

**Proposal for Provider Workforce Development Grants to Prepare For, Respond To
and Mitigate the Impact of COVID 19**

The Health Care Provider Coalition requests CRF dollars be allocated to assist providers address workforce needs to prepare for, respond to and mitigate the ongoing and anticipated future impacts of COVID 19. The Coalition consists of the following members: Vermont Association of Hospitals and Health Systems; Vermont Health Care Association (long-term care facilities); VNAs of Vermont, Bayada Home Health & Hospice; Vermont Care Partners; Vermont Medical Society; HealthFirst Independent Practice Association; Bi-State Primary Care Association; Vermont Dental Society; Association of Adult Days.

In recent surveys of providers, *preliminary and incomplete* data indicates that COVID 19 has had a negative impact on an already stressed health care workforce beyond the pre-pandemic workforce shortage. Not all sectors have had time to collect data at this time, but some examples of the impact are provided below.

In a survey of 96 of roughly 170 long-term care facilities, providers reported staffing losses due to the following: staff fear of COVID 19; lack of child care due to COVID 19 shut downs; need to home school children due to COVID 19 school closures; staff member contracted COVID 19; family member contracted COVID 19; on medical advice due to age or underlying health condition.

- Personal care attendants (PCA)/licensed nurse aides (LNA) 325
- LPN 46
- RN 33
- APRN 3
- Medical Director 1

Long-term care facilities and home health agencies have identified an immediate need for 400 PCAs and 300 LNAs given the loss of staff and increasing demands in a COVID 19 environment.

In a recent survey of 45 physician practices, loss of physicians, nurses and support staff for COVID 19 related reasons included: early retirement due to COVID19; provider/staff is high risk for contracting COVID 19; lack of child care/school age children; unable to sustain COVID 19 related burdens. Data demonstrates the following:

- Current loss of physicians 23 FTE
- Anticipated additional loss of physicians 17 FTE
- Current loss of nurses, medical assistants/support staff 125 FTE
- Anticipated additional loss of nurses, medical assistants/support staff 127 FTE

The Coalition recommends creation of a workforce development grant fund, perhaps administered through the Dept. of Labor. All health care providers (including hospitals, physician practices, long-term care facilities, home health agencies, adult days, mental health/substance abuse providers, FQHCs and dental providers), would be eligible to apply for one-time funds to support initiatives including but not limited to:

Staff training/re-training/cross-training: to ensure providers can meet ongoing staffing requirements in response to COVID 19 and prepare for future increases in COVID 19 activity, funds could support training of new hires, as well as cross-training and “up-skilling” of staff to allow for redeployment to critical areas of need during COVID 19 response. In addition, training funds are needed to support staff with continuously changing public health guidance, infection control strategies, telehealth and other clinical skills needed to appropriately support patients, residents and clients in the COVID 19 environment. All provider types have identified significant needs in this area.

Estimated Costs:

• PCA training	\$400,000
• LNA training	\$750,000
• New nursing staff training/onboarding	\$810,000
• Cross-training of staff to meet shifting demands	\$2,500,000
• Infection prevention & COVID19 related training	\$750,000

TOTAL Estimated: **\$5,210,000**

Staff recruitment and retention: to ensure adequate staffing to meet the ongoing demands of responding to COVID 19 and prepare for future increases in COVID 19 activity, providers could apply for funds to support new hires with student loan debt directly, or to support the employer match needed to access AHEC loan repayment dollars; employer provided tuition assistance for existing staff to enroll in advanced programs.

Estimated Costs:

• Loan Repayment for MD/APRN/ advanced degree providers	\$700,000
• Loan Repayment for RN	\$500,000
• Loan Repayment for LPN	\$250,000
• Tuition assistance for staff to enroll in LPN/RN program	\$1,000,000

TOTAL Estimated: **\$2,450,000**

Total Estimated Cost:

These estimates are very rough given the quick timeframe the group had to evaluate the need. Not all organizations were able to provide an immediate or thorough needs assessment. What is clear is that the need for health care workforce and training funds are abundant in the COVID 19 health care environment. A grant process would allow providers to apply for funds and tailor their requests to their individual need.

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To retain existing staff during the *ongoing* response to COVID 19, passage of the hazard pay bill is critical. While the level of viral activity may ebb and flow over time, our frontline health care workers are preparing for, responding to and mitigating COVID 19 every day. The response to COVID 19 will be ongoing for the foreseeable future. They must be prepared at all times to encounter and deal with the

impacts of this virus. With similar initiatives in surrounding states, as well as the availability of generous UI benefits, recognition that these frontline health care workers are on the job everyday is critical to retaining them in our workforce.