



2026 Election Candidate Questionnaire

DC Coalition on Long Term Care Workforce Candidate Questionnaire

This questionnaire is intended to inform voters, stakeholders, and Coalition members about candidates' priorities, perspectives, and proposed actions related to the long-term care workforce and the growing needs of DC residents who rely on these services.

Candidates who submit responses will be posted on the Coalition's website and social media platforms and may be invited to address the Coalition at a future convening.

The Coalition regularly works with elected officials and senior staff, provides testimony before the DC Council, and collaborates with government agencies, providers, workforce partners, and community organizations across the District, including in the Wilson Building, on Capitol Hill, and in other public forums

A strong, stable long-term care workforce is essential to ensure that aging adults and people with disabilities in Washington, DC receive timely, high-quality care — whether in their homes, in assisted living communities, or in nursing facilities. Today, the District faces an escalating workforce crisis affecting access to care, service quality, and equity. The majority of these essential workers are women of color and immigrants, making this both a health and economic justice issue. The District must take seriously its responsibility to stabilize, grow, and respect this workforce in order to protect the dignity, health, and independence of residents.

The DC Coalition on Long Term Care (“the Coalition”) is a 30-year-old alliance of consumers, advocates, and healthcare providers committed to ensuring that DC residents with chronic conditions and disabilities can age safely and with dignity in their communities, supported by high-quality long-term care services. Our network includes more than 300 inspired leaders, organizations and long-term care stakeholders including AARP, Leading Age, DCHCA, Maryland-National Capital Homecare Association, SEIU1199 and many others – all with people who deeply care about the people who need and the people who provide long term care.

As former First Lady Rosalynn Carter famously said “There are four kinds of people in the world:

1. *Those who have been caregivers*
2. *Those who are currently caregivers*
3. *Those who will be caregivers*
4. *Those who will need caregivers*

<https://dclongtermcare.org/>

Please answer each question in three paragraphs or less. You can add your responses directly to this sheet or provide a separate document. We will notify you when posting your response on our website. Do not hesitate to contact the DC Coalition on Long Term Care Coordinator, Neil Richardson if you have any questions: ltcoalition@homecarepartnes.org

Candidate & Campaign Information

1. **Name:** Rhonda Hamiton
 2. **Office Seeking:** Mayor
 3. **Campaign Contact Person:** Juanita Briscoe
 4. **Email & Phone:** info@rhondahamilton4dc.com (202) 910-1835
 5. **Website / Social Media:** www.rhondahamilton4dc.com / IG: Rhonda Hamilton 4 DC
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SECTION I — Understanding the Issue

1. Understanding the Crisis

Washington, DC’s long term care workforce shortage impacts on every part of the care continuum, including home care, assisted living, and nursing facilities. When there are not enough trained professionals—particularly Certified Nurse Aides (CNAs), Home Health Aides (HHAs), and related direct care staff—families face delays accessing services, providers struggle to retain staff, and vulnerable residents risk reduced quality of care, preventable institutionalization, and unnecessary hospitalizations or even accessing care at all. The predicament is both a staffing shortage and a structural problem rooted in compensation, training access, and working conditions.

Have you ever been part of policy work or advocacy focusing on long term care or aging adults or people with disabilities? Please describe. My work as a mental health advocate across the District’s 8 wards for the past decade has included examining existing policies as

well as preparing proposed legislation to improve DC resident living conditions, as well as their quality of life. Many of the citizens that my work evolves around are seniors as well as members of the disability community. My case management work has involved providing oversight in circumstances where the staffing, structural, training, and working environment conditions have negatively impeded upon the well-being of many in my client base.

As DC's next mayor I will be focused on raising the standards of care across our communities and improving upon governmental outcomes to include auditing our existent agencies to ensure efficient and accountable services are being provided. I will support policies that introduce ways to strengthen funding resources, staffing qualifications and heighten protection requirements involving the care of our vulnerable populations, as a start.

2. Who is Impacted

Gaps in the long-term care workforce affect multiple populations simultaneously. Older adults and people with disabilities lose mobility and independence and/or face dislocation from their homes and communities. Low-income residents reliant on Medicaid are disproportionately impacted when providers cannot retain adequate staff. Families experience emotional and financial strain when forced to step into caregiving roles without support. Meanwhile, workers face high expectations with insufficient wages, minimal benefits, and limited advancement, creating instability and burnout. Policymakers must recognize this as both a public health and economic equity challenge.

Have you or a family member ever received long term care? Please describe.

I have been a caregiver for my deceased paternal grandmother for a period of 9 years, during her diagnosis of multiple myeloma. I have also recently served as my deceased mother's caregiver and power of attorney during her battle with lung cancer and schizophrenia. The emotional toll of witnessing the physical decline and mental stability of a loved one is immeasurable. However, the reward of helping them to hold on to some aspect of their dignity always governed my sacrifice and dedication to their legacies.

The role of being mayor in the nation's capital where we continue to navigate challenges in our healthcare and extended care communities will require leadership that will demonstrate a perfect balance of empathy, responsibility, vision, and results.

Preserving the lives of District residents across all populations will remain a top priority of my administration as DC's next mayor. I realize the importance of managing systems that work properly, and most especially managing our city's assets in order that there is a greater impact on improving care standards as well as day to day living for each of our citizens.

SECTION II — Policy Commitments

3. Medication Aide Training Expansion

Medication Aides play a critical role supporting older adults and people with disabilities, especially in residential and assisted living settings. However, without sufficient approved Medication Aide training programs, facilities struggle to meet care needs, and workers lose valuable opportunities for career growth and higher wages. Expanding access to approved training providers is a tangible step toward ensuring better staffing, better care continuity, and workforce mobility. The DC Board of Nursing has not approved a training provider in over 4 years.

How would you advocate with the Board of Nursing to ensure a training provider is approved for this important certification? Please describe.

As an advocate working to improve the lives of District residents amidst a backdrop of staffing shortages, inadequate care realities, and proper oversight challenges, I plan to hold the Board of Nursing and other applicable industry stakeholders to higher standards of patient and citizen outcomes.

It has been apparent that the District’s current mode of operating seems to favor reactionary planning and responses. I will work with the Board of Nursing to expand and introduce training opportunities for our unemployed, college, and senior school populations in an effort to help fill staffing challenges. I will also work with professionals in our holistic health industry to broaden opportunities for investments in preventative care education and supportive solutions that align with our Board of Nursing care models.

4. Implementation of Certified Nurse Aide Amendment Act

The Certified Nurse Aide Amendment Act is intended to improve standards, workforce support, and resident care outcomes. However, strong legislation does not matter without strong implementation. The Act’s provisions address workforce protections, training, and quality oversight to stabilize the CNA pipeline. Full implementation requires coordination, oversight, and ongoing attention to ensure its goals are realized and not delayed or weakened.

Summary from [LegiScan](#)

- **Law Passed:** The *Certified Nurse Aide Amendment Act of 2024* became **law with effect on December 12, 2024** after Council approval and the statutory congressional review period. [D.C. Law Library](#)

- **Primary Sponsor:** Councilmember **Christina Henderson (At-Large)**. [DC Coalition on Long Term Care](#)
- **Official Co-Sponsors:** Councilmembers **Charles Allen, Brianne K. Nadeau, Matthew Frumin, Janeese Lewis George, Zachary Parker, Brooke Pinto, and Trayon White, Sr.** [DC Coalition on Long Term Care](#)
- **Council Approval:** Passed unanimously in recorded votes.

Do you support full implementation, including workforce development provisions, improved wages and benefits, better-quality pathways, and accountability measures?

Yes. I absolutely do. We've watched as investments in developer agendas, and stadium projects have seemed to receive priority over the proper well-being and quality of life for District residents. That will end on my watch. We must have a leader and CEO of the District, such as myself, that will vow to work with the other two branches of government to ensure that person first care is not violated or diminished due to failed leadership and systems. Enforcement of policies, accountability, as well as oversight will increase on my watch. My record as a dedicated, results oriented, and outspoken voice of the people should speak for itself.

5. Training and Career Pathways

A sustainable workforce depends on not only recruitment but retention. Workers remain in the profession when there are meaningful opportunities to advance, earn higher wages, and develop skills. Creating structured pathways—from entry-level roles to specialized credentials and leadership positions with corresponding wage increases—strengthens retention and dignity in the profession. This also improves care quality by ensuring a more skilled and stable workforce. The District does not have a comprehensive community college or career and training institution to support workers who want to take the next step in their health care careers. Until the city addresses this problem by creating a comprehensive post-secondary training school, we are advocating for partnerships with PG Community College, Montgomery College and Northern Virginia Community College as well as increased support for the adult charter schools in the city. The District does not currently have the training capacity to train the number of workers we need now and in the future.

What policies or investments would you support to improve training, upskilling, and advancement opportunities for DC's long term care workers? Please describe.

I will support investments in partnering with neighboring counties as well as "in-city" efforts to help produce a more qualified and sustainable District healthcare and long term care

professional workforce. Job protections as well as housing and childcare incentives must also accompany this commitment to help ease the burdens of affordability and work-life balance. I strongly support advanced workforce training opportunities on the high-school level as well as strong entrepreneur and non-profit staffing partnerships.

SECTION III — Funding Priorities

6. Wage Implementation

Wage strength is one of the most significant predictors of workforce stability. The wage provisions in the Certified Nurse Aide Amendment Act (CNAAA) are intended to ensure competitive compensation that reflects the difficulty and importance of this work. Without adequate pay, workers leave the sector, often for higher-paying entry-level jobs in retail and hospitality, worsening care shortages. Adequate wages also help address long-standing racial and gender inequities embedded in care labor. In 2021, the District passed the Paid Equity Fund that provided for higher wages and better benefits for early childhood teachers. We believe that CNAs and other caregivers should also be paid an equitable wage. Would you support a higher Medicaid reimbursement or consider a tax on high wealth individuals in order to make this bill comply with the law that dictates higher wages.

The CNAAA has not been fully implemented because the current Mayor and Council have not been willing to put the necessary funding behind it. Budget decisions reflect values. Investments in aging and disability services, workforce stability, and community-based care are investments in public health, family stability, and equity.

Do you support full implementation and funding of the wage provisions in the Certified Nurse Aide Amendment Act?

Yes. I do. Often times our law makers and elected leaders are not properly invested in putting the necessary funding allocations in public health and family stability because they have become out of touch with the reality of caring for senior or disabled loved ones.

I am a leader who is very much in touch with the reality of government's role in the preservation of all life. I support full implementation and funding of the wage provisions in the Certified Nurse Aide Amendment Act.

SECTION IV — Equity, Economic Mobility, and Worker Dignity

7. Racial, Gender, and Immigrant Equity

The long-term care workforce is disproportionately comprised of women of color and immigrants, many of whom face barriers to advancement, immigration vulnerabilities, language access challenges, limited worker protections, and systemic inequities. Policies designed with equity at the center can improve job quality, economic mobility, and stability for families while strengthening DC's care infrastructure. Historically, care providers were considered domestic servants with no labor or wage protections. At the same time, they are absolutely essential to a functioning economy.

What policies would you champion to address inequities, worker protections, immigration barriers, and economic mobility for this workforce?

I champion auditing our current policies and loop holes to determine where we have opportunities to strengthen our existent language and improve upon the enforcement of such. I have already assembled an Advisory Commission on Wellness comprised of medical professionals and advocates to help explore the District's current healthcare systems challenges and will be working with them to introduce system wide policy recommendations and adaptations. I welcome members from your coalition to meet with us to further discuss your concerns and vision for a more equitable system.

SECTION V — Accountability, Collaboration, and Leadership

8. Partnership Commitment

Solving the long-term care workforce crisis requires collaboration between government, providers, workers, advocates, and community leaders. Elected officials who engage transparently and consistently with stakeholders can drive meaningful progress and ensure policies reflect on-the-ground realities.

If elected, will you commit to ongoing collaboration with the DC Coalition on Long Term Care?

Yes. I welcome it as a mental health professional and a committed leader in the fight for a healthy DC.

9. Additional Insights

Candidates bring different lived experiences, professional backgrounds, and policy perspectives to this work. Understanding your broader philosophy and personal commitments helps clarify how you will lead, prioritize, and respond to future challenges in long-term care.

Is there anything else you would like us to know about your values, commitments, or experience related to aging, disability services, or long-term care?

Yes. I am deeply concerned for the lack of proper education and investments in preventative care. I am equally concerned with the imbalance of healthcare outcomes and access to dignified care. Housing is healthcare and yet death by zip code seems to be dangerously our reality here in DC. I am a proponent of root cause solutions. I've watched firsthand as District residents and their declining health have taken a back seat to special interest and relationship politics. I am not a status quo candidate. Government should work for all of its citizens. I am a leader who is ready on day one to tackle the inefficiency and mismanagement of what I believe is contributing to the failures of our healthcare and long term care landscape.

Thank you.

Submission Instructions

Please return your completed questionnaire by:

Deadline: March 15, 2026

Submit to: LTC Coordinator, Neil Richardson ltccoalition@homecarepartners.org

Format: PDF or Word preferred

<https://dclongtermcare.org/>

