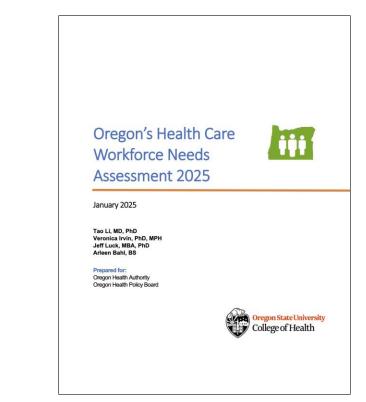


Oregon's Health Care Workforce Needs Assessment 2025

Presentation to the Senate Health Committee

Oregon's Health Care Workforce Needs Assessment 2025

- House Bill 3261 (2017) requires OHA to conduct an assessment of the health care workforce required to meet patient and community needs every two years.
- The needs assessment informs proposals for using the Health Care Provider Incentive Fund to improve the diversity and capacity of Oregon's health care workforce.
- It is critical that Oregon has the workforce needed to effectively deliver high-value care to patients across the state.
- Promoting health equity requires training, recruiting, and retaining a diverse workforce.
- OHA partnered with Oregon State University to develop the report.



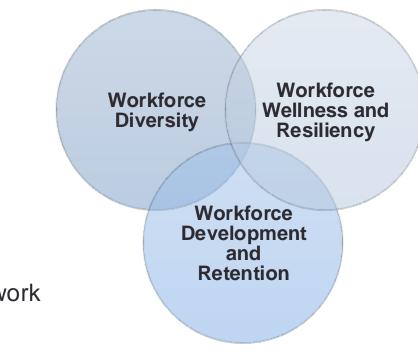
Report outline and methods

Report outline:

- Social Determinants of Work
- Investments in Workforce Development
- Health Care Workforce Trends, Data, Shortages, and Disparities
- Health Care Workforce Wellness and Resiliency
- Specific provider types discussion

Methods:

- Builds on the Health Care Workforce Committee Strategic Framework (see figure)
- Compiles information and recommendations from various sources
- Guidance and feedback provided by the committee, OHA Advisory Group, Oregon Health Policy Board and multiple workforce subject matter experts



Key findings: Oregon health care workforce is growing but challenges remain

- Health care requires a highly educated workforce. Oregon's health care and social assistance sector gained 15,000 jobs in the last year, however many job vacancies remain difficult to fill.
- Nursing, social work and primary care workforce increased since 2022, but a crisis in vacant positions exists.
- Workforce burnout has improved since pandemic but remains an issue.
- Rural and underserved communities generally have fewer providers.
- Overall, Oregon's licensed health care workforce is less racially/ethnically diverse than the state population. Women are overrepresented in most professions, while men are overrepresented in fields that require more advanced training. Women, people of color, Tribal members, and immigrants are more likely to work in lower-paid positions.
- Barriers to education, childcare, transportation, and other social supports prevent people from joining or advancing in the workforce.

Recommendations organized around four themes to create a diverse health care workforce

- 1. Sustain Funding Levels to Sustain Momentum in Workforce Development and Retention
- 2. Maintain Progress in Improving the Diversity of Health Care Providers to Provide Culturally Responsive Care to All
- 3. Seek Multipronged Solutions to Address the Shortage and Improve the Distribution of the Health Care Workforce
- Enhance Data Collection to Identify Successes, Challenges, and Priorities of the Workforce and Promote Evidence-Informed Strategies

Key recommendations

- Promote entry into the workforce and career advancement for people from communities experiencing inequities; scale up postsecondary health education programs.
- Create a centralized statewide clinical placement system for nursing students to reduce competition between Oregon's nursing education programs and hospitals.
- Increase compensation and other benefits.
- Reduce administrative burdens that make hiring staff and billing for care challenging.
- Expand the Oregon Wellness Program, which provides free counseling and support for workers.
- Streamline and expedite certification and licensing, including entering licensing reciprocity agreements.
- Continue the OHA Health Care Provider Incentive Program and Behavioral Health Workforce
 Incentives, which provide financial support to attract and keep workers in underserved communities.

Next steps for OHA

- Continue to evolve OHA workforce programs and priorities to meet patient and community needs in an equitable manner, while pursuing overarching solutions
- Review recommendations, develop actions within existing OHA resources and staffing, and prioritize actions that require legislation in future sessions
- Work with Health Care Workforce Committee and other workforce advisory groups to incorporate recommendations into the committee's Strategic
 Framework and advise OHA on future actions
- Continue to collaborate with state agencies and commissions, health care employers, community partners, and advocates to develop equitable, sustainable workforce solutions



Appendix

Full list of recommendations

Sustain Funding Levels to Sustain Momentum in Workforce Development and Retention

- Continue investment in early career development and continuing-education opportunities for people from communities experiencing inequities to promote their entry, advancement, and retention in health care careers.
- Allocate funding to increase wage floors, recruiting and relocation bonuses, and assistance with social determinants of work such as housing and childcare.
- Continue to reduce barriers to certification and registration processes.
- Continue to fund financial incentives to increase opportunities for training and education, such as those in the OHA Health Care Provider Incentive Program and Behavioral Health Workforce Incentives.

Sustain Funding Levels to Sustain Momentum in Workforce Development and Retention

New recommendations:

- Support reimbursement models based on the true cost of providing services.
- Increase training slots, internship opportunities, and funding to support preceptor and teaching faculty. Investment
 should focus on expanding access to education and training programs in rural areas and areas with significant
 priority populations. Creating training opportunities in underserved areas is particularly important to recruit and
 retain people from communities experiencing inequities to the field.
- Increase the number of graduate medical education slots to prepare primary care physicians in Oregon to enter the field. Continued funding for the Oregon Residency Collaborative Alliance for Family Medicine and grants is required to support the development and high administrative costs in starting new residency programs.
- Increase investment in Oregon's public and private education system to scale up health care education programs in high-demand areas such as nursing and behavioral health workforce to expand the number and diversity of prepared professionals entering the workforce.
- Provide retention and recruitment bonuses as direct salary and/or housing allowances or stipends or childcare subsidies to recruit and retain the workforce.
- Explore Medicaid strategies to invest in the health care workforce, such <u>as New York's Section 1115 Waiver's</u> <u>career pathways and loan repayment programs</u>

Maintain Progress in Improving the Diversity of Health Care Providers to Provide Culturally Responsive Care

- Improve outreach to all counties across the state, and deploy strategies to recruit, train and employ providers of color who are representative of the communities they serve in these fields.
- Continue using the Health Care Workforce Committee's <u>Health Equity Framework</u> and <u>strategies</u> to support a diverse health care workforce.
- Support training to all providers to offer culturally and linguistically responsive care. OHA supports local and national trainers and developers of cultural competence continuing education training opportunities as a resource to health/health care professionals in Oregon Licensing examinations and continuing education requirements could incorporate knowledge about social determinants of health and the importance of addressing social needs in the health care setting.
- Promote entry into the workforce and advancement for people from communities experiencing inequities through early career development and continuing-education opportunities.

Maintain Progress in Improving the Diversity of Health Care Providers to Provide Culturally Responsive Care

New recommendations:

- Reduce barriers for internationally educated health care professionals to practice in Oregon.
- Expand use of community partners in mental health service.
- Initiate and promote visible role models, affinity groups, and leadership and advancement opportunities for providers of color.
- Increase compensation and promote healthy work environments for home care workers and community-based facility staff.

Seek Multipronged Solutions to Address the Shortage and Improve the Distribution

- Increase training opportunities to improve recruitment and retention of health care workers from rural areas and communities experiencing inequities, which should include offering apprenticeships and stackable credentials.
- Continue expanding opportunities and funds to support education pathway programs in K-12 schools to attract more students into health care professions.
- Continue to expand the Oregon Wellness Program to provide prevention, acute intervention, and chronic management support for all health care workforce members, especially in rural areas.
- Make workplaces more welcoming for diverse health care professionals, such as providing frequent implicit bias and cultural responsiveness training for all staff and conducting climate surveys on a regular basis for employees to provide feedback on their working experience.
- Increase training slots and internship opportunities for more oral and behavioral health providers and to support more preceptors.
- Test new training pathways to increase dental therapists, hygienists, and assistants.
- Create and sustain positive work environments and culture to improve work-life balance, such as implementing flexible work schedules

Seek Multipronged Solutions to Address the Shortage and Improve the Distribution

New recommendations include:

- Increase compensation and benefits and offer housing, childcare, and/or transportation stipends or assistance.
- Support training of rural health care and behavioral health providers to provide gender-affirming care.
- Use the Health Care Workforce Committee's strategy paper to guide collective actions to improve the wellness and resiliency of the health care workforce.
- Intentionally partner with K-12 and postsecondary education, employers, labor, workforce agencies, and community organizations to support health care education and career pathways programs.
- Increase remote work and telehealth opportunities.
- Support alternative licensing pathways to assess competency based on graduation, experience, and professional development.

Enhance Data Collection to Identify Successes, Challenges, and Priorities and Promote Evidence-Informed Strategies

- Survey health care workers to evaluate burnout and identify their challenges and priorities for wellness and resiliency improvement.
- Use REALD (race, ethnicity, language, and disability) and SOGI (sexual orientation and gender identity) data to help develop workforce wellness programs that provide culturally responsive support to workforce members
- Expand data collection and reporting to disaggregate the data and report on expanded race and ethnicity identity and include nativity and immigration information
- Improve data collection and accessibility to support health care employers for demand planning.

Enhance Data Collection to Identify Successes, Challenges, and Priorities and Promote Evidence-Informed Strategies

New recommendations:

- Investigate the benefits of licensure reciprocity to accept provider credentials from other states.
- Invest in data collection and research to improve the understanding of whether benefits to support housing, childcare, or transportation influence workforce diversity, recruitment and retention, and wellness and resiliency.
- Invest in data collection and research to investigate the barriers to K-12 education pathway programs to inform decisions of future investments.
- Implement accountability measures at the organizational and state level to assess the impact of cultural competency continuing education on the health care workforce
- Examine turnover to assess if employees change jobs or organizations or leave the health care sector all together and explore what benefits would bring them back to the health care workforce
- Evaluate the benefits and unintended consequences of workforce initiatives, funding, and incentive programs, which require funding for external evaluators.

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