



Office of Statewide
Health Planning and
Development

Healthcare Workforce Development: Priorities

March 26, 2013

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Healthcare Workforce Development Division
OSHPD



Office of Statewide Health
Planning & Development

Healthcare Workforce Challenges

Primary Care

- Increased demand for services
- Shortage of health professionals
- Mal-distribution of health professionals
- Lack of race/ethnic and linguistic diversity
- Insufficient number of bilingual professionals
- Salary differentials by specialty
- An aging workforce
- Lack of clear career pathways
- Capacity of educational programs
- Regulatory and scope of practice issues
- Defining reimbursable services
- Lack of formal integration/coordination of mental health, substance use treatment and primary care
- Delivery models

// to Mental Health

- Prescribers
- High caseloads, “burn out”
- Lack of adequate training and graduate preparation programs
- Limited training in providing family-centered or recovery-oriented care
- Lack of positions in the public mental health system for consumers and family members
- Limited opportunities for advancement

Priority Professions

- Primary Care Physicians
- Advanced Practice Nurses
- Physician Assistants
- Medical Assistants
- Community Health Workers and Promotores
- Clinical Lab Scientists
- Medical Imaging
- Care Coordinators
- Direct Care Workers
- Public Health
- Oral Health
- Health Administrators and Health IT
- Social Work
- Substance Use Disorder Counselor
- Clinical Psychologist
- Licensed Professional Clinical Counselors
- Marriage and Family Therapists
- Peer Support Specialists
- Psychiatric Mental Health Nurse Practitioner/Clinical Nurse Specialist
- Psychiatrists

**Per California Healthcare Workforce
Development Council**

Office of Statewide Health Planning and Development
California Workforce Investment Board
Health Workforce Development Council
Career Pathway Sub-Committee

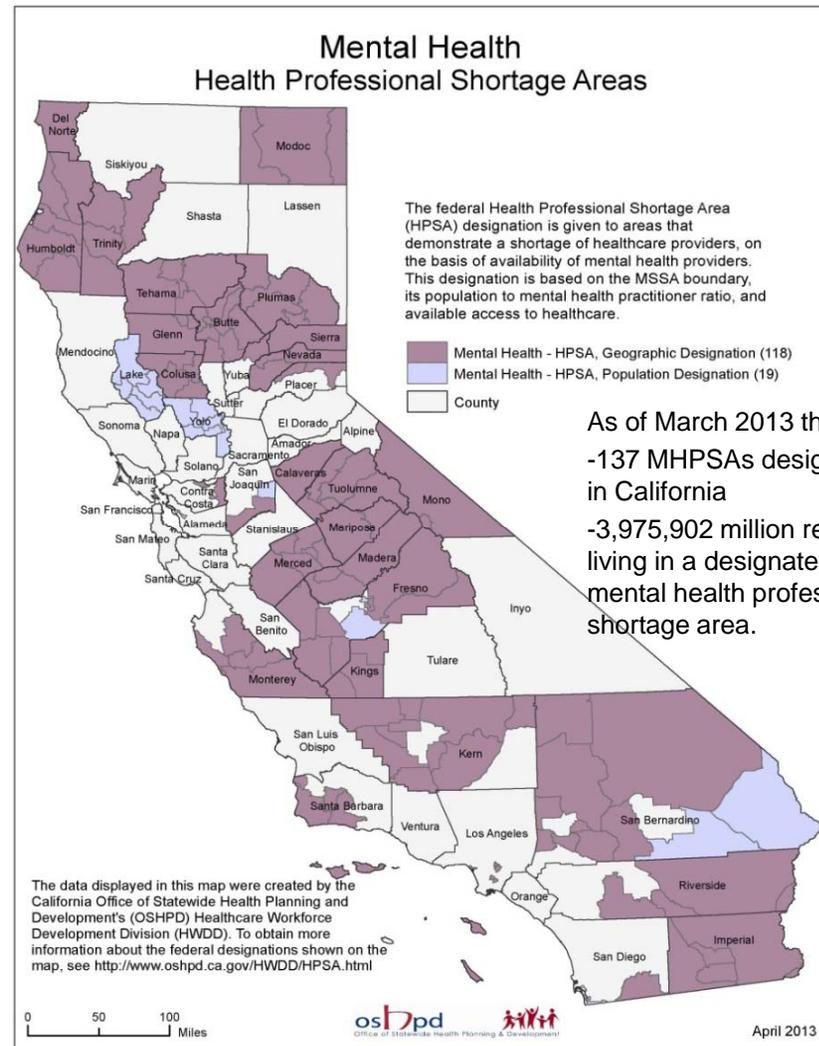
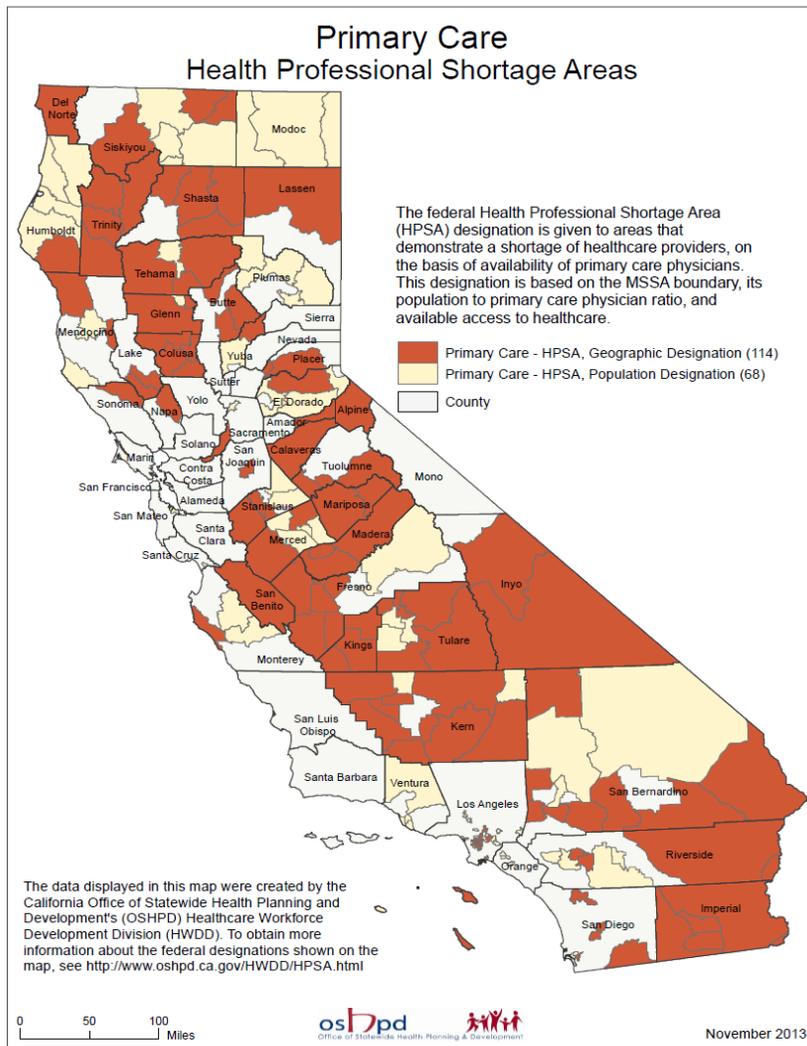
Report
October 2013



Prepared by:



Health Professional Shortages Areas



Diversity Matters

- 40% of California residents speak a language other than English and 20% do not speak English “very well”
- More than half of those eligible for subsidies or Medi-Cal under the Affordable Care Act are people of color and 32-51% of adults in these groups speak English less than “well”
- Underrepresented minority (URM) physicians are more likely to practice primary care, practice in medically underserved areas, and serve URM and uninsured patients
- Diversity strengthens delivery systems at multiple levels, enhances educational experiences, promotes relevant research, considers needed changes in health policy, and prepares the state for emerging and culturally dynamic health challenges
- Reliance on foreign trained professionals to meet state’s healthcare needs

	California Population	Nurses	Dentists	Physicians
African American	6%	4%	3%	3%
Asian/Pacific Islander	13%	27%	32%	21%
Latino	38%	8%	7%	5%
Other	4%	3%	1%	7%
White	39%	59%	57%	53%

Health Workforce Programs

Career Awareness

Health Careers Training Program – Increases awareness of health careers via the Newsletter highlighting career pathways and the HCTP Resources Page exploring health careers, educational opportunities, scholarship and loan repayments, and job placement resources. The Newsletter is distributed electronically to approximately 10,000 students, parents, teachers, and guidance counselors annually.

Mini-Grants – Provides grants to organizations supporting underrepresented and economically disadvantaged students pursuit of careers in health care. Since 2005, nearly \$1 million has been awarded to support health career exploration, conferences and workshops serving nearly 28,000 students statewide.

Training and Placement

Rural Health - Maintains a free, on-line service to assist rural providers recruit health professionals. Since 2002, more than 5,100 job opportunities in rural communities have been posted.

Cal-SEARCH – A 3 year project that resulted in 150 student and resident rotations from dentistry, family medicine, physician assistants, and other medical disciplines in community clinics and health centers.

Exploring opportunities for funding to allow future Cal-SEARCH rotations.

Song-Brown Healthcare Workforce Training Program – Provides grants to family practice residency, nurse practitioner, physician assistant, mental health and registered nurse training programs to increase the number and distribution of these professions in underserved areas. Since 2000, over \$77 million has been awarded to Family Practice Residency, Family Nurse Practitioner/Physician Assistant, and Registered Nurse programs.

Health Workforce Programs, cont.

Financial Incentives

CalREACH – developing an electronic application and monitoring system for OSHPD’s 16 financial incentive programs that will be fully deployed by June 2013.

California State Loan Repayment Program – Increases the number of primary care physicians, dentists, dental hygienist, physician assistants, nurse practitioners, certified nurse midwives and mental health providers practicing in health professional shortage areas. Since 1990, approximately \$22 million has been awarded in education loan repayments.

Health Professions Education Foundation – awards up to \$12 million per year in financial incentives to students and practitioners in exchange for direct patient care in an underserved area. Since 1990, has awarded more than \$60 million in scholarships and loan repayments to 5,394 students and practitioners.

Mental Health Services Act (MHSA) Workforce Education and Training (WET) Program – Funded by Proposition 63, remedies the shortage of mental health practitioners in the public mental health system (PMHS) via financial incentives, grants to expand psychiatric residency programs, a technical assistance center and county regional partnerships.

Systems Redesign

Health Workforce Pilot Project (HWPP) – Allows organizations to test, demonstrate and evaluate new or expanded roles for health professionals or new health delivery alternatives before changes in licensing laws are made by the Legislature. Since 1972, 23 legislative and/or regulatory changes have been influenced by HWPP.

Medical Service Study Areas (MSSAs) Reconfiguration – Assesses changes to demographic or socio-economic data and population shifts to reconfigure MSSA boundaries. In 2012, engaged local health departments and stakeholders to reconfigure MSSAs that better represented the needs of that county’s population.

Health Workforce Programs, cont.

Shortage Designation Program – Designates areas as Health Professional Shortage Areas or Medically Underserved Areas/Populations that enable clinics to be eligible for assignment of National Health Service Corps Personnel and apply for Rural Health Clinic Certification, Federally Qualified Health Center Look-Alike certification, and New Start/Expansion Program. For the past 5 years, approximately \$7 billion federal, state, and local funds have been leveraged to safety-net clinics, and primary care providers as a result of these designations.

Research and Policy

Research, Policy and Planning GIS/Data System – Reviews California counties to assess provider-to-population ratios, poverty levels and public health indicators for eligibility to receive federal assistance for health care.

Health Care Reform – Engages stakeholders on federal/state health workforce development activities and provides analysis of health reform initiatives; leads efforts to develop the Mental Health Services Act's 5 Year Workforce Education and Training Plan. Conducted daily monitoring of federal health workforce grant activities which led to the distribution of over 100 funding opportunity/meeting announcements to stakeholders.

Healthcare Workforce Clearinghouse Program – Serves as the state's central repository of health workforce and education information via the collection, analysis and distribution of educational, licensing and employment data and trends. Released in June 2012, the Clearinghouse has demographic information on licensees such as race, ethnicity, languages spoken, practice locations as well as data on current supply and employment projections for many of California's health professions.

OSHPD Priorities 2013-2015



Pathways

- Augment funding for Mini-Grants to increase exposure to healthcare careers
- Rollout "OSHPD Academy" to augment resources to pipeline programs
- Develop pipeline programs to increase supply and diversity of health professionals
- Explore partnerships to support "frontline" and allied health workers



Training & Placement

- Institutionalize CalSEARCH to provide clinical rotations in underserved areas
- Explore role in mental health peer support
- Fund innovative health training programs via Song Brown
- Explore funding of primary care and non-educational training programs via Song Brown
- Explore development of innovative training/retraining programs for incumbents



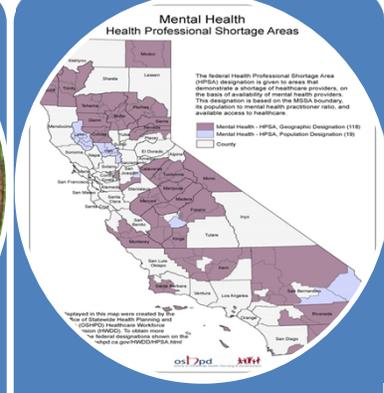
Financial Incentives

- Implement \$52 million grant to support health professionals and training programs
- Increase funding for existing programs
- Develop financial incentive programs for:
 - Entry-level Masters in Nursing
 - Nurse Educators
 - PharmD
- Expand eligibility of State Loan Repayment Program (SLRP) to pharmacists
- Explore other state's best practices for SLRP
- Implement CalREACH, OSHPD's e-app for financial incentive programs



Systems Redesign

- Explore development of projects that support new healthcare delivery models
- Increase utilization of Healthcare Workforce Pilot Program to test, demonstrate and evaluate expanded skill set and test new health delivery models
- Oversee community paramedicine pilot project
- Continue to proactively designate health professional shortage areas
- Explore e-application for WET and shortage designations
- Explore regional partnerships across primary care and mental health



Research & Policy

- Create five-year mental health workforce education and training plan
- Enhance Clearinghouse, adding supply, demand and education data for all healthcare professions
- Lead efforts to standardize healthcare workforce data
- Explore development of database with community identified and best practices in healthcare workforce development
- Develop policy recommendations on health workforce issues
- Track and analyze legislation impacting health workforce



Focus: Pathways and Pipeline Programs

Mini-Grants – Provides grants to organizations supporting underrepresented and economically disadvantaged students pursuit of careers in health care. Since 2005, nearly \$1 million has been awarded to support health career exploration, conferences and workshops serving nearly 28,000 students statewide.

Award Category A: Health Career Conferences and/or Workshops

- introducing participants to a wide variety of health career options by offering health “career fair” type experiences and/or workshops.

Award Category B: Health Career Exploration

- direct engagement of participants in one or more health careers through hands on experiences that include direct interaction with health care professionals in real or simulated health care settings.

HCTP Mini-Grants



Health Careers Training Program (HCTP) Mini-Grants

HCTP Mini-Grants support programs which develop a more culturally and linguistically competent healthcare workforce for Californians through services to economically/educationally disadvantaged and/or underrepresented students as they pursue a career in the health professions.

Questions? Email us at hctp@oshpd.ca.gov. For more information on our programs and resources, subscribe to OSHPD announcements at www.oshpd.ca.gov/signup.html and visit us at www.oshpd.ca.gov/HWDD/HCTP.html

Request for Applications (RFA) \$201,000 Total Available

Apply Starting January 21 - Deadline February 21, 2014

HCTP Mini-Grants fund programs that encourage diversity in the health professions through an annual Request for Application process.

Funding Categories

A total of \$201,000 has been made available to award (15) HCTP Mini-Grants between two award categories:

- Category A: Health Career Conferences and/or Workshops (8 awards at \$12,000 each)
- Category B: Health Career Exploration (7 awards at \$15,000 each)

Free Technical Assistance Webinars

Each webinar will include an overview of the information contained in the RFA including the objectives of the opportunity, what a successful application should contain, and a review of our web-based application system, CaREACH.

Application Process

All applications will be received through CaREACH. The complete RFA and webinar registration instructions are available on our webpage:

www.oshpd.ca.gov/HWDD/HCTP_mini_grants.html

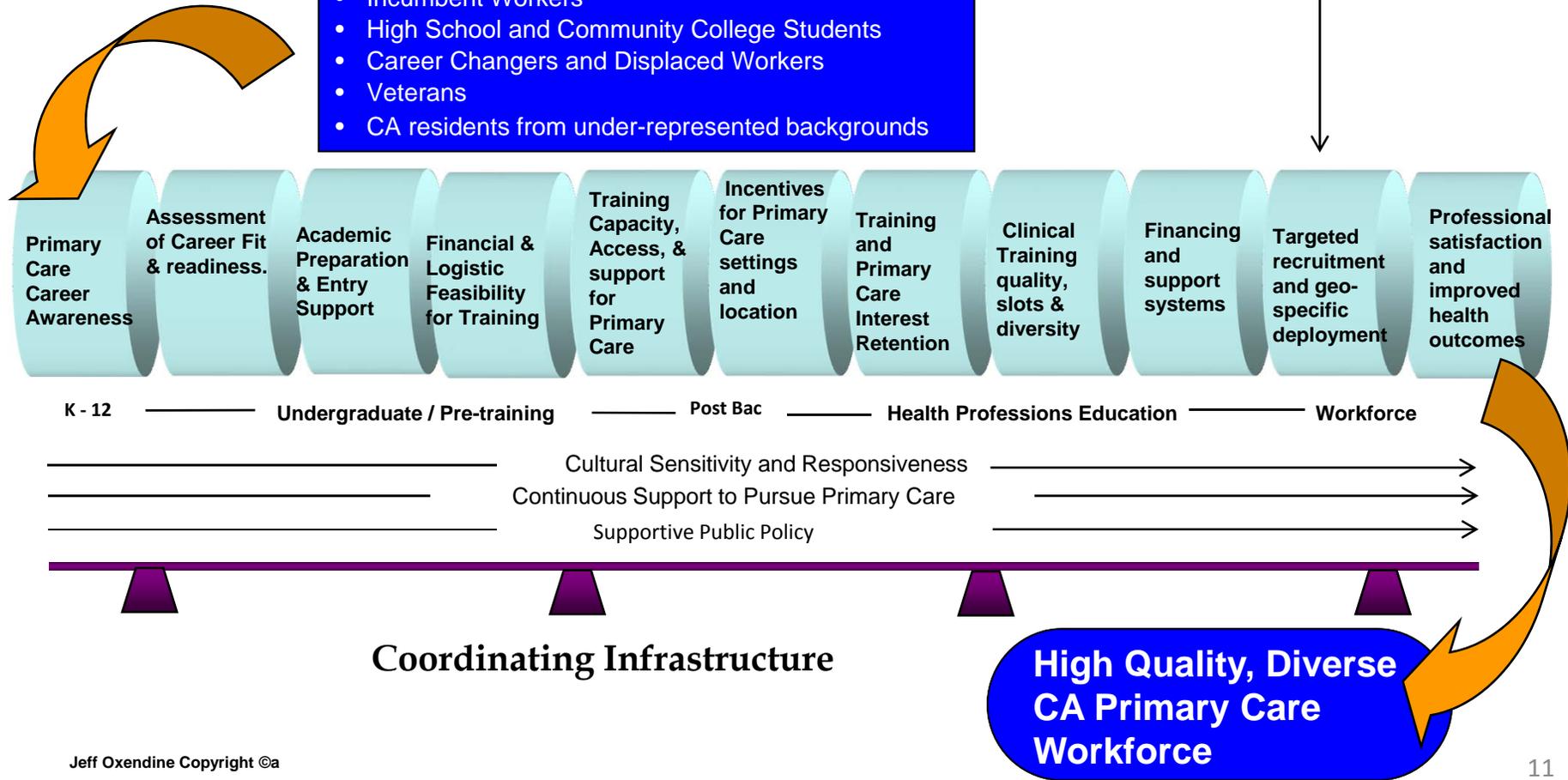
Technical Assistance Webinars will be held from 10:00 – 11:00 am on **January 27** and **February 13, 2014**(repeat)

Applications are due on **February 21, 2014**.

Coordinated CA Primary Care Workforce Pathway

- Target Groups:**
- Undergraduates
 - Post baccalaureate students
 - Medical Students, RN's
 - Immigrant Health Professionals
 - Incumbent Workers
 - High School and Community College Students
 - Career Changers and Displaced Workers
 - Veterans
 - CA residents from under-represented backgrounds

- Primary Care professionals from other states



Focus: Training and Placement via Primary Care Residency Programs

- \$2.84M/year for 3 years to
 - expand the Song-Brown program to fund primary care residency programs
 - expand eligibility to teaching health centers

Expanding Eligibility to Other Primary Care Specialties

- currently Song Brown provides grants to residency training programs for
 - family medicine physician residents
 - FNP
 - primary care PA
 - RN
- Residents and trainees of Song-Brown funded programs are required to complete training in medically underserved communities
- This proposal would expand eligibility to other primary care specialties including
 - internal medicine
 - obstetrics and gynecology (OB/GYN)
 - pediatrics

Expanding Eligibility to Teaching Health Centers

- Currently, only medical school-based physician residency programs are eligible to apply for Song-Brown funding
- Residents who train in community clinic settings are 3X more likely to practice in underserved communities after graduation
- This proposal doesn't affect funding for the existing Song-Brown programs

Primary Care Residency Programs	Amount	% of Total	Number of Grants	Residents Trained
Internal medicine	\$1,420,000	50	13	81
OB/GYN	\$710,000	25	6	39
Pediatrics	\$710,000	25	6	39
	\$2,840,000	100%	25	159

Focus: Financial Incentives via \$52 M California Endowment Grant

- \$52 million/3 years committed to OSHPD to boost the number and capacity of primary care health professionals trained for/committed to practice in underserved communities
- \$31 million for Health Professions Education Foundation = additional 624 health professionals will be committed to practicing for multiple years in underserved areas
- \$21 million for Song-Brown Program to support expansion of training program slots and innovative training programs for Family Practice Physicians, Family Nurse Practitioners, and Physician Assistants = additional 4,166 primary care health professionals will be prepared for practice in underserved areas
- Guiding Principles:
 - Support training programs that prepare linguistically competent and culturally responsive primary care practitioners for practice in underserved communities, learning how to work in practice models utilizing expanded role medical assistants, patient navigators, community health outreach workers, and promotoras; and that incorporate public health principles into the curriculum.
 - Support scholarships and education loan repayment for primary care health professionals that agree to practice in underserved communities, including BHC places, primarily in outpatient settings such as group practices and clinics, and in multi-disciplinary teams.
 - Support training for veterans with medical, dental, and mental health service experience to qualify for primary care professions.
 - Provide technical assistance to accelerate primary care practice redesign to achieve patient centered care by supporting retraining of workforce (e.g., medical assistants), operations management, and enhanced patient engagement.
 - Support training for resident foreign health professionals with needed language and cultural competency skills and commitment to practice primary care in underserved areas to qualify for California licensing.

Focus: Systems Redesign via Community Paramedicine Pilot

- EMSA operates State Paramedic Licensure program that licenses and conducts disciplinary investigations of paramedics to ensure care provided meets high standards for pre-hospital care
- Currently, EMT-Paramedics trained to provide advanced life support services in emergency settings or during inter-facility transfers. California Health and Safety Code Division 2.5, Emergency Medical Services:
 - Limits the EMT-Paramedics scope of practice to emergency care in the pre-hospital environment
 - Requires that patients under the care of an EMT-Paramedic be transported to a general acute hospital that has a basic or comprehensive emergency department permit (Health and Safety Code Section 1797.52, 1797.218)
 - Requires emergency medical services to transport a patient to the closest and most appropriate facility (Health and Safety Code Section 1797.114)
- EMSA is seeking local EMSAs interested in expanding role and practice of Emergency Medical Technician–Paramedic (EMT-P). Expanded roles of paramedic services through Community Paramedicine may allow for the following:
 - Transport patients with specified conditions not needing emergency care to alternate, non-emergency department locations
 - After assessing and treating as needed, determine whether it is appropriate to refer or release an individual at the scene of an emergency response rather than transporting them to a hospital emergency department
 - Address the needs of frequent 911 callers or frequent visitors to emergency departments by helping them access primary care and other social services
 - Provide follow-up care for persons recently discharged from the hospital and at increased risk of a return visit to the emergency department or readmission to the hospital
 - Provide support for persons with diabetes, asthma, congestive heart failure, or multiple chronic conditions
 - Partner with community health workers and primary care providers in underserved areas to provide preventive care
- Application expected to be submitted in December. OSHPD will oversee review and approval of application and seek public input via review of application, public meeting and hearing, and Advisory Committee.

Focus: Public Mental Health Services Workforce

- Imposes a one percent tax on personal income in excess of \$1 million to support the public mental health system (PMHS) via prevention, early intervention and services.
- To address the mental health provider issues, MHSA included a component for Mental Health Workforce Education and Training (WET) programs.
- First Five-Year Plan, April 2008 – 2013, developed in 2008 by the Department of Mental Health (DMH).
 - Provided framework for advancement and development of mental health workforce education and training programs at the County, Regional, and State levels.
 - Provides vision, values, mission, measureable goals and objectives, proposed actions and strategies, funding principles, and performance indicators for the use of MHSA WET funds.
- In July 2012, following elimination of DMH, the MHSA WET programs transferred to OSHPD. OSHPD is also accountable for the development of the next 5 Year Plan.
- Existing programs include: stipends, loan repayments, grants to PA and psych residency programs, shortage designation, Regional Partnerships, and technical assistance center.
- Next Five-Year Plan will provide vision, values, mission, measureable goals and objectives, proposed actions and strategies, funding principles, and performance indicators for the use of remaining MHSA WET funds for the period from April 2014 to April 2019.
- Public Input encouraged:
 - Submitting feedback on draft Five-Year Plan (Public Comment period: November 4 – 8).
 - Attending WET Advisory Committee Meetings (next one is December 13 in Sacramento).
 - Participating in a WET Sub-Committee.

Mental Health Workforce Education and Training (WET) Five-Year Plan Budget

WET Funding Allocated for State Administered Programs in 2008		\$234,500,000				
WET Funding Spent via State Administered Programs in 2008-2013 WET Five-Year Plan		\$119,755,910				
WET Funding Remaining for State Administered Programs for 2014-2019 WET Five-Year Plan		\$114,744,090				
Item Number	State Administered WET Program	State WET Funding for 4 Year Budget	Fiscal Year 14/15	Fiscal Year 15/16	Fiscal Year 16/17	Fiscal Year 17/18
Total		\$114,744,090	\$31,936,023	\$31,936,023	\$26,936,023	\$23,936,023
1	Stipends	\$35,000,000	\$8,750,000	\$8,750,000	\$8,750,000	\$8,750,000
	Psych Nurse Practitioner	\$7,200,000	\$1,800,000	\$1,800,000	\$1,800,000	\$1,800,000
	Clinical Psychologist	\$1,800,000	\$450,000	\$450,000	\$450,000	\$450,000
	Marriage and Family Therapist	\$12,400,000	\$3,100,000	\$3,100,000	\$3,100,000	\$3,100,000
	Social Worker	\$13,600,000	\$3,400,000	\$3,400,000	\$3,400,000	\$3,400,000
2	Loan Assumption	\$40,000,000	\$10,000,000	\$10,000,000	\$10,000,000	\$10,000,000
3	Education Capacity	\$15,000,000	\$3,750,000	\$3,750,000	\$3,750,000	\$3,750,000
	Psychiatrist	\$9,000,000	\$2,250,000	\$2,250,000	\$2,250,000	\$2,250,000
	Psych Nurse Practitioner	\$6,000,000	\$1,500,000	\$1,500,000	\$1,500,000	\$1,500,000
4	Consumer and Family Member	\$10,000,000	\$5,000,000	\$5,000,000	\$0	\$0
5	Regional Partnership	\$9,000,000	\$3,000,000	\$3,000,000	\$3,000,000	\$0
6	Recruitment (Career Awareness) and Retention	\$3,000,000	\$750,000	\$750,000	\$750,000	\$750,000
	Mini-Grants	\$1,000,000	\$250,000	\$250,000	\$250,000	\$250,000
	CalSEARCH	\$1,000,000	\$250,000	\$250,000	\$250,000	\$250,000
	Retention	\$1,000,000	\$250,000	\$250,000	\$250,000	\$250,000
7	Evaluation	\$2,744,090	\$686,023	\$686,023	\$686,023	\$686,023

Focus: Planning via CalSIM CHW and Promotores Workgroup

- Develop options and recommendations for how to expand the utilization of Community Health Workers/Promotores (CHW/P) within the California State Innovation Model (CalSIM)
 - the Health Homes for Complex Patients
 - Palliative Care
 - Accountable Care Communities
- Lay a foundation for further development of policy and programmatic recommendations to expand the supply of CHW/Ps
- Key questions that the Work Group will address include models and options with regard to:
 - roles and responsibilities
 - skills and core competencies
 - education and training
 - financing and reimbursement
- Objectives
 - Convene four CalSIM Workforce Work Group sessions with representatives of various workforce stakeholder constituencies (April – September 2014) to solicit participants' knowledge, expertise and resources to inform the design of practical strategies for incorporating CHW/Ps into the three CalSIM initiatives
 - Convene community forums with CHW/Ps and other frontline healthcare workers (April – June 2014)
 - Conduct research on key issues identified during the Work Group and community forum discussions to provide more detailed background information, analysis, and case profile examples where appropriate to inform the development of recommendations to inform the design of practical strategies and identify potential public policy issues (April – September 2014)

Focus: Research and Planning via Clearinghouse

- Released interactive website and seven Fact Sheets
 - Doctors of Osteopathy (DO)
 - Physicians and Surgeons (MD)
 - Physician Assistants
 - Registered Nurses
 - Vocational Nurses
 - Psych Techs
 - Respiratory Care Practitioners
 - Dentists
 - Dental Assistants(RDA)
 - Dental Hygienists(RDH)
 - Occupational Employment Projections

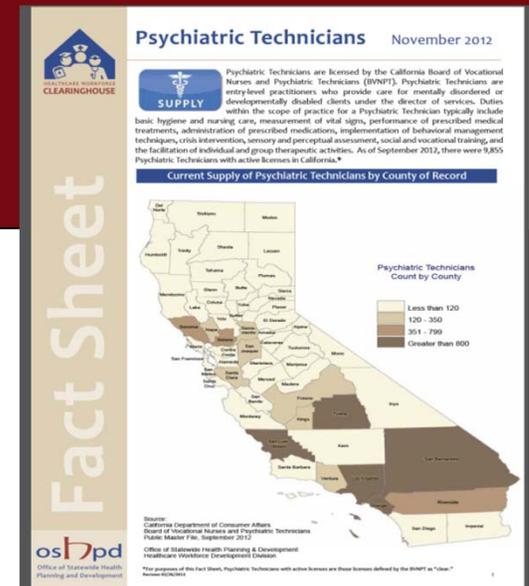
Currently partnering with :

Latino Physicians of California

To support and help develop a survey to over 3,000 Latino physicians in California

California Academy of Physician Assistants

Providing an in-depth report based on 2013 survey data collected



Specific Focus on Mental Health

Board of Behavioral Science

- Associate Clinical Social Workers
- Marriage and Family Therapist Interns
- Professional Clinical Counselor Intern
- Licensed Clinical Social Workers
- Licensed Marriage and Family Therapists
- Licensed Professional Clinical Counselor
- Licensed Educational Psychologists

Board of Psychology

- Psychologists
- Psychological Assistants
- Registered Psychologists

Opportunities to Participate in OSHPD's Health Workforce Efforts

OSHPD welcomes the participation of stakeholders via various opportunities such as:

- Partnering on programs and funding opportunities
- Making funding recommendations for financial incentives
 - Reviewing and scoring Mini-Grant applications
 - Participating in the Health Professions Education Foundation's advisory committees
 - Allied Health Advisory Committee
 - Vocational Nursing Advisory Committee
 - Nursing Advisory Committee
 - Health Professions Education Advisory Committee
 - Mental Health Financial Incentives Advisory Committee
 - Steven Thompson Physician Loan Repayment Program Advisory Committee
- Input to the development of the next Workforce Education and Training Five-Year Plan
- Identifying and/or partnering with organizations that may be interested in testing and evaluating an expanded skill set via Healthcare Workforce Pilot Project
- Serving on OSHPD's Healthcare Workforce Pilot Project Advisory Committee
- Identifying communities that may need assistance with designation as Health Professional Shortage Area
- Advising on healthcare workforce data collection and distribution via Clearinghouse Advisory Committee
- Signing up for our email listserv

Sign Up for Emails

Sign up for OSHPD's healthcare workforce related listservs:

<http://oshpd.ca.gov/signup.html> (general)

OSHPD.MHSAWET@oshpd.ca.gov (mental health)

HCRWorkforce@oshpd.ca.gov (healthcare reform)

Contact



Mini grant Final 2.mp4

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