



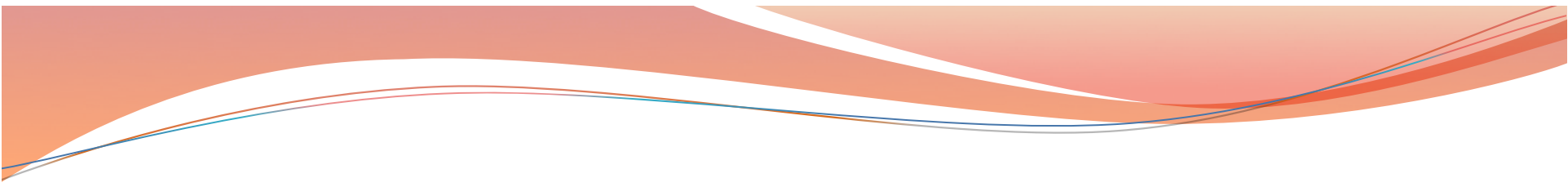
# ***Health Workforce Planning***

## **Health Workforce Policy Academy Kentucky**

**December 2, 2014**

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- **Workforce challenges**
  - **What works?**
  - **Policy levers**
  - **Key players**
  - **State workforce planning: Steps**
  - **State models – workforce planning**



# The health care landscape is changing...

**ACA**

**PCMH**

**Exchange**

ACOs: Accountable  
Care Organizations

**Patient-Centered**

**HIT**

**Interprofessional**

**Bundled Payment**

**Value vs. volume**

**Telehealth**

**EHR**

**Meaningful Use**

**Teams**

**“Quality not quantity”**





# Workforce Challenges Across the Nation

- Shortages
  - Primary care
  - Chronic and long term care
  - Certain specialties (generalist surgeons in rural, geriatrics...)
  - Behavioral/mental health
  - Oral health
- Maldistribution
  - Shortages of providers in rural areas, underserved populations
- Need for workforce diversity
- Need for effective teams
  - Inter-professional, inter-disciplinary and intra-professional



# What Works? Education

Educating  
providers for rural/  
underserved  
practice

- “Grow your own” - Recruit students from rural or other underserved areas into health careers
- Train in the right locations - Promote short and long term rural/underserved clinical training

Encourage  
continuing  
education

- Ensure opportunities throughout health care providers' careers

Later entry to  
health careers

- Opportunities for veterans
- Re-training of displaced workers



# What Works? Recruitment/Retention

Financial  
incentives for  
practice in  
rural and  
underserved  
areas

- Loan repayment programs (State and federal, for rural/underserved service)
  - e.g., National Health Service Corp (NHSC)
- Scholarships in exchange for rural/underserved practice



# What Works? Recruitment/Retention

Professional support – for all levels of providers

- Create/support professional communities, mentorship
- Continuing education opportunities
- Opportunities for career advancement: Career ladders/lattices

Resources to build/support effective teams

- Need staff with range of clinical skills, as well as good management and administrative resources

Access to telemedicine and other technology

- Need skilled team to use effectively



# Policy Levers

## Health Workforce Development

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### Federal/ National level

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Medicare and Medicaid reimbursement/policy

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Support for education and training

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National scholarship and loan repayment programs

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Accreditation and credentialing requirements

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Good planning data (Identify gaps, areas of greatest needs)

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Research and evaluation (to identify what works)

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# Policy Levers

## Health Workforce Development

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### State level

Licensing and regulation of health professionals

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Regulating health facilities

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Regulating educational programs

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Funding state colleges and universities

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State funded scholarships and loan repayment

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Medicaid reimbursement policies and regulation of private insurance

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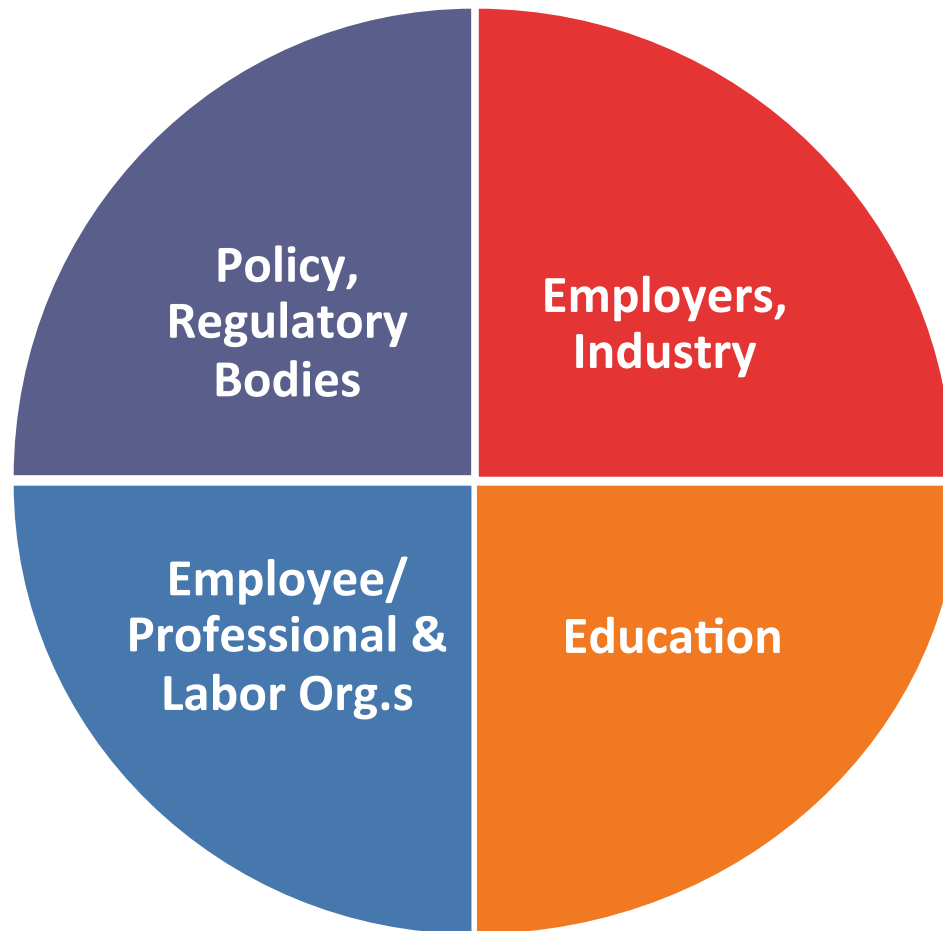
Good planning data (Identify gaps, areas of greatest needs)

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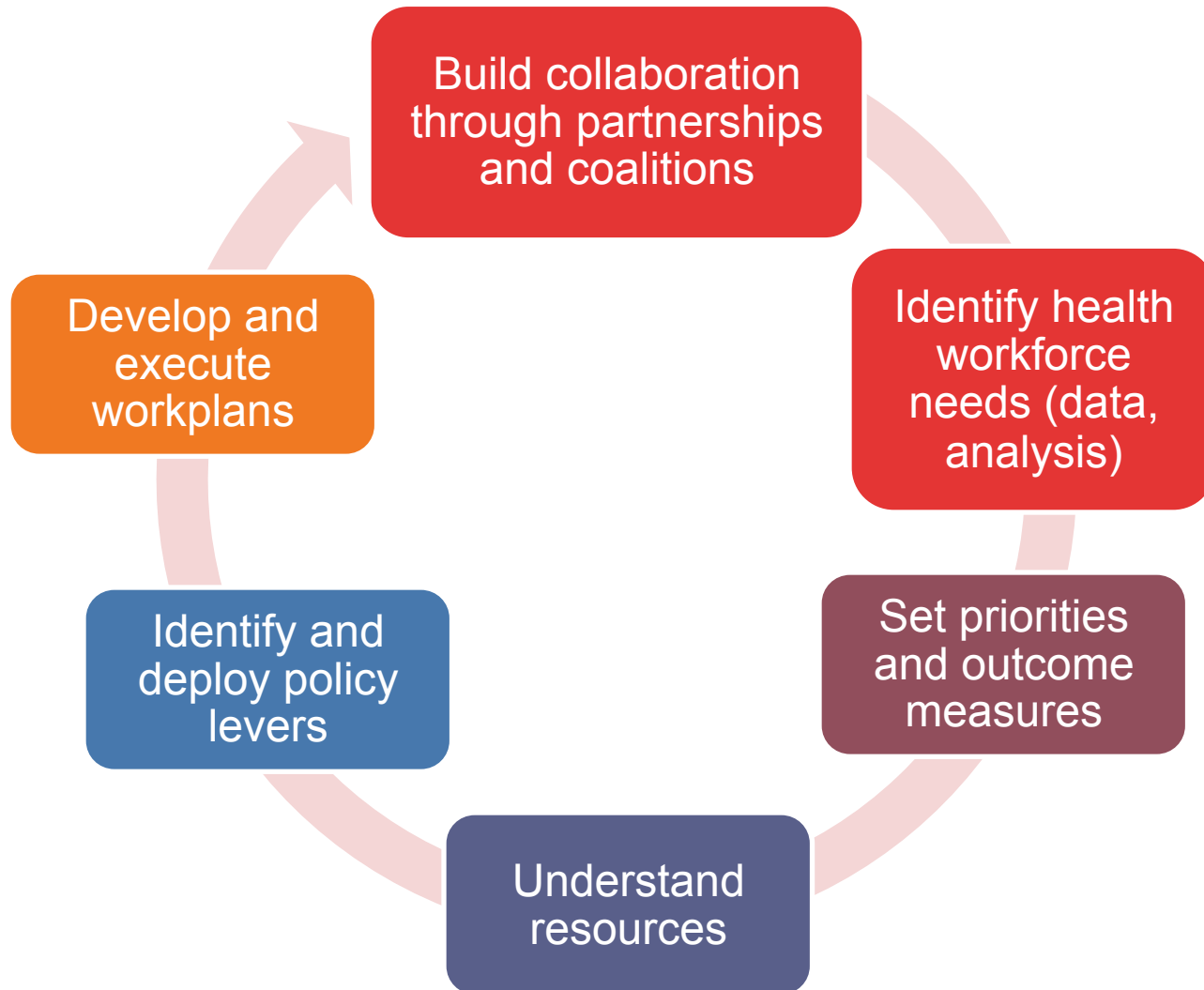
Research and evaluation (to identify what works)

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# Health Workforce Planning: Key Players



# State Health Workforce Planning: Steps





# **State Models**

## **Health workforce planning**



## Example States

Collaborative planning models and/or  
strong data systems to support health workforce planning

- Washington
- Nevada
- New Mexico
- New York
- Nebraska
- South Carolina
- North Carolina



# Washington Health Workforce Council

- Created as a Task Force of the State Workforce Investment Board
- Council members represent business, labor, education, and government
  - Higher Education (4 year, community college), Dept of Health, Legislators, SEIU, Hospital Association, Rural Health Association, etc.
- Creates/updates annual plan with actions for the Legislature, Governor, state and local agencies, educators, labor, healthcare industry employers, and workers to resolve health workforce issues
- State statute (2003) requires that the Council report its progress annually to the Governor and Legislature.



## Nevada Health Care Sector Council

- Created with six other sector councils in 2010 through legislation
- 25 volunteer members
  - Higher Education, Board of Nursing, Legislators, Hospital Association, etc.
- Reports to the Governor's Workforce Investment Board
- Administrative support provided by the Department of Employment, Training and Rehabilitation, with some funding from private grants



# New Mexico Health Workforce Committee

- Created through legislation (2012) that also created the Center for Health Workforce Analysis
- Membership determined by the legislation
  - 32 total
  - Consumers, providers, training institutions, professional associations, department of health, etc.
  - Members appointed by the Chancellor of the Health Sciences Center
  - No legislators
- Housed within the University of New Mexico's Health Sciences Center, reports to the legislature and the governor
- Staffed by the University of New Mexico, annual budget requests ~ \$300,000-\$400,000 to state
- Short term and 5-year plans

<http://www.nmlegis.gov/lcs/handouts/LHHS%20070113%20Item%2012%20NM%20Center%20for%20Health%20Workforce%20Analysis.pdf>



# New York Center for Health Workforce Studies

- Academic health workforce research center
  - Key partners/funders
    - State (Health, State University of New York, Education, Labor
    - Provider associations
    - Health labor unions
- Primarily responsible for monitoring New York's health workforce
- Assists with the analysis of areas/populations qualifying for shortage designation
  - <http://chws.albany.edu/>
- Similar model: WWAMI Center for Health Workforce Studies
  - <http://depts.washington.edu/uwchws/>



# Nebraska Health Professions Tracking Service

- Operating since 1995
- Key partners/funders include
  - The University of Nebraska Medical Center (UNMC)
    - Center for Health Policy
    - College of Public Health
  - Nebraska Health and Human Services (PCO, ORH)
- Health workforce monitoring – annual surveys of physicians, dentists, NPs, PAs, pharmacists, OTs, PTs, behavioral health professions, et al
- Produce annual directory and reports

<http://www.unmc.edu/publichealth/hpts/index.html>



# South Carolina

## Office for Healthcare Workforce Planning

- Seed funding provided by the Duke Endowment
- Collaborative partnership between
  - South Carolina Area Health Education Center
  - The University of South Carolina College of Nursing
  - South Carolina Office of Research and Statistics
- Monitors the state's health workforce
- South Carolina Health Professions Data Book
  - <http://officeforhealthcareworkforce.org/index.php>



# North Carolina

## Data and Collaborative Planning

- Widely recognized leader in state workforce data collection and analysis – excellent longitudinal supply data system
  - Health Professions Tracking System
  - <http://www.shepscenter.unc.edu/hp/presentations.htm>
- State has long history of collaborative workforce planning:
  - Strong AHECs and Office of Rural Health
  - Strong public community college and university system
  - History of collaboration and trust



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