

## OPEN MEETING MINUTES

Name of Governmental Body: <b>Healthcare Workforce Task Force</b>		Attending: <b>Rick Abrams, Danielle Cook, Sharon Cox, Gina Dennik-Champion, Amy Domeyer-Klenske, Eric Humphrey, Dakota Kaiser; Elsbeth Kalendarian, Thomas Kernozek, Shawn Lerch, Joyce Mallory; Barbara Nichols, Sondra Norder; Heather Schimmers, Robyn Woolever, Sara Rodriguez, Amy Pechacek, Kirsten Johnson, Dan Hereth</b>	
Date: <b>3/13/2024</b>	Time Started: <b>1:09 p.m.</b>	Time Ended: <b>3:56 p.m.</b>	Absent: <b>Tom Boelter, Kelly Buchholtz, Laura Gould, Wendy Molaska, John Raymond, Janet Zander, Stacey Zellmer</b>
Location: <b>Hill Farms Office, Madison, WI</b>		Presiding Officer: <b>Lieutenant Governor Rodriguez</b>	
<b>Minutes</b>			

- Roll call
- Welcome by Lieutenant Governor Rodriguez
  - Reviewed executive order
    - Action plan deadline: September 1
    - Timeline and goals
  - Defined next steps
- Introductions by Dr. Hannah Maxey
  - Dr. Maxey shared her background and explained how she will help facilitate these meetings
    - Courtney Medlock also works with her, may see emails from her
  - Introductions: Went around the room where everyone shared in one minute or less their number one thing they want the task force to accomplish.
    - Rodriguez: Innovative ways to help our task force
    - Pechacek: Harness expertise in this room
    - Norder: Steps to elevate the profession; viable options; career ladder
    - Woolever: Learning from health systems and collaborating; sharing unique challenges facing pediatric patients; also ones in home setting; find those caregivers because they are not in hospital setting; seeing them return to the hospital and extending their stay
    - Nichols: Recognize the annual surveys of registered nurses; review all schools of nursing; diversity degree nursing workforce; provide facts not emotion what workforce looks like outside of hospitals; 50% are in hospitals, 50% are in a community profession that includes registered and LPNs; bodacious, unapologetic advocate for largest health profession in the state
    - Humphrey: Ways to deliver care differently; make sure have skills and abilities to match care delivery models that will be prevalent coming up
    - Kernozek: Broaden discussion relative to other professions mentioned in presentation; education and training for students; students can offer solutions; we need partners
    - Domeyer-Klenske: Reproductive health policy directly impacting OB/GYN space; also impacting morbidity and mortality of pregnant patients
    - Cox: Nurse and physician care number one priority; how to achieve safe care
    - Abrams: Agree with what said; we all come with unique perspectives; to a degree need to leave unique perspectives and fashion a plan for Wisconsin; think beyond training and education; CNA-can't ignore needs; broaden our perspective; introduced colleague Kate Battiato

- Mallory: How use talent, training, experience of military who have enormous amount of ability; barriers they face pushes them away; huge talent need to tap into
  - Kaiser: Open access to health care professions while maintaining quality
  - Lerch: What's our baseline and how we add to that; set aside biases for true collaboration, here to transform our workforce
  - Schimmers: Figure out how to remove barriers to deliver care close to home
  - Kalenderian: Lack of access in medical oral health connection; be creative about that and pragmatic
  - Cook: Allied health is passion; getting exposure to allied health fields; not just nursing and alternate pathways; seen double apprenticeships in health care
  - Dennik-Champion: Ideas we can sustain; focus on innovation of how we deliver care, where it gets delivered; in education as well as AI and technology to support practice in all our worlds; respect diversity of workforce and pay attention to equity issues; just completed nurse survey of workplace violence, how to shore up and support our workforce
  - Hereth: Quality in terms of safety; licensing based on minimum regulatory qualifications, have to balance licensing for minimum competency; how do those come together; demonstrating competency; training and employment, not forget retention piece; turnover in nursing profession is driving workforce shortage, how prevent that turnover with a sustainable workplace
  - Johnson: DHS serves as a change agent; how can we learn from all of you and each sector; figure out administratively and in policy to change and solve this challenge together
- Agency reports
  - **DWD:** Secretary Pechacek shared a presentation about high level workforce initiatives about what DWD has been doing and what they can build on.
    - Reviewed key stats
      - Last year saw reversal of net migration trends in the state
    - Evers Administration investments in workforce solutions
      - ARPA funding
        - Invested in several initiatives
          - Specific to health care: \$14.6M in workforce innovation grants awarded last year; many projects continuing now
          - \$20M worker advancement initiative: wraparound care; help with opioid addiction; housing insecurity; rideshare; building childcare facilities and supplement their staffing
      - Meeting people where they're at; coming into communities; what it takes in a worker shortage to bring everyone along with us; there's a seat for everyone just need to help them get there
      - Worker connection program: Milwaukee and Green Bay; career counseling, accountability and advocacy; address largest barriers we are seeing
      - Apprenticeship programs
        - First in nation to have one
        - Record number of apprenticeships; not just for trades anymore
        - How to continue to expand
    - Dennis Winters, DWD chief economist shared what the data is telling us about our workforce
      - Nonfarm:

- Grey bar = recession
- Wavy data is non-seasonally adjusted data; adjust mathematically
- Yellow = growth trend
- We're at a new high for jobs; high productivity in the state
- Unemployment stats
  - Low unemployment rate; why we are seeing labor constraints
- Workforce growth
  - Population continues to grow
  - Blue line is workforce, flattening out
    - Baby boomers aging out at 10K per day
    - Huge change in economic structure because never had to worry about human resource before
    - Everyone is having this problem
- Health care employment
  - Employment by different industries (multiple lines)
  - Most have reached high levels except skilled and elder nurses; hospitals have recovered and continue to grow
- Earnings
  - How wages have climbed and climbed quickly
  - Need to consider how employers compete with this
- Projections
- Job openings
  - Blue = openings, those exiting out of workforce
  - Orange = transfers, going to another occupation
  - Green = growth in occupation
  - Add all up that's how many openings we'll have
- Behavioral health
  - If you want a job in these fields, you're going to get one
  - If you're looking to fill a job it might take longer
- Preparedness
  - We have the best nursing data in the world
    - Statute passed that all nurses have to fill out a survey
  - 2010: What look like when we first did the survey
  - Now, we don't have new nurses coming in
- RN personal health
  - Measure of stress levels
  - Higher stress in younger ages
- Top reasons for changing careers
  - Not enough promotion, career advancement
  - Retired
  - Dissatisfaction with previous position
- Have a lot more data behind this, just presented on key findings today
- **DHS:** Secretary Johnson shared a presentation about the current state of health care, programs DHS manages to support the workforce, and previous efforts.
  - Current state, what hearing, what we've tried to do
  - Impact of workforce shortage
    - Hospital systems
      - Wisconsin Hospital Association just release workforce report

- Waitlist for those with an intellectually disability is 1200 in oral health care
- Long-term care providers
  - Seeing significant need
  - Started a customer service initiative with providers to help address increase in complaints
- Mental and behavioral health providers
  - Had challenges before pandemic
  - High need for this type of care in our state
- DHS facilities
  - Facing our own challenges with hiring staff
  - The people in these facilities have mental health challenges that must be managed around the clock
- Communities
  - Looking at the social determinants of health; how do we keep people healthy by ensuring housing and transportation needs are met; while finding long-term sustainability
  - How do we drive people into these professions
- DHS initiatives
  - WisCaregiver Careers Programs
    - Free training
    - Creating pipeline to workforce
    - Intention is to grow these programs; need funding to do this
  - Recruitment and retention grants
    - How to creatively staff our facilities
    - Capri Communities example
      - Was only getting 10-15 applicants; once changed to 4-for-5 workweek got 250 applicants
    - Works, but how do we sustain it
  - Direct care worker minimum rate
    - Currently with the Joint Finance Committee
- Previous efforts
  - Medicaid expansion is a priority; how do we get this done
    - Would provide additional coverage for 89,000 Wisconsinites
- How we connect
  - Policies we can help with
- **DSPS:** Secretary Hereth shared a presentation about what they are doing to recruit, retain, and grow the workforce through better data and improved flexibility.
  - National Minimum Data Set
    - Collect across all professions
    - Utah did this for their mental health professions; thought they had one level of shortage; going into different levels; realized shortage was 3-4 times greater than workforce data
    - Allows us to drill down where shortages exist and what to do to shore up
  - Fiscal year '23 licensed people 53% more quickly
    - Issued record number of licenses
      - Vast majority of these are health care
      - Nursing we typically license 3-4,000/year
        - Licensed 8,000 in '23
      - Still have work to do

- Partnering with education to create a soft hand off
      - LicensE educator access portal (LEAP)
        - Only state in nation who has this
        - Gets people on clinic floor more quickly
      - Expanded partnerships thru Accelerate Wisconsin
        - Post-graduate testing delays; how align processes closer with graduation for transition
        - Work with nursing schools for nurses to test early
        - Partner with pharmacies to align w/ week of graduation
      - Marquette School partnership
        - Dental graduates; identify pathways for dental graduates
        - Legislature passed international graduate, sent to Governor's desk
    - Recruitment and retention
      - Improving licensing portability and flexibility
      - Adopt every possible compact, except social workers
      - Faster licensing between states; entered into agreement w/ Michigan
- Took break at 2:40 p.m.
- Resumed meeting at 2:58 p.m.
- Presentation from Dr. Maxey
  - Need to consider we will need innovation that is flexible and adaptable – it will be changing all the time; we are not going to reach a stasis; the situation will continue to evolve and change
  - Will provide the national context and Wisconsin-specific data
  - Consider areas where we need more information to determine our focus
  - Emerging workforce issues (not new)
    - Shortages: How Wisconsin compares to other states
    - Nationally: Not enough faculty to train the workforce
    - Over 50% of Wisconsin is federally designated as a **mental health provider shortage**
    - Nationally: Majority of license types require master's degree or higher for behavioral health
      - Is lack of entry level jobs making it so less providers are in the field?
      - Many states looking at more entry level behavioral health workers
      - The most difficult piece is providing practicum, having professionals supervise new graduates
        - No pathway to go into supervised practice; many states are discussing this
      - Majority of behavioral health workers have a master's in social work
    - **Maternity care**
      - Maternity care deserts declared federally in northern Wisconsin
    - **Long-term care**
      - Shortage crisis for all levels of workers
      - Demand in facilities and homes is going to grow exponentially over next several decades
      - We know there are severe shortages and they will increase
      - Career pathways
        - Indiana reviewed high turnover and vacancy: looked at how to develop and encourage career pathways and move CNA's on

- Consideration that a CNA may not want to be an RN; state collected data on this and found the diversity numbers were double; created pathways
- **Oral health**
- **Emergency medical services (EMS)**
  - Shoutout to Wisconsin EMS training programs; above national average
- Discussion led by Dr. Maxey
  - Where are Wisconsin's greatest health workforce challenges?
  - Where has work already been done the task force can elevate and progress?
  - How might the top priorities be grouped to organize our efforts?
    - Profession/sector?
    - Topic/strategy?
  - Dennik-Champion: Nurse faculty shortage; Joint Finance Committee issued \$5M on to next \$5M for nurses; range in forgiveness is \$50K; nurse needs to work in any school of nursing for three years; response has been encouraging; model for others
  - Abrams: Look at info shared today, take time to digest, and develop thoughts
  - Hereth: More data when it comes to growing recruitment and retention; discuss our demographic challenges; what is our biggest chunk of opportunity; how develop solutions
  - Lerch: Didn't hear data on what is going to transition over next decade; what jobs will be eliminated or decrease
  - Nichols: Data on recruitment and retention of unrepresented groups; address concerns with equity
  - Rodriguez: Additional data on shortages overall and education programs; even if we fill every job is that enough; what can the state do to shore up programs; do we need more programs; look at regionally; we know where people get their education is where they are likely to stay and practice; how does data butt up against each other; how not to make shortage worse
  - Maxey: She and Collen are able to meet with anyone to follow up
  - Schimmers: Didn't talk about long-term care impact at hospitals; Gunderson has 200 patients they can't move right now
  - Humphrey: Looking at other areas that support the RNs; if all nurses could have license problem is they're performing surg tech and other, do what they know how to do
  - For additional comments, fill out survey we will be sending you
- Public comments
  - None
- Next meeting April 4
- Adjourned

Prepared by: Leeann Duwe on 3/13/24.

These minutes were approved by the Governor's Task Force on the Healthcare Workforce on 4/4/24.