NC Center on the Workforce for Health
January 31, 2022 Meeting Summary

Hugh Tilson (NC AHEC) convened the meeting at 1:30 with a welcome, a description of the goals of the meeting, its agenda and announcement of two upcoming meetings:

- February 14th, from 10:00 – 11:00 the NC Chamber Foundation and the Center will host a follow-up meeting to discuss Talent Pipeline Management and the experiences of other states (Kentucky and Vermont) utilizing this methodology for health care.
- February 6th, from 3:00 – 4:00 myFutureNC will discuss the top findings from NC's State of Education Attainment Report and proposed solutions.

Hugh Tilson introduced a panel to discuss health workforce related topics at the General Assembly. The legislature convened on January 11th and is beginning its substantive work. The panel included Matt Gross (NCDHHS), Lori Byrd (NC Community College System), David English (UNC System), Heather Burkhardt (NC Coalition on Aging) and Nicholle Karim (NCHA).

The panel responded to the following:

- Describe your sense of how the legislature will prioritize health workforce
- Describe your organization's health workforce priorities for the session
- React to the inventory of legislative priorities gathered from Center participants
- Identify how the Center might appropriately respond to legislative action
- Respond to any questions from the meeting participants
- Discuss anything else you think is relevant

The panelists believed that workforce, especially health workforce, would be an important area of discussion at the legislature this session. They thought that Medicaid expansion and hospital payments (HASP) would be a primary topic and that health workforce would be related to those conversations. They all have heard from legislators that their constituents are concerned about health workforce shortages, particularly for nurses and for direct care workers, and that there is a widespread interest in developing actionable solutions.

The panelists all agreed that Medicaid expansion was a priority. Education and training of the health workforce, especially but not exclusively nurses, was a priority and addressing faculty shortages was an integral component of those priorities. They also discussed some specific concerns and ideas:
- Raising wages for direct care workers is important, but raises challenges with "benefits cliffs" (loss of income eligibility for valuable child care and other subsidized services) that concern many workers.
- Community colleges are seeing strong demand for nursing, but also medical assistants and radiology techs.

- Some hospitals are developing a life-course approach, for example, with veteran nurses serving in hybrid roles – at the bedside and also as a nursing instructor.

When asked what one thing they would prioritize there was general consensus among panelists on Medicaid expansion and HASP, nursing faculty salaries (especially for Community College faculty), addressing the Direct Care Workforce needs through Medicaid payments and addressing workplace violence.

Panelists agreed that there was an important role for the NC Center on the Workforce for Health, and suggested these are valuable aspects of the Center's contribution:
- To coordinate and align to the greatest extent possible on priorities.
- Help elected officials to understand what strategies are being implemented in other states and the results they are seeing.
- Convening and thought leadership.
- Being seen as a trusted source of data and information to catalyze solution development.

After the panel, Kathy Colville (NCIOM) and Michelle Ries (NCIOM) led participants through a series of exercises to help prioritize next steps for the Center and priority action areas for ongoing work. Colleen Tapen (NC DHHS) presented information synthesizing state and national data on health workforce; for North Carolina the most commonly cited workforce shortages were in nursing, direct care workers, behavioral health, primary care, maternal and child health and medical assistants. The participants then indicated via poll that nursing, direct care workers and behavioral health were priority areas for discussion. Participants broke into three groups – one each for nursing, direct care workers and behavioral health – to provide feedback via Jamboard on key drivers of shortages and other challenges, current implementation strategies to address the challenges, and other strategies to consider (including necessary resources for these strategies). The Center team will synthesize that information and use it to formulate next steps. Links to the Jamboard exercises for these groups are here:

Nursing:
https://jamboard.google.com/d/100fzqawNXGvNZZAnqCEQtM5abFh9Uh2EOmgiJph7YVA/edit?usp=sharing
Direct care workforce: https://jamboard.google.com/d/1gBkFO0YcbImNQb8jCx3ln-BQ6W7GvbgwuUGf4E3Sg9A/edit?usp=sharing
Behavioral health: https://jamboard.google.com/d/11MKbHxdHUjsWQ4PmY-KOs9L8tMjxs37sZnPjuRZTWrs/edit?usp=sharing

Hugh Tilson opened the conversation for participants to share any success, lessons learned, events or anything else.
- Cecilia Holden (myFutureNC) asked about the measurement regarding 1st time pass rates for the NCLEX that is included in NC regulations for nursing programs (see this link

for the regulation.) The question raised the issue of whether 1st time pass rates is the appropriate metric or ultimate pass rates would be more appropriate.

- Tatyana Kelly (NCHA) commented on the importance of EMTs and paramedics in communities and in promoting better health outcomes upon arrival at the hospital, and the shortages of these members of the workforce in many communities.
- Sabrena Lea (NC DHHS) commented on an increasing request she is hearing regarding nurses with pediatric experience for home health needs.

Hugh Tilson thanked everyone for their participation and promised to keep up the progress in moving from talk to action based on the information provided at the meeting. He also encouraged participants to let anyone from the Center team know if they needed anything or had suggestions for the Center.