Oregon Healthcare Workforce Committee
March 4th 2015 from 9:30-12:30
At Wilsonville Training Center
Meeting Summary

Committee Members in Attendance:	Pat Brunett Ann Buchele Jeff Clark Lita Colligan Michael Delgado (ph)	Robyn Dreibelbis David Nardone Jeff Papke (ph) David Pollack Daniel Saucy
Committee Members Not in Attendance	Jordana Barclay Josie Henderson	John Osborne
OHA staff, OHWI, OCN	Cathryn Cushing, OHA Margie Fernando, OHA Marc Overbeck, OHA	Jo Isgrigg, OHWI Jana Bitton, OCN
Others	SophiaLyn Nathenson, Ph.D., Oregon Institute of Technology Rebekah Gould, OHA Suzanne Yusem, OHA	

1	**Welcome**
2	**Approval: January 7th meeting summary**
	Meeting Summary was approved.
	Action Steps: • *Cathryn will edit, finalize and file the summary.*
3	**Healthcare Workforce Data Report**
	Objective: Share and discuss upcoming workforce data report with committee members. Background: The Oregon Health Authority collects data from questionnaires embedded in seven of the health professional Board's license renewal process. The seven Boards are required to submit data, three other behavioral health Boards submit data voluntarily. OHA contracts with the Oregon Healthcare Workforce Institute and the Oregon Center for Nursing to produce a report on the data once every two years. This will be the third report on the workforce data and will be the first data where trend data is available. Discussion: The report is in the process of production and should be ready for publication in late March or early April. Some highlights in the report include: • Oregon's healthcare workforce has, with a few exceptions, grown over the last five

years.

- The workforce is aging and a significant number of professionals are thinking of retiring or reducing their work hours.
- With the exception of the Metro area, where there are more healthcare professionals, the geographic distribution of professionals is similar to Oregon's population distribution.
- Most healthcare professionals are women, however, pharmacists are about 50% male. And physicians, podiatrists and dentists are mostly male.
- The percentage of healthcare professionals working as employees, rather than independently, is rising.

Committee members commented on the aging of the workforce and the need to enhance the health profession pipeline. One strategy that has worked involves having the types of people we need to recruit doing the recruiting. Once member wondered if Oregon's low high school graduation rates are affecting the pipeline. A copy of the presentation and a draft of the Executive Summary and the Statewide Profile page can be found here:

4	**Updates**

Committee updates

GME Primary Care Consortium: The planning committee has completed the search for a GME Consortium consultant. TrippUmbach, a nationally known and well-regarded firm in the area of graduate medical education won the contract. T/U is based in Pittsburgh with a satellite in Baton Rouge, LA. They have worked in many states on various facets of GME – creating new schools, building consortia and assisting current programs are a few – and are currently working in the state of Washington on expanding residency programs. The planning group will host the first consultant-led stakeholder meeting on March 6th, 2015.

Clinical Administrative Standards Implementation: OHA staff members are preparing to launch a survey to gather data on the implementation of the rules. In April, OHA plans to convene an official Rules Advisory Committee to make any needed changes in the rules. Along with the survey data, Cathryn has been collecting information from stakeholders about their difficulties or issues with the rules and will share those concerns with the RAC. OHA hopes to have the rulemaking process finished by July 1, 2015.

OHA updates

Since our last meeting, there have been many leadership changes. A new governor and new OHA Director are in place. This may lead to changes in focus for the Oregon Health Policy Board, but it is too early to tell if this will be the case.

Legislative updates

Please see the legislative bill summary in the meeting materials.

5	**OIT's Population Health Management Program**
	Objective: To learn about the progress of Oregon Institute of Technology's new Population Health Management program. Background: The Healthcare Workforce Committee helped to inform discussions as the Population Health Management Program was being created at OIT. The program is built around health system needs and is just beginning to graduate students who are trained to work in many aspects of the health care system. Program information can be found here. Discussion: Committee members appreciated the presentation by Dr. SophiaLyn Nathenson, the director of the Population Health Management Program. The program is based in Klamath Falls. Students are interning in government agencies, health systems and not for profits as well as going in graduate study in fields such as public health or epidemiology. Dr. Nathenson's presentation can be found here. Committee members wondered if Dr. Nathenson was bridging between other programs and other colleges. There is a push toward more standardization of similar programs so that colleges could create a Population Health Management profession. Dr. Nathenson told the committee that articulation agreements with other colleges are in development.
6	**Healthcare Workforce Mapping**
	Objective: Develop recommendations for the Oregon Health Policy Board for updated charter deliverables. Background: The Healthcare Workforce Committee has had several discussions about the appropriate role for the Committee. Discussion: Due to robust discussion during the presentations, the Committee didn't have enough time to complete this agenda item. Instead, members decided that a small group should convene outside the committee meeting and develop a map for the larger group to consider. Many members said that they didn't realize so many other committees and organizations were working on these issues and that they needed some basic education in the area. Several members volunteered to participate in the smaller group. Action Item: Cathryn will find a time and convene the small group.
9	**Public Comment**
	Objective: Give members of the public time to share with the Committee. *There was no public comment at this meeting.*