

Maine Health Workforce Forum Annual Report to the Maine Department of Health and Human Services

September 3, 2013

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Maine statute (MRSA §257) requires that the Maine Department of Health and Human Services at least once annually convene a health workforce forum to review the latest Department of Labor report regarding Maine's health workforce, to discuss health workforce issues, use the information gathered through the forum to develop its health policy and planning decisions and to make appropriate policy recommendations based on its analysis of the health care workforce. The Department is also required to post a report and recommendations on its website. That forum was held on June 13, 2013 as the Maine Health Workforce Forum 2013 Summit: *Collaborative and Innovative Solutions to Meeting the Health Workforce Needs of Employers*. This is the report of the Summit, and includes:

- A description of the Summit
- Highlights of some of the data and information presented at the Summit
- General policy recommendations; and
- Links to the speaker bios, presentations and videos of the presentations posted on the Maine Health Workforce Forum's website.

2013 Maine Health Workforce Forum and Summit Overview

Since being established by the Maine Legislature in 2005 the Maine Health Workforce Forum has evolved into an independent public/private employer led consortium of stakeholders, including health and long term care employers, health professional and trade associations, licensing boards, adult education programs, public and private universities, organized labor, private foundations, consumer groups, community colleges, Maine DHHS Center for Disease Control and Prevention, Maine Department of Labor, and others concerned with ensuring an adequate supply of health care workers to meet health, public health and long term care needs in Maine.

The purpose of the Summit was to inform healthcare, long-term care and public health employers, educators, economic developers, employment professionals, and policymakers about resources and successful collaborations and innovative strategies for addressing Maine's health workforce needs.

Outcomes included:

- Understanding of what the data is telling us and how to use it
- Knowledge of national and state solutions for meeting the needs of employers and job seekers
- Learning about models for successful collaborations and ways to leverage training resources
- Hearing from Maine employers and educators about successful partnerships and innovations
- Networking with colleagues interested in health workforce issues and solutions
- Understanding how to implement and assess a career pathway
- Greater awareness of Maine's health information technology (HIT) workforce and training needs; and
- Initiation of a more coordinated approach amongst Maine's different nursing initiatives.

131 people participated in the Summit held at the Wells Conference Center in Orono including health employers, educators from all levels, representatives from DOL, DHHS, economic development, social service agencies and public health and from all regions of the state. This conference provided people an opportunity to network and included presentations on the following topics:

- Maine's Health Sector and Workforce: Trends, Projections, Challenges
- Promoting a Dual Customer Focus: Meeting the Needs of Employers and Job Seekers
- State and National Perspectives on Workforce Challenges and Solutions
- Addressing Maine's Health Information Technology (HIT) Workforce Training Needs
- Success Stories of Maine's Health Care Sector Grant
- Career Pathways: Tools for Effective Implementation and Assessment
- Maine's Nursing Workforce – Bringing it All Together

Support for the Summit was provided by the Maine Health Care Sector Grant, which was funded by the American Recovery and Reinvestment Act, through the United States Department of Labor Employment and Training Administration and the Maine Department of Labor. This project provides equal opportunity in employment and programs. Additional support for the Summit was provided by the University of Maine School of Nursing.

For a complete agenda, speaker bios, links to the presentations and videos of each presentation go to: <http://www.mainehealthworkforceforum.org/index.php/events/recent-events/upcoming-events1>

Summit Data Highlights

The Maine Health Workforce Forum 2013 Summit was kicked off with a health workforce data presentation, *Maine's Health Sector and Workforce: Trends-Projections-Challenges*, by Paul Leparulo, CFA, Principal Economic Research Analyst, Maine Department of Labor, Center for Workforce Research and Information. For a complete set of slides and a video presentation go to the website listed above.

Following are some data highlights of that presentation.

Sector Overview and Trends

- Making up 18% of the economy, Healthcare and Social Assistance is Maine's largest economic sector in terms of numbers of jobs and wages paid (2011)
- Of the 105,000 employed in healthcare –
 - 34% - Hospitals
 - 25% - Ambulatory healthcare services
 - 24% - Nursing and residential care facilities
 - 18% - Social assistance
- From 2001 – 2011, Maine's health sector generated more jobs than all other job producing sectors combined, and employment in this sector expanded during a period when overall statewide employment contracted
- Hospitals have been the predominant driver of this sector's employment growth over the last 10 years (2001 - 2011)
 - 51% - Hospitals
 - 21% - Social assistance

- 15% - Ambulatory healthcare services
- 13% - Nursing and residential care facilities
- Growth in healthcare occupations was broad based and strong (change in employment 2001 – 2011)
 - 22% - RNs
 - 25% - Medical records and health information technology
 - 37% - Pharmacists
 - 69% - Physical therapists
 - 78% - Medical assistants
- As a proportion of private sector employment and wages, Maine’s health sector is the largest in the nation (2010)
- Going forward, healthcare is expected to remain as a key driver of statewide employment growth (employment projections 2010 – 2020)
- Health sector employment growth is estimated to be about 16%, with the growth rate and number of new jobs projected to be among the highest of all sectors
- Health occupational employment growth is estimated to be about 17% with an estimated 11,000 new jobs, and nearly half the 40 occupation with the fastest projected rate of job growth in Maine to be health occupations (2010 – 2020)
- Industry and occupational growth rates are slowing compared to prior years:
 - 2000 - 2010 - 27% increase/ 2010 - 2020 - 17% increase
 - 2000 - 2010 -13,000+ new jobs/2010 - 2020 - 11,000+ new jobs.

Factors Influencing Workforce Supply and Demand

- Economic factors can influence utilization of health care services and decisions about retirement
- With all else constant, an aging population, which consumes the most healthcare per person, will cause the demand for health workers to increase
- In Maine the population above 65 is expected to grow rapidly between 2010 and 2030, and more rapidly than the nation
- In addition to population demographics, other factors such as health of the population, economic growth and changes in technology and insurance all contribute to new job opportunities for health workers
- A meaningful portion of Maine’s health workforce is nearing the age of retirement, creating a sizable need for replacement workers in coming years
- Over half the job openings in health occupations over the next decade (2010 – 2020) will result from the need to replace workers that are retiring or permanently leaving the occupation
- Total projected job openings for Maine (2010 - 2020) ~ 22,500
 - + 11,000 - New Growth
 - +11,500 - Replacement Needs

Health Workforce Data Development Challenges

“Due to the data currently available, it is difficult to offer both a complete forecast of the nation’s health care workforce supply and assess its adequacy for meeting

the demand for services in the coming years.” (Deloitte Center for Health Solutions. (2011, October). *The Complexities of National Healthcare Workforce Planning*, Washington, D.C: Bipartisan Policy Center, p. 6.)

Data issues include:

- Data suppression (due to confidentiality requirements because of small numbers of specific professions being reported)/workforce distribution
- Quantifying skills gaps
- Difficulty in accessing licensure/survey information
- Silos of data
- Forecasting challenges.¹

State and National Perspectives on Workforce Challenges and Solutions

A National Perspective on Workforce Challenges and Solutions

Garrett Groves, Senior Policy Analyst at the National Governor’s Association provided a presentation that highlighted a recent report of the National Governor’s Association, *State Sector Strategies Coming of Age: Implications for State Workforce Policymakers*. The following information is taken from this report and the Summit presentation, both of which can be found at:

<http://www.mainehealthworkforceforum.org/index.php/events/recent-events/upcoming-events1>

The National Governors Association report states:

“Today more than half the nation’s states are exploring or implementing sector strategies making the model the most consistently adopted approach to meeting businesses’ need for skilled workers and workers’ need for good jobs. Sector strategies are among the few workforce interventions that statistical evidence shows to improve employment opportunities for workers and to increase their wages once on the job.”²

Sector strategies are defined as:

“partnerships of employers within one industry that bring government, education, training, economic development, labor, and community organizations together to focus on the workforce needs of an industry within a regional labor market. At the state level they are policies and investments that support the development of local sector partnerships.”³

In his Summit presentation Groves discusses the need to bring education, workforce development and economic development efforts together through the development of career pathways and industry clusters.

Groves states that: “Effective career pathways rely on coordination across education and training programs in order to offer a clear sequence of industry-relevant coursework and credentials to job seekers.”⁴

¹ Leparulo, P. (2013).

² Woolsey, L., Groves, G. (2013, January) p.2.

³ Ibid.

⁴ Groves, G. (2013, June). Slide 16.

Groves pointed out that another key component of sector strategies are industry clusters which are defined as:

“An industry cluster consists of large and small firms in a single industry. Firms in industry clusters benefit from synergies of association related to shared labor, sources of innovation, suppliers, markets, technology, and infrastructure.”⁵

Sector partnerships bring career pathways together with industry clusters and “align education and training programs with industry needs to produce readily employable workers.”⁶

Groves reports sector partnership benefits for both employers and workers include:

“Outcomes for Employers:

- 41% employers report reductions in turnover
- 84% employers report significant increases in productivity
- 100% employers report participation in Partnership was valuable.”⁷

“Outcomes for Workers:

- 48% of worker participants exited poverty
- 18% higher earnings
- More likely to work and in jobs with benefits.”⁸

The National Governors Association report states:

“States are finding sector strategies key to addressing skills gaps, engaging directly with industry and streamlining state programs and resources. No other strategy appears to compare in terms of:

- Using public resources efficiently, effectively, and collectively:
- Showing tangible results, such as improved business productivity and increased earnings for workers; or
- Acknowledging regional differences and strengths and actively encouraging local flexibility and action by local programs.”⁹

The report concludes:

“Beyond simply replicating the model, however, the real opportunity may lie in how states and local policymakers use sector strategies to integrate with other potentially powerful supply-side and demand-side strategies, specifically career pathway programs and regional industry clusters. It is here that sector strategies can present a tangible strategy for finally integrating the talent agenda with goals of regional economic competitiveness.”¹⁰

⁵ Ibid. Slide 21.

⁶ Ibid. Slide 31.

⁷ Ibid. Slide 26.

⁸ Ibid.

⁹ Woolsey, L., Groves, G. (2013, January) p.18.

¹⁰ Ibid.

A State Perspective on Workforce Challenges and Solutions

In her presentation, *Workforce Development Resources After the Grant*, Ginny Carroll, Director of Policy and Evaluation for the Maine Department of Labor discussed various funding opportunities, the sources of those funds, eligible applicants and a future vision for accessing state resources.

The following information is taken from this Summit presentation. Additionally, Carroll distributed a *Maine Department of Labor Program and Service Guide*, which serves as a guide to employers for Maine Department of Labor services. Both the presentation and the guide can be found at:
<http://www.mainehealthworkforceforum.org/index.php/events/recent-events/upcoming-events1>

Carroll highlighted two points in her presentation. First, most workforce funds are tied to eligible individuals, such as dislocated workers, adults re-entering the labor force or eligible youth. A second key point was that most programs also have some requirements, such as: competitive starting wages or an increase in wages for those being trained, long term commitment of full time employment to the trainee; employer involvement; and an employer cost-match.

Available state sources of funding include:

- Maine Apprenticeship Program – This program is sponsored by employers and includes on the job training with classroom learning. State funds cover 50% of the cost of courses. Apprentices can access college degrees at about 25% of the cost. Other resources can also be accessed to cover costs, such as Workforce Investment Act funds (WIA).
- Maine Quality Centers – This is a program funded through the Maine Community College System in which an employer or consortium of employers can apply to a community college for specially developed training with at least 8 of those being trained hired by the employer(s). Training is provided at no cost to the employer.
- Competitive Skills Scholarship Program – This program covers the cost of training for income eligible trainees who are entering a high-demand, high-wage, high-skill occupation. Training must result in an industry recognized credential.¹¹

Success Stories of Maine's Health Care Sector Grant

In March of 2010 Maine Department of Labor received a \$4.9 million Health Sector Grant under the American Recovery and Reinvestment Act (ARRA) as a result of the collaborative efforts of the Maine Health Workforce Forum. The overall goal of the grant was to increase the supply and employment of credentialed health care workers in high demand occupations.

The Maine Department of Labor managed and provided leadership for the grant and worked in partnership with the University of Southern Maine Muskie School of Public Service and the state's four Local Workforce Investment Boards to implement the grant. The grant ran through June 30, 2013 and the June 13, 2013 Summit provided an opportunity to highlight its many successes. The following information was provided by grant manager, Joan Dolan, Director of Apprenticeship and Strategic Partnerships, Maine DOL in her presentation at the Summit and her report regarding the many projects that were undertaken as part of the grant. That presentation and report can be found at:
<http://www.mainehealthworkforceforum.org/index.php/events/recent-events/upcoming-events1>

¹¹ Carroll, G. (2013, June). Slide 6.

In her report, *Preliminary Overview and Summary of Projects*, grant manager Joan Dolan states:

“The original grant solicitation specified that 400 individuals (including 100 nurses, 100 allied health professionals and 200 Certified Nursing Assistants), would be enrolled in health care training funded by the grant. In addition, grant-funded training activities to address the predicted future shortage of nurses were undertaken. Plans to achieve this important grant objective originally included increasing the number of clinical instructors; this included the implementation of strategies to increase the availability and flexibility of clinical training facilities as well as train existing clinical instructors in the use of simulation equipment. Ultimately, grant funds were used to train 1,035 individuals and to develop, fund and implement over two-dozen pilot training programs designed to result in long term solutions to the challenge of preparing our health workforce to meet the demands of today’s and tomorrow’s patients.”¹²

Following are highlights of Joan Dolan’s Summit presentation:

Within the overall goal of increasing the supply and employment of credentialed health care workers, the grant had four primary objectives:

1. Increase the number of employees and unemployed workers who advance their training and earn healthcare credentials
2. Reduce Maine’s clinical training bottleneck
3. Improve access to information about healthcare career pathways; and
4. Maintain and strengthen partnerships between employer, education and workforce sectors.

1. Increasing the number of employees and unemployed workers who advance their training and earn health care credentials

Of the 1,035 people trained under the grant (original goal – 400):

- 695 were incumbent health sector employees who received an average wage increase of \$3.50/hour
- 340 people were unemployed dislocated workers who had an average starting wage of \$12.14/hour
- 417 were placed in jobs.

There were 876 health care credentials earned, including:

- 550 Certificates
- 69 Associate’s Degrees
- 93 Bachelor’s Degrees
- 18 Master’s Degrees

2. Reduce Maine’s clinical training bottleneck

Several partnerships and projects under the grant were designed to reduce the clinical training bottleneck that limited the capacity of Maine’s nursing education programs to move student nurses through their training. These programs included:

¹² Dolan, J. (2013, June). p. 1.

- A centralized nursing clinical placement system involving 25 health care organizations and 13 schools of nursing designed to facilitate the scheduling and management of clinical nurse placements. This more efficient and effective placement system should result in an expansion in the number of available clinical placement sites.
- The development of several nurse educator certificate programs and clinical instructor training in simulation laboratories to address the shortage of clinical nursing instructors.
- Development of a Train-the-Trainer CNA Instructor Pilot Program with updated and revised curriculum and a method for delivery of the training that includes both face-to-face training and web-based content for future courses.

3. Improve access to information about healthcare career pathways

Several of the projects undertaken through the grant involved the development of a career pathway, such as the Health Information Technology (HIT) Pathway developed in Bangor and the CNA Eldercare Specialist Program in central Maine. Additionally, a case study analysis of several career pathways was conducted utilizing the US DOL's *Career Pathways Toolkit: Six Key Elements of Success* as a framework for the analysis. The report, *A Case Study: Assessment of Career Pathways in Maine*, can be found at: <http://www.mainehealthworkforceforum.org/index.php/resources/reports>

4. Maintain and strengthen partnerships between employer, education and workforce sectors

The final goal of the grant was to strengthen partnerships between employers, education and the workforce sector. With over two dozen partnerships that included a range of entities from each sector and all regions of the state and \$4,104,751 in leveraged resources, the grant successfully met its final goal. Additionally:

- Regional advisory groups were convened and met regularly in each of the local workforce area
- 6 regional summits were held across the state in 2012 with over 180 people from all sectors participating
- The Maine Health Workforce Forum was supported and matured into the state's industry partnership collaborative for the health sector; and
- Statewide summits were held in 2011 and 2013 to bring together interested stakeholders to discuss and determine the best approaches for meeting the state's health workforce needs.

As a result of these many partnerships and the management of the grant, a number of promising practices were employed:

- Educational institutions were getting input from employers and working together to develop programs to meet workforce training needs
- The workforce development system was engaged in new ways with the health sector, with the development of a nurse apprenticeship, and utilization of OJT resources

- At a time when the economy was flat, upskill/backfill strategies were utilized to enhance the skills of incumbent workers, contributing to their higher wages and career advancement. This then allowed employers to recruit for more easily filled entry level positions; and
- Engaging incumbent workers in the educational process not only energized them but their co-workers as well.¹³

Maine Health Workforce Forum Key Recommendations for Addressing Maine’s Health Workforce Needs

In its November 2010 report, *A Recommendations Guide: To Ensure an Adequate Supply of Skilled Health Professionals in Maine*, the Maine Health Workforce Forum’s description of Maine’s overall health workforce situation provides an appropriate summary for the health workforce issues facing Maine’s policymakers.

“Maine’s aging population, aging health workforce and limited resources for training and recruiting new professionals present serious challenges to ensuring an adequate supply of skilled health professionals. With the passage of the Affordable Care Act (ACA), the pressures to address Maine’s health workforce needs are even greater. Under the ACA more Maine people will have access to insurance which will in turn mean a greater demand for health care services. There will also be a restructuring of the delivery of how those services are provided and paid for. This increased demand will require that Maine re-think how it uses its health workforce, health professionals will need to be working to the fullest extent of their training and there will be a greater utilization of midlevel practitioners. Health workforce planning cannot be an afterthought to the state’s broader efforts around health reform and will need to be tied into the leadership in the state that is directing those efforts. Labor, educational and training initiatives will also need to be cognizant of the changing landscape of health care delivery under the ACA and the workforce that will be necessary to work in that changed delivery system.”¹⁴

Recommendations

The Maine Health Workforce Forum’s *Recommendations Guide* provided dozens of recommendations for addressing the state’s health workforce needs and those recommendations can be summarized as follows:

- Coordinate leadership to implement effective strategies
- Improve the collection, analysis and reporting of data needed to inform health workforce planning and result in effective solutions, both short and long-range
- Align resource development and projected demand
- Coordinate resources from multiple sources including state agencies and private resources
- Eliminate duplication of effort
- Foster employment strategies that will help address immediate and future workforce needs; and
- Review occupations and their scope of service to address changing workforce needs or priorities, such as health information technology and interprofessional training.

¹³ Dolan, J. (2013, June).

¹⁴ Scala, E., Sutton, S. (2010, November) p. 3.

The Maine Health Workforce Forum's *Recommendations Guide* can be found on the Forum's website at: <http://www.mainehealthworkforceforum.org/index.php/resources/reports>

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