, New Britain, Norwich)	Youth Health Professions Initiative (YHPI) — dual-enrollment pathway letting high schoolers earn CNA/EMT credentials pre-graduation, often in partnership with community college CTE articulation agreements.
Regional vocational-technical high schools (CT Technical Education and Career System)	Offer Perkins-funded Health Science career pathways that can feed directly into CNA certification and long-term-care employment.

1.4 Healthcare and Rural Workforce Initiatives

Initiative	Lead Agency/Partners	Focus & Scale
Rural Health Transformation Program (RHTP)	Department of Social Services (lead), DPH, AHEC/UConn Health, community organizations	Multi-year CMS grant program organized around four pillars — population health outcomes, workforce, data/technology, and care transformation. Workforce projects include an Area Health Education Center (AHEC)/UConn Health rural health-workforce pipeline, mobile primary care and dental clinics, and community health navigators serving rural Connecticut towns.
CT Health Horizons	CSCU/CT State, OWS, UConn, Connecticut Conference of Independent Colleges (CCIC), Connecticut Hospital Association	A (originally \$35M, ARPA-funded) initiative expanding nursing and social-work faculty capacity and student tuition support across 30+ public and private colleges to relieve the statewide nursing/behavioral-health shortage; OWS Annual Report (Oct. 2025) notes this funding stream has expired and is a candidate for renewal advocacy.
Career ConneCT	OWS	\$70M for skills training and wraparound supports (childcare, transportation, housing) across ~19 sector-based training programs statewide; funding noted as expiring in 2026.
Good Jobs Challenge	OWS (EDA-funded)	\$24M in federal Economic Development Administration funds to train 2,000 residents in areas with limited access to workforce programs; expiring 2026.
Area Health Education Center (AHEC) / UConn Health partnerships	UConn Health, UConn School of Medicine	Long-running pipeline programs (Urban Service Track, AHEC Scholars, High School Student Research Apprentice Program) building interest in health careers, including geriatrics and primary care, among Connecticut youth.

2. Regulatory System — CNA and Direct Care Workforce Oversight

2.1 CNA Regulatory Structure, Registry, and Training Requirements

Element	Requirement / Detail
Oversight agency	Connecticut Department of Public Health (DPH), acting under the federal Omnibus Budget Reconciliation Act of 1987 (OBRA '87), which requires states to run Nurse Aide Training and Competency Evaluation Programs and maintain a Nurse Aide Registry.
Legal basis	Connecticut Public Health Code § 19-13-D8t requires DPH to approve, deny, or suspend all nurse aide training programs in the state.
Nurse Aide Registry administration	DPH contracts with Prometric to manage applications, administer the competency exam, and maintain the official Connecticut Nurse Aide Registry (which also lists individuals found to have abused, neglected, or misappropriated the property of residents).
Training program length	Minimum 100 hours (75 hours core classroom instruction plus supervised clinical practice), coordinated by an RN with at least two years of nursing experience, at least one year of which must be in a chronic/convalescent nursing home or rest home.
Training program approval	Programs are DPH-approved for renewable two-year terms; sponsors (nursing homes, hospitals, vo-tech schools, community colleges, adult education programs, rehab centers) must report changes and undergo on-site DPH observation.

Element	Requirement / Detail
Competency exam	Written and practical exam administered by Prometric (\$118 fee); candidates have 24 months from training completion to test and be placed on the Registry.
Certification renewal	No renewal fee; renewal is based on employer-verified proof of at least one paid 8-hour direct-care shift within the prior 24 months rather than continuing education hours. Lapses beyond 24 months generally require retraining/retesting.
Reciprocity	CNAs certified in another state may apply to DPH for reciprocal Connecticut certification without repeating training, subject to verification.

Contact: Connecticut Nurse Aide Registry Program, Department of Public Health, 410 Capitol Avenue, MS#12MQA, Hartford, CT 06134-0308 · (860) 509-7603, option 1.

2.2 Other Occupational and Facility Oversight Relevant to Aging Services

Agency / Board	Scope
DPH — Facility Licensing & Investigations, Health Care Quality Branch	Licenses and surveys nursing homes (chronic and convalescent care facilities), residential care homes (RCH/assisted living-type licensure), and home health/home care agencies; investigates complaints.
DPH — Practitioner Licensing & Investigations	Licenses RNs, LPNs, and other health professions (via the CT Board of Examiners for Nursing) and certifies nurse aides; handles professional discipline.
Department of Social Services (DSS)	Sets Medicaid provider participation requirements, nursing-facility rate/reimbursement policy, and Medicaid managed long-term-services-and-supports rules that indirectly drive staffing requirements and wages.
Department of Aging and Disability Services (ADS)	State Unit on Aging; Long-Term Care Ombudsman Program (facility resident-rights oversight and volunteer advocate training); oversight of Area Agencies on Aging contracts.
Office of Health Strategy (OHS)	Certificate of Need review for facility changes; statewide health care cost/quality data used in workforce and access planning.

3. Funding System — Pathways Relevant to the Direct Care and Aging Services Workforce

Funding Stream	Administering Agency	Relevance to Aging Services Workforce
WIOA Title I (Adult, Dislocated Worker, Youth formula funds)	U.S. DOL → CTDOL → 5 regional WDBs	Funds occupational skills training, on-the-job training, incumbent-worker training, and supportive services through American Job Centers; CNA/home health aide training is an eligible WIOA-funded occupation in most local plans.
Registered Apprenticeship	CTDOL Office of Apprenticeship Training	CNA and PCA apprenticeships (e.g., CT State's NUR* 0503 1199 program) combine paid on-the-job hours with related instruction; providers can register as apprenticeship sponsors.

Funding Stream	Administering Agency	Relevance to Aging Services Workforce
Adult Education	CSDE, delivered through local/regional Adult Education programs	English-language, HSE/high-school-diploma, and integrated education-and-training (IET) programs often feed directly into CNA and health-career certificate pipelines, particularly for immigrant and refugee direct-care workers.
Vocational Rehabilitation	Bureau of Rehabilitation Services (BRS), within ADS	Provides individualized employment services, job coaching, and training funding for Connecticut residents with disabilities pursuing direct-care and other healthcare careers; a potential co-funding source for CNA training alongside WIOA.
Perkins V (Carl D. Perkins Career and Technical Education Act)	CSDE, formula funds to CT State community colleges and CTE/vo-tech high schools	Funds Health Science career-cluster programs of study — one of the 12 CT Perkins-priority clusters — supporting CNA and allied-health CTE pathways and College Career Pathways (CCP) dual enrollment.
Medicaid workforce-related programs	Department of Social Services (DSS)	Nursing-facility and home-care Medicaid rates fund direct-care wages; DSS administers the Personal Care Assistance (PCA) waiver and the CT Home Care Program for Elders (CHCPE)
Older Americans Act (OAA)	ADS Bureau of Aging (State Unit on Aging) → 5 Area Agencies on Aging (AAAs)	Funds senior community employment, in-home services, congregate/home-delivered meals, and (via Title V) subsidized employment/training for low-income older workers — including some direct-care and aging-network roles.
State discretionary workforce initiatives (non-recurring)	OWS with CSCU, DSS, DPH partners	CT Health Horizons (nursing/social-work faculty and tuition support), Career ConneCT (sector training + wraparound supports), Good Jobs Challenge (EDA-funded training for underserved areas), and the CMS-funded Rural Health Transformation Program (workforce pipeline component) — see Section 1.4 for detail.

Most of these funding streams can be layered: a nursing home or home care agency can combine a CTDOLE-registered CNA apprenticeship, WIOA on-the-job-training reimbursement, Perkins-funded high school dual enrollment, and Medicaid rate-driven wage support for the same cohort of new hires.

4. Legislative System

4.1 Connecticut General Assembly Committees with Workforce/Aging-Services Jurisdiction

Committee	Jurisdiction Relevant to Aging Services Workforce
Aging Committee	Cognizance over all matters relating to senior citizens; the primary forum for aging-network and long-term-care policy bills, including workforce-related nursing home legislation.
Public Health Committee	Cognizance over DPH, the Department of Mental Health and Addiction Services, the Department of Developmental Services, and the Office of Health Care Access; covers nursing home licensing, all DPH licensing boards (including the nurse aide registry framework), and healthcare workforce regulation generally.
Human Services Committee	Cognizance over DSS programs, including Medicaid long-term-services-and-supports policy, the PCA waiver, and CHCPE — frequent venue for nursing-home staffing-ratio and reimbursement bills.

Committee	Jurisdiction Relevant to Aging Services Workforce
Labor and Public Employees Committee	Cognizance over CTDOL, workers' compensation, conditions of employment, industrial/occupational safety, and public-sector collective bargaining — relevant to PCA Workforce Council agreements and direct-care labor standards.
Higher Education and Employment Advancement Committee	Oversees CSCU/CT State Community College, adult education, and workforce-training policy intersecting with CNA/nursing pipeline programs.
Appropriations Committee	Controls state funding levels for ADS, DSS, DPH, CTDOL, OWS, and discretionary workforce initiatives (e.g., CT Health Horizons renewal, Career ConneCT continuation).

4.2 Executive Branch Agencies Shaping Workforce, Healthcare Workforce, and Occupational Regulation

Agency	Current Leadership	Relevant Function
Office of Workforce Strategy (OWS)	Kelli-Marie Vallieres, Chief Workforce Officer	Statewide workforce strategy; staffs the Governor's Workforce Council; manages discretionary workforce grant programs.
Connecticut Department of Labor (CTDOL)	Commissioner Danté Bartolomeo	WIOA administration, apprenticeship registration, labor market information, wage/hour and workplace-safety enforcement.
Department of Public Health (DPH)	Commissioner Manisha Juthani, MD	Nurse aide registry and training-program approval; nursing home and home health agency licensing; RN/LPN licensing via the Board of Examiners for Nursing.
Department of Social Services (DSS)	Commissioner Andrea Barton Reeves	Medicaid policy and reimbursement (including nursing-facility and home-care rates); PCA waiver; lead agency for the Rural Health Transformation Program.
Department of Aging and Disability Services (ADS)	Commissioner Amy Porter	State Unit on Aging (Bureau of Aging); Older Americans Act administration; Bureau of Rehabilitation Services (vocational rehabilitation); Long-Term Care Ombudsman Program; oversight of the five Area Agencies on Aging.
Office of Health Strategy (OHS)	Deidre Gifford, MD, Commissioner (also Senior Advisor to the Governor for Health and Human Services)	Certificate of Need, health system cost/quality data, and cross-agency health and human services coordination.
CT State Department of Education (CSDE)	State Board of Education / Commissioner	Perkins V administration; K-12 CTE Health Science pathway standards; adult education oversight.

5. Specific Opportunities by Provider Type

Provider Type	Workforce Opportunities to Pursue
Nursing homes / skilled nursing facilities	Register as a CNA apprenticeship sponsor through CTDOL, layering WIOA on-the-job-training reimbursement.

Provider Type	Workforce Opportunities to Pursue
	Host a DPH-approved, no-fee, facility-based CNA training program (common model; may include a work-back agreement). Partner with local high schools/CTE programs on Perkins-funded Health Science dual enrollment (YHPI-style pipelines). Engage LeadingAge Connecticut & Rhode Island and the Connecticut Association of Health Care Facilities (CAHCF/CCAL) on Medicaid rate and staffing-ratio advocacy tied to workforce capacity.
Assisted living / residential care homes (RCH)	Access CT State Community College CNA and Personal Care Aide certificate graduates; RCH staff are not subject to the federal OBRA nurse aide mandate but many operators voluntarily use DPH-approved curricula. Use regional WDB (Capital Workforce Partners, Workforce Alliance, EWIB, NRWIB, The WorkPlace) incumbent-worker training funds for medication-aide(RCH Only) and dementia-care upskilling.
Home care agencies / home health agencies	Tap the DSS Personal Care Assistance (PCA) waiver and CT Home Care Program for Elders (CHCPE) as funding sources tied to direct-care wages. Pursue Rural Health Transformation Program workforce-pipeline funding (AHEC/UConn Health partnership, community health navigator roles) for agencies serving rural service areas.
Area Agencies on Aging (AAAs) and the broader aging network	Access Older Americans Act Title V senior community employment funding and ADS Bureau of Aging technical assistance. Participate in AgingCT, the five AAAs' shared no-wrong-door referral network, to connect job seekers and caregivers to services. Draw on CHOICES counselor training funded jointly through Older Americans Act and Medicare Improvements for Patients and Providers Act (MIPPA) funds.
Hospitals, health systems, and higher-education partners	Pursue CT Health Horizons-style faculty-expansion and tuition-support funding (subject to renewal) to grow nursing/social-work pipelines feeding post-acute and aging-services settings. Engage AHEC/UConn Health pipeline programs to build early interest in geriatric and long-term-care careers.

6. Key Decision-Makers and Stakeholders

Name / Entity	Role	Relevance to Direct Care Workforce
Gov. Ned Lamont	Governor	Appoints agency commissioners and GWC leadership; sets budget priorities for workforce initiatives.
Kelli-Marie Vallieres	Chief Workforce Officer; Vice Chair, GWC; Director, OWS	Central coordinator of cross-agency workforce strategy, including healthcare/direct-care pipeline initiatives.
Ryan Drajewicz	Chair, Governor's Workforce Council	Sets GWC policy priorities and convenes industry/education/labor stakeholders.
Danté Bartolomeo	Commissioner, CTDOL	Oversees WIOA funding flow to regional WDBs and apprenticeship registration.
Manisha Juthani, MD	Commissioner, DPH	Oversees nurse aide registry, training-program approval, and nursing home/home health licensing.

Name / Entity	Role	Relevance to Direct Care Workforce
Andrea Barton Reeves	Commissioner, DSS	Sets Medicaid reimbursement policy affecting direct-care wages; leads Rural Health Transformation Program.
Amy Porter	Commissioner, ADS	Oversees State Unit on Aging, Bureau of Rehabilitation Services, and the Long-Term Care Ombudsman Program.
Deidre Gifford, MD	Commissioner, OHS; Senior Advisor to the Governor for Health & Human Services	Coordinates the state's nine health and human services agencies on cross-cutting workforce and access issues.
Five Regional WDB Presidents/CEOs (Capital Workforce Partners, Workforce Alliance, EWIB, NRWIB, The WorkPlace)	Local workforce system operators	Control WIOA-funded training slots, on-the-job-training agreements, and sector partnerships relevant to direct-care employers in each region.
Mag Morelli	President, LeadingAge Connecticut & Rhode Island	Leading nonprofit aging-services advocacy voice on workforce shortage, Medicaid/Medicare reimbursement, and staffing-ratio policy.
Matthew Barrett	President/CEO, Connecticut Association of Health Care Facilities (CAHCF) / Connecticut Center for Assisted Living (CCAL)	Leading proprietary long-term-care advocacy voice on staffing, reimbursement, and regulatory issues.
SEIU District 1199 New England (1199NE)	Union representing PCAs, nursing home, and other direct-care workers	Collectively bargains PCA wages/benefits with the state via the Governor's PCA Workforce Council; active voice in nursing home and home care labor-standards legislation.
Connecticut Healthcare Association Collaborative (CT Hospital Association, CT Association for Healthcare at Home, CAHCF/CCAL, CT State Medical Society, LeadingAge CT & RI)	Cross-sector provider coalition	Coordinates on care-transition and workforce policy spanning hospitals, home care/hospice, and skilled nursing.
CT State Community College / CSCU leadership	Nursing and CTE program administration	Controls CNA, PCA, and RN program capacity and clinical placement agreements with long-term-care providers.
Area Agencies on Aging (5 regional executive directors)	OAA program administration	Distribute Older Americans Act workforce-adjacent funding (senior employment, CHOICES counseling) and coordinate the AgingCT referral network.

Sources: Connecticut Office of Workforce Strategy (portal.ct.gov/ows) and its October 2025 Annual Report; Connecticut Department of Labor; Connecticut Department of Public Health (Nurse Aide Registry Program); Connecticut Department of Social Services; Department of Aging and Disability Services (Bureau of Aging); Connecticut General Assembly (cga.ct.gov) committee pages; LeadingAge Connecticut & Rhode Island; Connecticut Association of Health Care Facilities; CT State Community College catalog; CSCU CT Health Horizons program pages; and Governor's press releases. Leadership names and program funding windows reflect information available as of August 2026 and should be reverified for time-sensitive advocacy or grant-application purposes, as commissioners, committee chairs, and discretionary funding availability change.