

# VERMONT'S HEALTH CARE WORKFORCE STRATEGIC PLAN: A PROGRESS UPDATE

SENATE COMMITTEE ON ECONOMIC DEVELOPMENT

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**UNIVERSITY**  
*of* **VERMONT**  
COLLEGE OF MEDICINE  
OFFICE OF PRIMARY CARE

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AREA HEALTH EDUCATION CENTERS PROGRAM



# Outline

Act 48 Health Care Workforce Strategic Plan and the Governor's Health Care Workforce Work Group

AHEC's purpose: Workforce Development

Workforce trends, and program highlights

# Health Care Workforce Strategic Plan

## Act 48, Section 12a

### **Guidance to develop the plan included:**

Act 128 and report by William C. Hsiao PhD, FSA  
HRSA Workforce Strategic Planning Grant to UVM  
VDH survey data  
AHEC survey data  
VT Health Care Workforce Development Partners  
Kaiser Permanente  
VT Department of Education  
VT Department of Health  
VT Department of Labor  
VT State Colleges

# Health Care Workforce Group

Created August 1, 2013 by Executive Order

See Membership List handout

Reviewing and prioritizing recommendations in strategic plan

Monitor trends and determine future workforce needs

Developing objectives for workforce priorities for funding

Recommend use of federal state innovation model workforce funds using grant criteria

Developing supply and demand information for professions

Analytics

# Key Documents

Workforce strategic plan:

[http://hcr.vermont.gov/sites/hcr/files/workforce\\_Final%20Draft%201152013\\_mm.pdf](http://hcr.vermont.gov/sites/hcr/files/workforce_Final%20Draft%201152013_mm.pdf)

Executive Order:

[http://governor.vermont.gov/sites/governor/files/executive\\_orders/E0°/02007-13/020Health°/0200are/020Workforce/020Work%20Group.pdf](http://governor.vermont.gov/sites/governor/files/executive_orders/E0°/02007-13/020Health°/0200are/020Workforce/020Work%20Group.pdf)

Health Care Workforce Work Group website (VHCIP):

[http://healthcareinnovation.vermont.gov/work\\_groups/workforce](http://healthcareinnovation.vermont.gov/work_groups/workforce)

# Recommendations from the Workforce Strategic Plan Governor's Healthcare Workforce Advisory Group

## RECOMMENDATIONS: OVERSIGHT AND PLANNING

**Recommendation #1:** Under the auspices of the Agency of Administration, the Secretary of Administration shall convene and staff from within the Agency a permanent health care workforce working group (Workgroup) to monitor workforce trends, develop strategic objectives and activities, direct and pursue funding for health care workforce development activities, and advise and report to the Secretary on its efforts. The Workgroup shall include state government interagency representation as well as representation from health care employers, clinicians, membership organizations, secondary and higher education, and other relevant interest groups. (The full presentation of this recommendation in Section II contains additional sub-recommendations which outline the Workgroup's charge and work plan in greater detail)

**Recommendation #2:** The Secretary of Administration should direct the Office of Professional Regulation and other state licensing bodies to collect workforce supply data.

**Recommendation #3:** The reporting of workforce-related planning data by health care professionals should be mandatory in order to issue licenses, certifications or registration.

## RECOMMENDATIONS: RECRUITMENT AND RETENTION

**Recommendation #4** Based upon input and documentation from the Workgroup, the Secretary of Administration should educate and work with Vermont's congressional delegation to encourage changes in how National Health Service Corp assignees are placed. The delegation should work with other similarly affected states' delegations in this effort.

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**Recommendation #5:** In the selection criteria and admission of qualified students, the state college system, including the UVM Medical School and the Fletcher Allen Medical and Dental Residency Programs should include assessment of the qualities which make a student more likely to specialize in primary care and practice in rural, underserved areas.

**Recommendation #6:** In the education and training of students in the health field, the state college system, including the UVM Medical School and Fletcher Allen Residency Program, should create a culture which promotes primary care specialties, serving disadvantaged populations and practicing in rural areas.

**RECOMMENDATIONS: IMPROVING, EXPANDING AND POPULATING THE EDUCATIONAL PIPELINE**

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**Recommendation #7:** The state college system, including the University of Vermont College of Medicine and the Residency Program at Fletcher Allen Health Care, should prepare health care profession students for practice in a health care reform environment (as called for by 10M, Blueprint for Health, and Act 48) through post-secondary curriculum redesign.

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**Recommendation #8:** The Department of Education and the UVM and Regional AHEC Programs should coordinate activities which increase student enrollment in AHEC health career awareness programs and expose students to health care careers through hands on experiences through programs which promote internships, externships and job placements with health profession organizations.

**Recommendation #9:** The Department of Education should accelerate efforts to align secondary education coursework with skills necessary for entry into the field of health care and to define career paths in terms of post-secondary education requirements. These efforts should consider coursework offered K-12.

**Recommendation #10:** The Department of Education, Department of Labor and the UVM and Regional AHEC Programs should develop continuing education opportunities for guidance counselors to better prepare them to assist students considering a career in health care.

**Recommendation #11: Vermont state colleges should develop career ladders by facilitating enrollment of Vermont students into health care educational programs. Strategies include but are not limited to articulation agreements and dual enrollment.**

**Recommendation #12: Vermont state colleges and the Fletcher Allen Medical Residency program should evaluate the potential to expand enrollment in health profession education, training and residency programs.**

**Recommendation #13: Vermont state colleges should evaluate the potential to create abbreviated education and training programs.**

**Recommendation #14: Vermont state colleges should make easier the transition of health career students and their existing academic credits from one state college to another.**

**Recommendation #15: Within each Vermont state college, their departments should collaborate to develop coursework where health care profession students can be educated together, allowing for interdisciplinary learning.**

**Recommendation #16: The Department of Labor in collaboration with the UVM and Regional AHEC Programs should expand programming of its Regional Career Centers to include guidance and counseling for individuals seeking to pursue a career in health care.**

**Recommendation #17: State programs, such as those within the Department of Education, Department of Labor, Refugee Resettlement Program and others should work with state colleges and Regional AHEC Programs to increase representation of disadvantaged and under-represented populations in health care career training and education programs.**



## **RECOMMENDATIONS: GREEN MOUNTAIN CARE BOARD AND BLUEPRINT**

**Recommendation #18:** The Green Mountain Care Board and the Blueprint for Health should evaluate the impact of incentives and penalties for reaching workforce performance measures.

**Recommendation #19:** The Blueprint for Health shall establish systems of care re-engineering which identify workforce needs and enable professions to work to their highest clinical ability, and provide staff dedicated to ongoing re-engineering analysis.

**Recommendation #20:** The Blueprint for Health and Green Mountain Care Board shall commit to spreading care re-engineering innovations system-wide.

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**Recommendation #21:** In its movement toward payment reform, the Green Mountain Care Board should examine and be sensitive to its impact on health care professional pay and the potential benefit a redesigned payment mechanism can have for recruitment and retention of health care professionals.

# Workgroup Process

**Focused on oversight and planning first**

**Moved state innovation grant work forward**

**L' Developed workgroup to look at direct care workforce needs**

**Prioritized recommendations to focus on first:**

Blueprint for Health & delivery system reform to determine future workforce needs

Interdisciplinary learning

Aligning post-secondary education efforts with workforce needs

# Vermont AHEC

**AHEC is a network of three 501c-3 nonprofit community organizations and UVM**

**Northeastern VT AHEC in St. Johnsbury**

**Champlain Valley AHEC in St. Albans**

**Southern VT AHEC in Springfield**

**UVM AHEC Program in Burlington**

**AHEC collaborates with many partners around the state to improve access to primary care through a focus on health care workforce development.**



**Champlain Valley Area  
Health Education Center**



**Southern Vermont  
ep<sub>t</sub>AHEC**

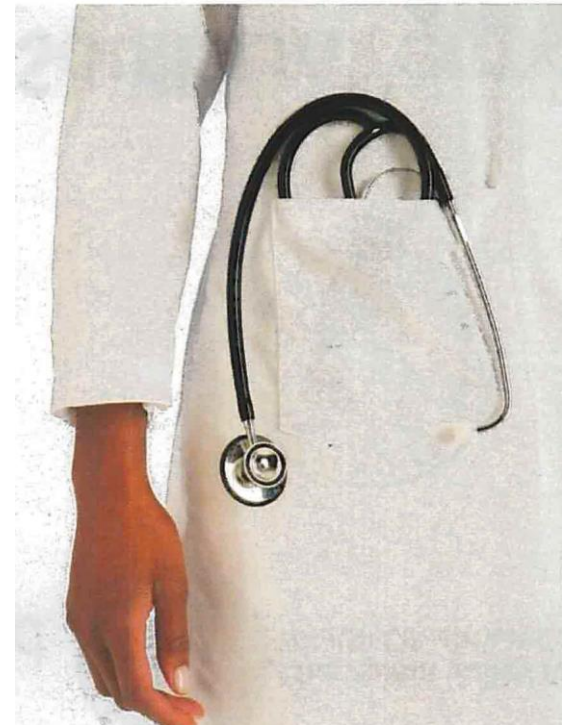
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## Workforce is the Foundation of our Health Care System

**The workforce is the foundation to health care access and delivery of care when and where it's needed for all citizens.**





**Vermont AHEC's Response is a comprehensive approach:**

**Workforce research, planning, and development**

**Workforce pipeline, recruitment, and retention**

## **Vermont AHEC Initiatives Include:**

**Pipeline programs in health careers awareness and exploration for youth in communities across the state**

**Support for and engagement of health professions students at the University of Vermont and residents at Fletcher Allen Health Care**

**Recruitment and retention of the healthcare workforce in Vermont**

**AHEC also brings educational and quality improvement programming to Vermont's primary care practitioners and supports community health education.**

## UVM Office of Primary Care and the Vermont Area Health Education Centers (AHEC) Program

Encouraged by the State Legislature, UVM established the Office of Primary Care (OPC) in 1993 to focus the College of Medicine's commitment to primary care and community outreach in Vermont. OPC is actively involved in enhancing networks of community-based faculty, in strengthening teaching and research programs, and in preparing the workforce for the future.

The OPC was awarded federal funding to establish a statewide AHEC program in 1996, including three regional centers (Northeastern Vermont AHEC in St. Johnsbury, Champlain Valley AHEC in St. Albans, and Southern Vermont AHEC in Springfield), each a 501c-3 non-profit organization. Together, the Vermont AHEC Network is increasing the supply, geographic distribution, and education of Vermont's healthcare workforce, and providing a link between UVM's health professions training programs and Vermont's communities. The Vermont AHEC Network is a true academic-community partnership.

In 2013, the UVM OPC and VT AHEC Network provided 4,784 Vermont youth with health care careers experiences, worked with 218 providers precepting health professions students, delivered continuing education to 2,687 health care professionals, and placed 21 physicians in Vermont communities.



### Overarching Aims

#### HEALTHCARE WORKFORCE

VT AHEC will improve access to high quality health care by promoting an appropriate and adequate healthcare workforce in Vermont.

#### COMMUNITY HEALTH SYSTEMS

VT AHEC will be engaged with, and responsive to, community health care needs throughout the state.

[vtahec.org](http://vtahec.org)



Completing 101 families by 2014



Southern Vermont, 1

HEALTH CAREER PIPELINE DEVELOPMENT

12 = 14

HEALTHCARE WORKFORCE SUPPORT

COMMUNITY HEALTHCARE SYSTEMS SUPPORT

- 6TH-8TH GRADES
  - Career Fairs
  - Health Careers Directory
  - School Field Trips
  - Classroom Presentations
  - Job Shadow Days
  - OW Scrubs After School Program



- 9TH-12TH GRADES
  - Health Career Exploration Camps
  - MedQuest
  - Advanced MedQuest
  - CollegeQuest
  - job Shadow Days
  - Career Fairs
  - Classroom Presentations
  - Health Careers Directory
  - visit [vthealthcareers.org](http://vthealthcareers.org)
  - October Health Careers Awareness Month Campaign
  - Teacher/Guidance Counselor/School Administrator Events
  - Focus Conference

- RECRUITMENT
  - Former Educational Loan Repayment Programs for Healthcare Professionals
  - Vermont and New York Recruitment Day
  - AHEC Greenman Physician Placement Services

- RETENTION
  - 'Lou,' 1-yr. Programs for Healthcare Professionals
  - Educational programs for Fletcher Allen Health Care Residents
  - Community-based Projects



- CONFERENCE
  - Q. Improve Behavioral Health & Primary Care Conference
  - Clinical Updates

- WORKFORCE RESEARCH

- Geniatrics Conference
- Motivational Interviewing
- Grand Rounds for School Nurses
- Academic Detailing Program in Wise Prescribing
- LNA & Direct Care Worker Trainings
- Opioids Prescribing QI
- Military Veterans' Health



- POST SECONDARY
  - Internships
  - Career Fairs
  - NEVAHEC Scholarship Program
  - Health Careers Directory
  - UVM Premedical Enhancement Program (PEP)

**HEALTH PROFESSIONS STUDENTS**

Housing Support for Rural Clinical Rotations

Summer Community-based Projects for Medical and other Health Professions Students

Spotlight on Primary Care Senes

Incentives for Community/faculty Preceptors

National Primary Care Week Activities

Interprofessional Projects

Classroom Presentations

**TOOT S 11 RESOURCES FOR PRACTITIONERS**

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**IMPROVING COMMUNITY SYSTEMS OF ACCESS & HEALTHCARE COORDINATION**

Public. neattivVrimary (Tal) School Nurses Fonens

Mental HealthWDental Health and Primary Core Integration

- •pating Healthcare inc Community Resources

Patient Ectuu.strot. Initiatives

Community-based boratom and...nhips Respond prog Needs yenta's of -int Community earth Teams' Pharmacists in Blueprint Pilot

**SUSTAINING VT AHEC NETWORK**

Collaborative Rex: at:anal Program Development

Shared ReluUrces and Capacity

Vont Staff Training



CONNECTING STUDENTS TO CAREERS, PROFESSIONALS TO COMMUNITIES, AND COMMUNITIES TO BETTER HEALTH



# Vermont Educational Loan Repayment (ELR) for Health Care Professionals

**ELR is a recruitment and retention tool; it can be used to strategically respond to state workforce needs.**

## **Funding Summary (State funds only)**

### **FY 10, 11, 12, 13, 14, and 15 projected**

\$445,000 primary care (NADs/D0s, APRNs, PAs, CNMs)

\$125,000 dentists (FY14 \$225,000 due to additional \$100,000 from HIV/AIDs grant)

\$255,000 nurses (LPNs and RNs)

\$45,000 nurse faculty (VT's five nursing programs)

**\$870,000 total**

## Vermont Educational Loan Repayment (ELR) for Health Care Professionals

FY10: 410 applications, 232 awarded

FY11: 459 applications, 235 awarded

FY12: 383 applications, 226 awarded

FY13: 463 applications, 269 awarded

FY14: 447 applications, TBD awarded (finalized late March)

In FY14 an award minimum was implemented; the result will be fewer but larger awards.

# ELR and Competing Nationally

Vermont ELR applicants; debt is verified educational debt and from institutions across the country.

Snapshot as of February 28, 2013	Allocation	Max annual award allowed	# of Apps received	Total debt of all applicants	# <u>not</u> awarded	# awarded
<b>Primary Care</b>	\$445,000	\$20,000	165	\$16,895,919	40	125
<b>Dentists</b>	\$125,000	\$20,000	30	\$5,296,250	9	21
<b>Nurses</b>	\$255,000	\$10,000	254	\$8,771,581	143	111
<b>Nurse Educators/Faculty</b>	\$45,000	\$20,000	14	\$769,684	2	12
<b>TOTAL</b>	<b>\$870,000</b>		<b>463</b>	<b>\$31,733,434</b>	<b>194</b>	<b>269</b>

Review of State Ed Loan Repayment + National Health Service Corps (NHSC):

- Most programs have higher maximum awards than VT ELR
- Many guarantee 2 years of funding and up to \$25,000/year
- Some programs as high as \$50,000/year
- ND: \$90,000 for 2 yrs; NH: \$75,000 for 3 yrs; NE: \$40,000/yr; SD: \$138,328 for 3 yrs; MA: \$25,000; NY: \$150,000 over 5 yrs
- HPSA scores result in limited NHSC benefit in VT
- Future federal grant opportunity (linked to HPSA scores)

# Youth Programs: The Next Generation

**Focus on Health Careers Conference** is designed as an early and broad exposure to high school students who have self-identified an interest in health careers. The day-long event provides a wide range of career sharing and career paths by healthcare professionals and health professions students. Information regarding state post-secondary educational opportunities in health professions and VSAC are also part of the programming.

**MedQuest and Advanced MedQuest (MQ)** are week-long residential programs at a VT college campus for students. MQ provides a more comprehensive exposure to health care careers, many hands-on experiential learning opportunities, staffed by medical students, and includes shadowing opportunities at local hospitals, home health and mental health facilities.

**Shadow Days** are offered at local hospitals as an additional and more focused exploration opportunity with one health professional within a hospital setting.

# Youth Programs: The Next Generation

**CollegeQuest** is lead by the NEVAHEC. Its goal is to assist individuals from disadvantaged backgrounds to undertake education to enter a health profession.

Defined 'disadvantaged' as low income and/or first in family to pursue a college education

Partner with VSAC, CCV, Lyndon State College & UVM

Aim: "Lengthen and strengthen the existing health careers pipeline"

A "Structured Summer Program" CollegeQuest to Health Careers

Bridge from high school to college with continuous supports

Six week, residential program on a VT college campus

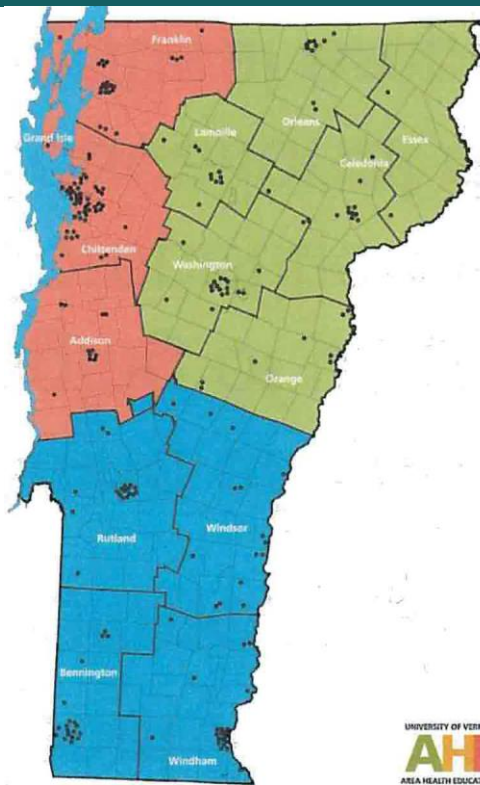
**College Student Health Internship Program (C-SHIP)** was piloted in the SVAHEC region during summer 2013 and continues in 2014. It targets undergraduate students who were former AHEC secondary student participants and provides programming to keep them actively engaged in health care careers exploration.

# Vermont Primary Care Workforce

## The Vermont Primary Care Workforce

2013 SNAPSHOT

WORKFORCE CONTINUES TO SHOW IMPROVEMENT  
BUT SHORTAGE IN ADULT PRIMARY CARE PERSISTS



0 In VT, during the three-year period of 2011 to 2013, the number of primary care practitioners (PCPs) grew; however, the shortage of PCPs who care for adults continued statewide.

Almost two-thirds of the internal medicine physicians and almost half of the family medicine physicians continued to limit or close their practice to new patients in 2013.

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# **Vermont Primary Care Workforce: Recruitment and Retention Challenges**

**Aging of workforce**

**Aging of population**

**Competition for trained workforce**

**Educational debt**

**Spousal employment opportunities**

# AHEC Freeman Physician Placement Specialist Program

**Focused cultivation and recruitment efforts link FAHC residents and UVM COM grads to positions needed throughout VT**

**Program works closely with VT hospitals and practices**

**VT Educational Loan Repayment is an important tool**





# AHEC Freeman Physician Placement Specialist Program

## **FY13: 21 physicians placed**

12 primary care, 9 speciality care

10 placed in rural counties (1 Lamoille, 1 Washington, 1 Grand Isle, 2 Franklin, 1 Bennington, 1 Windham, 3 Rutland)

3 placed at an FQHC

## **FY12: 23 physicians placed**

13 in primary care, 10 in specialty care

8 placed in rural and underserved area

## **FY11: 19 physicians placed**

13 in primary care, 6 in specialty care

8 placed in rural and underserved areas

# The Future.

Continue efforts toward data-driven, strategic workforce development

Continue broad stakeholder involvement

Leverage, sustain, and expand capacity of existing proven programs

Continue to leverage federal, state, and private resources

Strengthen workforce links to Blueprint, health care reform, and inter professional collaboration

