

Workforce Committee

Tuesday, October 10, 2017 1:00 - 2:00 PM

Chair, Dean Germano

Agenda

	ORDER OF BUSINESS	RELEVANT ATTACHMENTS	REPORTING	ACTION A = Approval D = Discussion I = Information
l.	Call to Order			А
II.	Approval of Agenda	AgendaExecutive Summary	Dean Germano	А
III.	Approval of Minutes	July 13 Meeting Minutes	Dean Germano	А
IV.	California Future Health Workforce Commission	Guest Speaker	Jeff Oxendine Co-Director of the CA Future Health Workforce Commission	D
V.	Goal 7: Serving as a Catalyst and Coordinator	 UCSF HealthForce Research Update CPCA Convening Update and Educational Campaign Concept 	Beth Malinowski	D
VI.	Goal 6: Growing and Diversifying Health Center Professions	Guest Speaker: A.T. Still Partnership and Grow Your Own Commitment	Nicole Mosqueda, Director of Programs & Development at Camarena Health	D
VII.	Adjourn		Dean Germano	А





Date: September 28, 2017

To: Workforce Committee

WORKFORCE COMMITTEE / EXECUTIVE SUMMARY

Workforce Strategic Plan Activities

- California Future Health Workforce Commission
 - o CPCA's close relationship with California's leading health philanthropies contributed to the development of a California Future Health Workforce Commission. Among the Commission participants are Dean Germano and Jane Garcia.
- Goal 7: Serving as a Catalyst and Coordinator
 - o UCSF HealthForce Research Update Report #3, *Primary Care Workforce Strategies*, a look at promising practices from across the country, is still in draft form, but will hopefully be released by October 2017.
- CPCA Convening Update and Educational Campaign Concept
 - As reported in July, members of the Workforce Policy Coalition agreed to prioritize the following three workforce policy areas and formed subcommittees to further discuss possible policy solutions in each area: Priming the Primary Care Pipeline; Residency Redesign; and Advocacy
 - o The full Healthcare Workforce Policy Coalition will meet one final time this calendar year on Monday, November 6.
- Goal 3: Recruitment and Goal 5: Retention Salary Survey Update
 - o Nearly 140 community health centers participated in the 2017 Compensation and Benefits Survey, an 11% increase from last year. Survey data is currently being reviewed and analyzed by Gallagher Surveys.
- Federal Policy NHSC
 - o At time of writing, Congress is yet to take sufficient action to sustain the National Health Service Corp. NHSC program funding expired on 9-30-2017.
- Goal 2: Advancing Primary Care Training Song-Brown Update
 - o With 48 family medicine and 29 PCR (IM, OB/GYN, and Peds) applications received this year, OSHPD staff have confirmed that this is the largest number of applications the Song-Brown Program has ever received.
- Federal Policy Update Teaching Health Centers
 - o At time of writing, Congress is yet to take sufficient action to sustain the Teaching Health Center Graduate Medical Education (THCGME) program. THCGME program funding expired on 9-30-2017.
- Goal 1: Promoting Community-based Primary Care Kaiser Medical School Update
 - o Kaiser Permanente School of Medicine (KP SOM) recently appointed Mark A. Schuster as their Founding Dean and CEO.

CALIFORNIA PRIMARY CARE ASSOCIATION Workforce Committee

July 13, 2017 2:00 – 3:00 PM

Members: Jane Garcia – Substitute Chair, Antonio Alatorre, Doreen Bradshaw, Trisha

Cooke, Lynne Dorroh-Watson, Cathy Frey, Nik Gupta, Deena Lahn, David Lavine, Deborah Lerner, Louise McCarthy, Scott McFarland, Nicole Mosqueda, Danielle Myers, Christine Noguera, Carole Press, Tim Rine, Melinda Rivera,

Corinne Sanchez, Mary Szecsey, David B. Vliet

Guests: Robin Affrime, Steve Heath, Tanir Ami, Greg Garrett, Rachel Farrell, Kevin

Mattson, Ellen Pierad, Wunna Mine, Britta Guerrero, Susie Foster, S Bautista, Alicia Mardini, Terri Stratton, Alex Armstrong, Terri Vise, Tracy Ream, Jill

Damian, Lucinda Bazile, Rose Tam, Esen Kurdoglu, Maria Paz

Staff: Carmela Castellano-Garcia, Beth Malinowski, Nataly Diaz, Kelley Aldrich,

Andie Patterson, Victor Christy, Andrea Chavez, Liz Oseguera, Jana Castillo,

Jodi Samuels

Call to Order

The meeting was called to order by the chair at 2:05 pm.

Approval of Agenda

A motion was made and seconded to approve the agenda as written. The motion carried.

Approval of Minutes

A motion was made and seconded to approve the minutes as written. The motion carried.

<u>Workforce Priority 3 – Partnerships – California Board of Registered Nursing: Building Relationships and Addressing Licensing Challenges</u>

Nataly Diaz introduced guest speaker Joseph Morris, Director of the California Board of Registered Nursing.

Mr. Morris spoke to the committee about how the California Board of Registered Nursing (BRN) is developing a relationship with CPCA to address the provider licensing challenges that health centers have encountered while recruiting both new and out-of-state nurses.

Mr. Morris is very committed to the following:

- improving the licensing process (minimum 30 days)
- helping health agencies gear up with job opportunities
- prioritizing feedback on how to improve processes
- to be 100% compliant with schools
- looking into issues with out of state institutions
 - o tracking documentation/transcripts

- o improving the time it takes for fingerprinting with both DOJ and FBI
- o fraud
- Transitioning from the plastic nursing card to the BreEZe System (online Google platform).

Workforce Priority 8 – Workforce Policy Convening

Beth Malinowski gave members an update on the successful workforce policy (re) convening that took place on June 15 and focused on further refinement of the identified policy solutions and initial conversations on the early steps of the three subcommittees.

Workforce Priority 2 – 2017 Statewide Community Clinic and Health Center Workforce Evaluation

Nataly updated members on the ongoing work of RAC and CPCA's Workforce Committee, who are currently working with the University of California, Davis (UCD) to conduct a second community clinic and health center workforce evaluation to understand workforce priorities, staffing needs, health professions training, and retention/recruitment challenges in California community health centers. This workforce evaluation will utilize a mixed method approach to obtain a better understanding of CHC workforce priorities, needs, and challenges. Consortia and UCD CDHW staff will conduct qualitative interviews with various community health center leaders located in urban and rural medically underserved areas.

<u>Workforce Priority 3 – Partnerships – California Community Colleges</u>

Shadi Kanaan explained to members how CPCA is looking to bring the community college partnership to a new level by exploring ways to improve the Medical Assistant curriculum and programs across its campuses; develop a community college to medical school pipeline, and contribute to the Community College Strategic Plan.

Workforce Priority 4 – Residency Training

Beth Malinowski was happy to announce that thanks to a strong coalition effort, led by CaliforniaHealth+ Advocates, The California State Budget (FY17-18) passed by the legislature includes a recommitment to primary care residency funding with the reinstatement of the three year \$100 million investment.

Workforce Priority 6 – Medical School

Mike Witte shared that California's regional clinic consortia and the California Primary Care Association (CPCA) are working with the University of California, Davis (UCD) to conduct a second community clinic and health center workforce evaluation to understand workforce priorities, staffing needs, health professions training, and retention/recruitment challenges in California community health centers.

Adjourn

The meeting was adjourned at 3:06 pm.

Submitted by Kelley Aldrich



Date: September 22, 2017

To: Workforce Committee

From: Nataly Diaz, Senior Program Coordinator; Beth Malinowski, Deputy Director of Government

Affairs; Val Sheehan, Development and External Relations Director; Christina Hicks, Deputy Director of Program Development and Evaluation; Bao Xiong, Associate Director of Health

Center Operations; and Liz Oseguera, Senior Policy Analyst

Re: Workforce Strategic Plan Update

I. Introduction

In May, the CPCA Board of Directors approved the 2017-2020 Strategic Plan, which includes a strong commitment to develop of a robust healthcare workforce that is responsive to and reflective of California's diverse communities. The work plan includes several goals that are incorporated as headers in this new workforce committee memo template.

II. CPCA Workforce Strategic Plan Activities

Promoting Community-Based Primary Care Workforce Visibility

UCSF Primary Care Workforce Research

CPCA continues to work with UCSF's Healthforce Center on a series of primary care workforce reports funded by Kaiser Permanente Community Benefit. Report #1, *Overview of Primary Care Workforce in California Today*, a snapshot of California's primary care workforce, was published in Feb. 2017. Report #2, *Forecast of Primary Care Workforce in California for years 2021 and 2026*, a projection of primary care providers in the next decade, was released on August 15, 2017. The release of the second report and its findings were picked up by the following media: SF Business Times and San Jose Mercury News/Bay Area News Group. CPCA President and CEO, Carmela Castellano-Garcia, was interviewed by the SF Business Times. Both KCBS radio and KTVU TV aired stories about the report's findings as well. Report #3, *Primary Care Workforce Strategies*, a look at promising practices from across the country, is still in draft form, but will hopefully be released by October 2017.

California Community Colleges

In collaboration with the Chancellor's Office and Young Invincibles, the Foundation for California Community Colleges created *Here to Career*. This mobile application helps low-income students and their families find high-demand career opportunities and tools to be successful. Users can view salary information and find a local community college with a program to help them achieve their goals. CPCA is working with Young Invincibles to disseminate information about the mobile application and encourages health centers to share this resource with their staff and community.

Advancing Primary Care Provider and Staff Training

Federal Advocacy – THCGME Program

Unless Congress enacts new legislation, the Teaching Health Center Graduate Medical Education (THCGME) program will expire on September 30, 2017.

Three bills have been introduced to address the funding cliff facing the THCGME program. None of these bills are currently expected to pass, but all of them are seen as important vehicles for conversation.

The Training the Next Generation of Primary Care Doctors Act of 2017, H.R. 3394 (McMorris Rodgers-Tsongas), and S. 1754 (Collins-Tester), its companion bill in the Senate, are aimed at sustaining this important program. These bills were introduced shortly before the August recess and, at time of writing, they have 68 bipartisan cosponsors in the House (H.R. 3394) and 8 (S. 1754) in the Senate. These two bills reauthorize THCGME for three years (FY2018-FY2020) and are intended to preserve the current level of residents at the 57 existing Teaching Health Centers. The bills appropriate \$116.5 million/year for three years for training residents (based on proposed \$157,000 per resident allocation for all 742 current THC GME residency slots). This funding is more than what was provided in MACRA (2015), which inadequately funded the residencies and led many Centers to reduce or eliminate new recruitment. The bills also appropriate \$29 million over two years to permit establishment of new Teaching Health Centers and new programs at existing Teaching Health Centers. Priority will be given to applicants in health professional shortage areas, medically underserved areas, and rural areas. Expansion funding will cover up to a total of 60 new residents in FY2019 and 120 new residents in FY2020 (two classes of 60 residents).

In addition to these bill efforts, it should also be noted that Congressman Jeff Denham (R-Modesto) introduced the Comprehensive Additional Residency Expansion Act (HR 3451), with the support of California Medical Association, just days after HR 3394 (McMorris Rodgers-Tsongas) was introduced. Aimed at building onto HR 3394, this bill would add an additional 240 residency slots to train new physicians and authorize 10 new teaching health centers. Focused on investments in communities across the country that are like California's Central Valley, it would also require the new teaching health centers be located in areas with a disproportionate share (35% or higher) of Medicaid patients.

As Congress continues to work towards an agreement on a permanent legislative solution for the program, some in Congress have proposed using other vehicles to provide temporary funding. Among the temporary funding being considered, is a three month extension of funding for the program at the current funding level (\$60 million).

The American Association of Teaching Health Centers (AATHC) continues to stress that a three month extension at the current funding level is not sustainable. Our partners at the American Association of Teaching Health Centers are urging you, and your resident, to participate in these important advocacy efforts – sustainable per resident funding is

needed now. For more information on this development or find out how you can get involved, contact Nataly Diaz at ndiaz@cpca.org.

2017 Song Brown Family Medicine and Primary Care Residency Application

The Song-Brown Healthcare Workforce Training Program received a \$33M installment of new funds this year due to a strong coalition effort led by CaliforniaHealth+ Advocates. The Family Medicine/Primary Care Residency application opened mid-August and closed mid-September. Seventy-seven Primary Care Residency applications were received, which included ten applications for new programs. With 48 family medicine and 29 PCR (IM, OB/GYN, and Peds) applications received this year, OSHPD staff have confirmed that this is the largest number of applications the program has ever received.

Awards will be determined during the November 29-30, 2017 Song Brown meeting in Southern California.

• Expanding Recruitment Support

Federal Advocacy – National Health Service Corp Program

Today, the program is funded at \$310 million, but these funds will expire on September 30, 2017. Congress is yet to take action to extend funding and the NHSC trust fund now faces elimination. This September, we are calling on congress to take crucial actions to continue to fund and grow NHSC to ensure access to care for millions of people living in shortage areas. Representatives Chris Stewart (R-UT) and G.K. Butterfield (D-NC) sent a bipartisan letter to the House Energy & Commerce Committee leadership in support of the National Health Service Corps Program (NHSC). The letter was cosigned by 47 House Members. Thank you to all our advocates who urged their Representative to sign on. At time of writing, legislation is yet to move to support continued funding for NHSC. Without new funding, no new awards will be allocated. Funds will continue for those persons currently in the program.

Reducing Recruitment Barriers Associated with Primary Care Providers

J-1 and H1-B Visas

At the direction of members, CPCA partnered with Sid Chary from the Chary Law Firm P.C. to develop an informational document regarding J-1 and H1-B Visas. Specifically, this document informs members of the different programs that a health center can utilize when applying to hire providers through a J-1 and H1-B visa. For more information, please refer the resource section below.

• Supporting Effective Retention Strategies

2017 Gallagher Integrated Physician Compensation Survey

The 2017 Gallagher Integrated Physician Compensation and Production Survey was distributed to all 26 participating community health centers that participated in the spring survey. This survey was separate and distinct from the 2017 CPCA Salary Survey. The final report provides valuable insight regarding clinical and total cash compensation paid, productivity, pay practices, and market trends relating to physician compensation. Gallagher Integrated is currently working on a custom, California health center physician compensation report based on the data that was collected by the 26 participating health

centers. This custom report will be distributed to participating health center organizations in October 2017.

o 2017 CPCA Salary Survey

Survey participation and response rates have been steadily increasing over the past few years and reached an all-time high this year. Nearly 140 community health centers participated in the 2017 Compensation and Benefits Survey, an 11% increase from last year. Survey data is currently being reviewed and analyzed by Gallagher Surveys. Participating health center organizations will receive a complimentary copy of the statewide report, in addition to an individualized report that will show their compensation data compared to the whole sample, their consortium, their region and operating budget group. Both the individual and statewide reports will be distributed accordingly in December 2017. The final statewide report will be available for purchase by non-participants on the CPCA website once it is released.

Growing and Diversifying the Health Professions

o Kaiser Permanente School of Medicine

Kaiser Permanente School of Medicine (KP SOM) recently appointed Mark A. Schuster as their Founding Dean and CEO. As a Professor of Pediatrics, researcher, educator and health policy expert, he will oversee the day-to-day operations and school's unique direction of developing community health physician leaders. CPCA was invited to attend the KP SOM Founding Dean Welcome Reception, and will discuss with Mark the importance of health center partnerships. During this reception, CPCA will also meet the new members of the KP SOM Board of Directors, which includes multidisciplinary professionals from inside and outside Kaiser Permanente.

Area Health Education Centers (AHEC)

The CA Area Health Education Center (AHEC) received federal funding for FY2017-2018 to continue pipeline development program activities and develop a California AHEC Community Health Experience (CACHE). CACHE will bring together teams of health professions students for a longitudinal clinical experience at a community health center. CPCA continues to support the CA AHEC and the regional centers with the renewal of a MOU between CPCA, AHEC, the Office of Statewide Health Planning and Development (OSHPD), and the Statewide Office of Rural Health. This MOU is intended to foster 1) collaboration; 2) technical assistance to community organizations wishing to expand access to primary care for underserved populations; 3) assessment of needs and sharing data; 4) workforce development for the National Health Service Corps and health center network; and 5) supporting shortage area designation.

Association of Clinicians for the Underserved (ACU)

With the support of HRSA's Bureau of Primary Health Care, the Association of Clinicians for the Underserved is fielding a short assessment to gather information on health centers' current experiences with health professions training activities. The information collected will help ACU identify potential areas for resources, training, and technical assistance. This assessment takes approximately 15 minutes to complete and should be completed by all health centers regardless of whether or not they are currently training health professions

students or residents. Please complete the assessment online by Friday, September 22, 2017. The link to the ACU assessment can be found in the resources section of this memo.

Serving as Catalyst and Coordinator Between Local, Statewide, and National Workforce Efforts

Workforce Policy Coalition

As reported in July, members of the Workforce Policy Coalition agreed to prioritize the following three workforce policy areas and formed subcommittees to further discuss possible policy solutions in each area:

- Priming the Primary Care Pipeline
- Residency Redesign
- Advocacy

The Advocacy subcommittee was the first to meet after the July Coalition meeting, and discussed creating a joint Talking Points document that could be used to unify messaging about the primary care workforce shortage with a variety of constituents. CPCA staff collected comments from five members of the subcommittee and is currently drafting the talking points document for review.

The *Priming the Primary Care Pipeline subcommittee* decided to break into three smaller subcommittees to focus on 1) conducting a pipeline program inventory, 2) fostering relationships with workforce development boards, and 3) increasing collegiate support and developing state funding sources for California post-baccalaureate programs. Each of these smaller groups will be reporting back to the Pipeline subcommittee on October 16.

Finally the *Residency Redesign subcommittee*, over the course of two conference calls, has agreed to prioritize an educational campaign around the importance of residency redesign. On the most recent conference call, subcommittee members reviewed a potential educational campaign structure that at the core, emphasizes the primary care workforce shortage, and seeks to tie together discussions at the pipeline and advocacy subcommittee levels. The campaign would not only highlight residency redesign programs, but also highlight increased pipeline exposure, and general efforts to expand the healthcare workforce as strategies to address the workforce shortage. Staff will make edits to this campaign structure and will bring together the Residency Subcommittee one more time in October to finalize. This campaign structure will also be shared with each of the other two subcommittees to 1) garner buy-in to the model and 2) generate feedback on specific messaging pertinent to their discussions, and 3) determine resources available for such an endeavor.

The full Healthcare Workforce Policy Coalition will meet one final time this calendar year on Monday, November 6. The goal of this meeting is to hear about issues that have been prioritized by each of the three subcommittees, further discuss an educational campaign strategy, and to subsequently identify possible legislative action that the Coalition would like to draft/sponsor in 2018.

o California Future Health Workforce Commission BM

CPCA's close relationship with California's leading health philanthropies contributed to the development of a California Future Health Workforce Commission. This Commission compliments our Workforce Policy Convening work, and will draft a statewide blueprint to bolster the health workforce. CPCA and our health centers will play an active role on the Commission and Technical Advisory Committee, and share their expertise to inform dialogue and decision-making of the Commission. Among the Commission participants are Dean Germano (Shasta Community Health Center) and Jane Garcia (La Clinica de la Raza). Beth Malinowski also serves as a member of their Technical Advisory Committee (TAC). The TAC held its first meeting in August and the Commission will be holding its first meeting this fall.

III. Resources

- California Future Health Workforce Commission https://futurehealthworkforce.org/
- ACU Assessment of Health Professions Training in Health Centers https://www.surveymonkey.com/r/7F3NVKL
- Foreign Provider Visa Program: J-1 and H1-B Visa Overview https://d3n8a8pro7vhmx.cloudfront.net/capca/pages/2108/attachments/original/15070533

 97/2017.10.03 Visa 2 Pager Final.pdf?1507053397