

Health Workforce Subcommittee

Governor's Council on Workforce & Economic Development



Meeting Summary

Location:	OSU-OKC, Room 304, http://www.osuokc.edu/map/		
Subject:	Health Care Workforce Subcommittee (HWSC)		
Date:	03/14/19	Time:	10:00 a.m. – 12:00 p.m.

Meeting Participants

Meeting Facilitators: Shelly Dunham, Chair

HWFSC Members Present: Joseph Cunningham, Randy Curry, Shelly Dunham, Tandie Hastings, Teresa Huggins, Daniel Joyce, Serina Madden, Deanna Tharp, Shelly Wells, and David Wharton

HWFSC members not present: Jeremy Colby, Tim Davis, Randy Grellner, William Pettit and John Zubialde

Other Participants: Sarah Ashmore, Erin Baird, Jana Castleberry, David Crow, Richard Evans, Andy Fosmire, Kyle Foster, Angel Giron, Kirsten Harrelson, Marisa New, Kerstin Reinschmidt, JT Petherick, Travis Scott and Brent Wilborn

Agenda

Topic	Responsible Party
➤ Approval of December Meeting Minutes	Shelly Dunham
Update Oklahoma Works/Governor's Transition	Erin Baird, Oklahoma Works
➤ Update: Community Health Worker Taskforce	Kerstin Reinschmidt, Angel Giron, OU COPH Marisa New
➤ Update: Physicians Workgroup	Carter Kimble, OSU Board of Regents
➤ Update: Nursing Professions Workgroup	Shelly Wells
➤ Update: Federally Qualified Health Center	Teresa Huggins
➤ Update: State Loan Repayment Programs	Brent Wilborn, OKPCA; Jana Castleberry, OSDH and Richard Evans, PMTC
➤ Update: Hospitals/Oklahoma Hospital Association	Andy Fosmire, OHA
➤ Next Meeting: June 13	Shelly Dunham

Minutes

Minutes were approved.
Motion: Deanna Tharp Second: Randy Curry

- Update: Oklahoma Works/Governor's Transition**
- Transition Team is working in the "First 100 Days" mode and will work through this period to develop a plan to take Oklahoma into the top tier. Recommendations will be made in early May.
 - Information received qualitatively from two grantees for sector partnerships who implemented employer listening sessions:
 - The Western Region indicated unmet demand for a variety of healthcare occupations, including RNs, PTs, OTs, Lab Techs, EMTs, CNAs, etc.
 - The Northeast Region indicated unmet demand for phlebotomists, mental health providers, medical assistants, PTs, lab techs, CNAs, and certified scrub technicians, etc.

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- Career Pathways grants (Western and NE) have been extended until July 1; After this time, OK Works will release a request for proposal. **Action Item: Develop HWSC proposal**
- Western recommendations did not include primary care physicians or primary care providers. **Action Item: HWSC could provide comments on primary care shortages and the necessity of primary care providers in a health system.**
- OK Works labor market reports for job postings indicate similar needs, but the top occupations needed are indicated as RNs, PTs, OTs, General Internists, Nursing Assistants, Managers, and Customer Service Representatives.
 - A new survey from OESC collects specific data on positions. **Action Item: Obtain more information about data captured in survey.** Challenges encountered in health workforce include aging workforce, more female than male, and pay differentials. **Action Item: HWSC to develop comments on report.**
 - CNA Issue: OSDH Rules for CNAs require a six-month waiting period between certifications. Discussions around the issue noted that there may be no reason for the wait. **Action Item: HWSC will lead development of proposed rule change; research language of rule, examine other states practices, develop recommendations. This needs to begin in June.**
- Preliminary recommendations received from both sector strategy grants, include:
 - Increase access to training programs in rural communities using virtual opportunities.
 - Increase experience for job applicants through internships and Registered Apprenticeships.
 - Increase health care instructors (preceptors and supervisors) for clinical and training completion.
 - Strengthen ties with rural economic development to keep rural-trained job seekers close to home.
 - Increase staffing and wages for instructors and faculty, and long-term care facility staff.
 - Increase number of bridge programs to develop career pathways.
 - Increase ability to overlap certifications.
 - Employers indicated that the future of the health care workforce needs to address a move toward virtual visits, increased usage of telemedicine, increases in remote patient monitoring, and an increase in outpatient care with more training for acute care provided inpatient.
- As we balance state data and regional data, both qualitative and quantitative, we can better prepare the industry's workforce with not just filling immediate needs, but identifying future trends for which to prepare our workforce.

PPT available upon request.

Update: Community Health Worker Taskforce

Two grants involving CHWs: 1) Oklahoma Public Training Center/HRSA Region 6 PHTC Community-Based Team, 2) Developing and Testing a Diabetes Training to Improve the Health of Oklahomans Through an Effective CHW Workforce (Presbyterian Health Foundation)

Grant #1 - Oklahoma Public Health Training Center (OPHTC)

PHTC R6 Survey is active now!

The OPHTC is conducting a public health training needs assessment from March 13- April 5, 2019.

The survey includes questions on CHWs/CHRs e.g. Organization employs CHWs? Are you a CHW?

- CHW job titles at your organization
- Top 3 health issues addressed by CHWs
- What roles CHWs play at organization
- CHW skills employed and training needed
- CHW trainings required by organization

Handout - PHTC R6 Public Health Needs Assessment Announcement with link distributed. It will be emailed to HWSC, CHW Taskforce and other organizations. Your assistance in completing and distributing is requested.

Grant #2 - Developing and Testing.... Through an Effective CHW Workforce

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- Aim 1: Identify current roles, training, and expressed needs of CHWs in Oklahoma by reviewing CHW job descriptions and conducting focus groups and interviews with CHWs and their superiors, respectively.
- Aim 2: Develop a CHW diabetes training that incorporates in-depth knowledge of CHW roles, training, and needs in Oklahoma; best practices; and national recommendations for CHW roles and skills.
- Aim 3: Test the CHW diabetes training for effectiveness in increasing CHW capacity to improve the health of Oklahomans.

Next CHW Meeting will be Friday, June 7, 2019, Indian Health Service.

Discussion: OSU has Project Echo for CHWS. It's currently in a conceptual phase.

Question: Would an apprenticeship program be helpful?

Action Item: Form CHW small group to explore possibility.

Comment: Training should not be completed out of state; keep it in state.

PPT available upon request.

Update: Physicians Workgroup

Medical Schools: Funding restored for one year from CMS; State will begin to appropriate after this. Amount will likely become state appropriation of \$62 million split between OU/OSU. Oklahoma is still underfunding GME. There is a tax credit bill for physicians, HB2511. Limited to those who go to medical school in Oklahoma. The focus should be on where they are practicing and not where they went to school. PMTC loans are not taxable. PMTC is stacking now.

Update: Nursing Professions Workgroup

Continuing to disseminate Issue Brief and information

- even though the Workgroup hasn't been meeting since Issue Brief completed, the document and other information continues to be distributed and discussed with other others e.g. Board of Higher Regents Discussions have included the impact of the identified issues on these groups and how the recommendations might impact them.

Ongoing work with the NE Workforce Development Board, Healthcare Sector Partnership

- Work continues with the Northeastern Workforce Development Board. The listening session in January was comprised of 34 stakeholders representing health care employers, educators, students and job seekers. The charge for attendees that day was two-fold:
to identify attributes that would be important in creating ideal health care career pathways that would meet the needs of stakeholder in NE OK.
- Discuss the challenges in the current environment that impedes those identified attributes
- The March Meeting involved health care employers and educators who worked to further define the challenges that currently need addressing to enhance interest in healthcare employment, impact accessibility to careers in health care, maximize the existing workforce and strengthen the relationship between educators and employers

Action Item: Participation in local workforce investment board meetings will support continuity between our work and their work.

Working with PMTC to strengthen/expand education capacity.

- Meeting with PMTC to re-design the Nursing Award Program. Ideas that have been discussed include: (1) Go to all rural awards; (2) Look at changing the minimum total amount of scholarship per year. (3) Determine maximum amounts for each level of scholarship. (4) Look at qualified facilities for fulfilling obligation for all levels including Indian hospitals, Federally-funded facilities, and physician-owned facilities. (5) Expand qualified facilities for APRN obligation to include the rural clinics, Indian hospitals, Federally-funded facilities and Physician-owned facilities.
- Also establishing a partnership for seamless transition from and to BSN for registered nurses
Next meeting will be used to finalize decisions that will move forward to the Commission for action.

With the approval of the Regents' President Council, the ADN-BSN Articulation Pilot is in the formative stages.

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- Four ADN programs have been identified and include Carl Albert State in Poteau, NEO A&M in Miami, NEO in Tonkawa, and Western OK State College in Altus – so the 4 corners of the state are covered. NWOSU will be the BSN program as it has an existing online BSN completion program that has been nationally recognized for its accessibility and program outcomes.
- First meeting of the nursing directors will be the first week of April where possibilities will be discussed including concurrent enrollment and other models from across the nation.

Healthcare Workplace Violence Bills introduced by the House (HB 1927 – Rep. Roe) & Senate(SB86 – Sen. Jech)

- Both have passed their respective legislative bodies
- Now working out the differences between the 2 bills.
- Of note: both bills expand the definition of HC provider to include doctors, residents, interns, nurses, nurses' aides, ambulance attendants and operators, paramedics, EMTs, lab technicians, radiological technicians, PAs, medical students, hospital chaplains, and hospital security. The House Bill also includes pharmacists, pharmacy students, nursing students, and other hospital employees.
- HB: Both charges are felony charges with penalties that match the sentencing guidelines.
SB: changes the assault with intent to a misdemeanor and lower penalties.

PPT available upon request.

Update: Federally Qualified Health Centers

Completely integrated system. There are eighteen FQHCs involved (out of 20) in the Patient Care Network of Oklahoma (PCNOK). Patient care coordinators act as CHW-like professionals. We are beating the cost curve. MyHealth providing helpful reports. FQHCs are adding home health to their initiatives. In SE Oklahoma, seeing highest rates of home health due to age, health indicators and agencies in area. Telehealth increasing in use at all centers and OKC schools. Wanting to provide primary care by increasing access using phones, providing in the junior colleges and in community schools.

Update: State Loan Repayment Program Interim Study

Office of Primary Care, OSDH

- Difficult to get Licensed Alcohol and Drug Counselors (LADCs) in Oklahoma especially rural communities. LADCs are one of several health professionals eligible for NHSC LRP for Substance Use Disorder (SUD) sites.
- OSDH Office of Primary Care will be conducting a primary care needs assessment. The results will help guide recruitment, retirement system and programs. Lack of sufficient federal funds to meet needs in Oklahoma.

Oklahoma Primary Care Association

- In three years, the Health Resources and Services Administration (HRSA) will offer a State Loan Repayment Program (SLRP). The SLRP provides cost-sharing grants to more than 30 states to operate their own loan repayment programs. In turn, these state programs offer loan repayment to primary care providers working in Health Professional Shortage Areas (HPSAs).
- In order for a state to apply, there must be a 50/50 match coming from agencies (state, dental, PMTC) and/or tribal resources. SB 772 will help establish a legal infrastructure, no fiscal impact first year.
- Focus will be on a mental health loan repayment program. Health professionals along with NHSC approved facilities i.e. community health centers, tribal facilities, mental health facilities will benefit.

Physician Manpower Training Center (PMTC)

PMTC has state loan repayment program funding for physicians and other health providers. Recently established funding for physician assistants. Working to provider greater funding for nurses. PMTC is driving down data from OU and OSU medical schools along with PA programs.

Update: Hospitals/Oklahoma Hospital Association

Hospitals – 2nd largest employment industry in Oklahoma. 153 hospitals with approximately 77,000 employees. \$4, 189 billion in salaries/wages paid. Hospitals that have closed are in Frederick, Sayre, Eufaula, Wilburton and Pauls Valley since 2016. Rural hospital challenges: they're dependent upon Medicare/Medicaid rates, patients

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are older, sicker and more poor than in urban areas, higher percentage of uninsured, volume and workforce challenges. Nearly half of Oklahoma's population live outside of the metro counties (OK, Tulsa, Cleveland, Comanche and Canadian). Oklahoma is #2 in the country with the highest number of uninsured (#1 is Texas).

Health Workforce Related Legislation:

- **SB 86**, expands definitions of medical care providers related to *aggravated assault and battery with a firearm* beyond emergency care providers, passed Senate floor;
- **SB 773**, Creates the Oklahoma Mental Health Loan Repayment Act, providing educational loan repayment assistance to certain treatment and service providers based upon their service to certain patients and to the state, passed to House;
- **SB 1038**, Includes telemedicine under the supervision and licensing authority of the Occupational Therapy Practice Act, passed to House.
- **HB 2351**, creates the *Interstate Medical Licensure Compact*, provides a framework and process for multi-state medical licenses of physicians, passed House floor;
- **HB 2460**, removes smokers as a protected class in employment law, pending vote on House floor; and
- **HB 2511**, Exempts a percentage of taxable income for MDs/DOs practicing in rural areas meeting certain population/location requirements, passed House

PPT available upon request.

Announcement: Oklahoma Rural Health Association, May 28, 12 p.m., Embassy Suites, Norman

To Register: <https://www.rhp-nwahec.org/rural-health-conference>.

Sponsored by Oklahoma Rural Health Association & Oklahoma Office of Rural Health

Next HWSC Meeting: Thursday, June 13, 2019, 10:00 a.m. – OSU-OKC.

Meeting Adjourned: 12:03 p.m.

Health Workforce Subcommittee Goals & Priorities

Goals 3-5 years

- *Increase the number of primary care professionals practicing in areas currently designated as primary health professional shortage areas*
- *Increase the availability and accessibility of health professions training programs in rural and underserved areas*
- *Establish health profession career pathways from pre-baccalaureate health professional to more skilled healthcare labor force*

2019-20 Priorities

Conducting data analysis and preparing reports on health workforce supply and demand

- *Develop recommendations to accurately identify health workforce supply and demand in a rapidly changing industry*
- *Conduct assessment of potential impact of telehealth on supply and demand*
- *Engage with regional planning councils to integrate and align priorities and strategies*