

Title: Common Ground Health Workforce Consortium Date: May 15, 2023 Time: 2:00 – 3:30 pm

Attendees: Anthony Jimenez, Rochester Institute of Technology, Asim Johnson, 1199 SEIU, Ebony Caldwell, Rochester Regional Health, Jeff P. Toredo, Bryant & Stratton College, Jill Graziano, Rochester Regional Health, Joseph DiPoala, Ridgeview Internal Medicine Group, Kaitlyn Bond, Rochester Regional Health, Lee Koslow, Rochester Works, Marcia Lynch, Monroe Community College, Mary Zelazny, Finger Lakes Community Health, Robin Cole Jr., Monroe Community College, Shawn Futch, City of Rochester, Tricia Gatlin, Wegmans School of Nursing

Finger Lakes Performing Provider System Staff: Carol Tegas, Katherine Rogala, Kristina Owens Common Ground Health Staff: Anika Griffiths, Melissa Pennise, Melissa Wendland

# **Meeting Minutes**

Agenda Item	Discussion
Welcome and	Melissa Pennise
Introductions	Melissa Wendland
Workforce	Melissa Pennise:
Inventory	Melissa Pennise introduced the identified need to create an inventory of health
	care workforce training programs.
	<ul> <li>A prototype was sent by email for review.</li> </ul>
	<ul> <li>Currently, Rochester Works has engaged Camion Associates to develop a</li> </ul>
	workforce inventory that is focused on several sectors, health care included, in
	Monroe County only. Melissa invited Lee to share information on this project.
	Lee Koslow:
	Creating an inventory of workforce resources for the wider economic
	development in Monroe County.
	The audience for this inventory is individuals that operate, run, and fund
	workforce development programing.
	Can answer the questions:
	O Who else is doing similar work?
	<ul> <li>Is there a gap somewhere that's not being filled?</li> </ul>
	O What needs funding?
	Not limited to healthcare workforce.
	<ul> <li>Inventory of workforce development organizations in any industry.</li> </ul>
	<ul> <li>Includes K-12 education, post-secondary including and up to terminal</li> </ul>
	associates
	<ul> <li>Includes organizations that provide:</li> </ul>
	<ul> <li>Job search assistance</li> </ul>
	<ul> <li>Job search planning</li> </ul>
	o Counseling
	<ul> <li>Career development</li> </ul>
	<ul> <li>Supportive services for development program participants</li> </ul>
	<ul> <li>Work based learning</li> </ul>

- Job placement
- Inventory comprised of over 100 organization and about 350 different programs in Monroe County.
- Categorized by industry, services provided, target population, and geographically.

#### Melissa Pennise:

- Regional Inventory of the Healthcare Workforce Pipeline: compiling of information about the whole spectrum of training for healthcare workers.
- Link: Regional Inventory of the Healthcare Workforce Pipeline
  - Prototype stage
  - O What information is important to include?
  - O What programs are missing?
- Serve 9 Finger Lakes counties: Chemung, Livingston, Monroe, Ontario, Schuyler, Seneca, Steuben, Wayne and Yates.
  - Including 3 additional counties served by FLPPS
- Healthcare workforce only
  - Includes outreach to 6-12 education, career and technical education, community colleges and higher education beyond Associates degrees.
  - o Includes employer based trainings.
  - Includes wider resources including NYS funded programs and loan forgiveness
  - Target audience for the inventory is health care as it relates to long term care. Potential for expansion beyond (evergreen).

### Discussion:

**Melissa Wendland**: Regional partners are looking to us to help inform their efforts. The key is to assure that there is no duplicity and to assure that partnerships and opportunities are being leveraged.

**Carol Tegas**: The focus now is to make an impact in the need for community based workers in home healthcare. The CHW, CNA, and LPN track. That will help feed the pipeline.

**Jill Graziano**: The industry is healthcare and primarily the audience is hiring leaders? **Katherine Rogala**: There a number of stakeholders including employers, but importantly whether they launch workforce development programs or work with organizations that can help them develop workforce programming.

**Jill Graziano**: Is there any scanning, inventory, or connection that's being done with people who are looking for training themselves, I wonder how we connect that part? **Lee Koslow**: In my opinion it wouldn't be a scan or inventory to find those people [potential candidates]. We kind of know who they are, where they are, what they're doing etc. It's a matter of reaching them and providing them with the support that they need. Those are the challenges.

**Carol Tegas**: I think we've got a couple examples with the Home Health Aid program with the City of Rochester, MCC and the community colleges starting earlier and doing that recruitment. If we're going to talk about workforce metrics I think we need KPIs around, how we're engaging, what that process looks like, and who are the players that we need to partner with to elevate that engagement. So while we're building up the

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inventory for the gaps on the workforce development side we have the pool of candidates to pull from and make that connection.

**Carol Tegas**: I'm envisioning this healthcare workforce fair in the region in a central location.

**Melissa Wendland**: We are starting to find out about different schools and programs that are offering different types of fairs to get exposed to and learn about different opportunities.

# **Program Updates**

Carol Tegas: Reviewed a dashboard of the FLPPS workforce programs.

# **City of Rochester ARPA**

Home Health Aid Training program

Timeframe: 1/1/23 – 12/31/25
Planned impact: 660 individuals

Actual impact: 22 individuals

# **Monroe County ARPA**

• Long Term Care Workforce Program

o Planned impact: 232

Actual impact: not yet started

MCC Pathways

o Planned impact: 630

Actual Impact: not yet started

Timeframe: 3/1/23 – 12/31/26

#### **FLPPS**

Career Pathways and Social Support Program -

O Nursing Pathway - CNA & HHA, LPN, RN

Community & Social Service Pathway – CASAC

o Timeframe: 10/1/21 – 6/30/24

Planned impact: 560Actual impact: 500

# Marcia Lynch - MCC:

FLPPS Career Pathways and Social Supports Program

• Focuses on 2 career pathways

LPN and Clinical RN

Human and social services

 Developing LPN to RN bridge program in partnership with regional community colleges:

Monroe Community College

Finger Lakes Community College

Cayuga Community College

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- o Corning Community College
- Genesee Community College
- Creating job opportunities between high school and bachelor's level of education for social work programs.
- Working with academic programs to determine what employers need at different parts of the career.
- Bridges to success program offers supports to students upon starting the program.
  - Gas cards
  - Childcare counselor
  - Funding
- As students complete 3 goals they're given \$250.00 per goal.
- Once transitioned to the CNA program students are given a stipend and another larger stipend at 45 days of employment.

# **Katherine Rogala:**

## **Workforce Programs**

- Programs are collaborations between FLPPS, Licensed Home Health Care Agencies (HHCAs), Skilled Nursing Homes (SNFs) in Monroe County, Monroe Community College, training organizations, community-based organizations, and minority and women owned businesses.
- HHA, CNA, LPN, and RN candidates will be recruited, supported, and trained by HHCAs, SNFs, and collaborating partners to enter the healthcare labor force and embark upon a career pathway in healthcare that can assist them in increasing family income and lifting their families out of poverty.
- Recruitment campaign tactics include radio ads, website, organic and paid social media, community outreach, one page flyer, video testimonials, and earned media.
- Community based organizations are engaged as "recruiters" and are provided recruitment toolkits.

# **Workforce Metrics**

- FLPPS and other ARPA sub-awardees (40 projects) will submit the data reports on a quarterly basis throughout the four-year program timeframe.
- Monroe County will be developing and updating a dashboard that will be made available online.
- Monroe County has outlined data reporting requirements that include three different components:
  - Demographics: who the person is that is being serving
  - Outputs: what is being produced, delivered and/or provided to the individuals served. This is one of the primary sources of reporting that the County will use to determine the success of each of the programs.
     Outputs are divided into two categories

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 Outcomes: what are the tangible and measurable results of services provided. This shows how the individual served has improved their personal situation.

#### Discussion:

**Marcia Lynch**: One of the challenges I'd like to see come to the table is instructional support. The pipeline is great we can easily fill additional classes but we're struggling to get instructors.

**Lee Koslow**: What if major healthcare providers said we're going to start this program and we're going to take 10 of our experienced nurses and we're going to release you for 15 hours a week at full pay. What we're going to pay you to do is go and teach at these different educational programs.

**Tricia Gatlin**: That's where some of us from area colleges or universities are wondering how we can show up at the table differently and do something differently. The problem is the salary to pay.

**Dr. Robin Cole Jr.**: That's the difficulty when you even talk about the field of healthcare. A method I've used in other programs which doesn't work in nursing is you take a recent graduate and you slide them in to possibly teach.

**Kaitlyn Bond**: At Rochester Regional there's been significant talk about how can we have leaders be involved in instruction, how could we encourage our staff to do that and think about things differently. Given in some roles the lucrative compensation if they stay at the bedside.

**Lee Koslow**: That's a valid concern. I think that the answer is somewhere in the middle. Where you can't go back to what the pay was before, but you can't stay at the higher incentive pay either.

**Tricia Gatlin**: We have to be careful with what we're going to do and how we're going to do it. We need to study what the other states before us have done.

### Partner Feedback

**Melissa Wendland:** Reviewed the Finger Lakes Healthcare Workforce Consortium Framework

What are we really trying to achieve that is meaningful in our communities and in our region?

- We need students and trainers
- Opportunities for individuals to succeed
- Dissemination of information on opportunities

Does this framework still resonate? Is there anything that is missing from this framework?

#### Discussion:

**Jill Graziano**: I think that we need the part about having the people to plug into these very things.

**Melissa Wendland**: During COVID the county asked us to partner with them to support finding healthcare workers. They set up a portal on the county website to engage potential applicants. There was not one applicant.

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**Jill Graziano**: I think that websites are challenging. I think that we have to find a way to make it much easier.

**Melissa Wendland**: We need to continue to make this information available through our networks.

**Carol Tegas**: We're a little bit disconnected from that. I think we're going to have to be more intentional about the on the ground and not just the community based organizations. R-Centers etc.

### Melissa Wendland:

Workforce Metrics

Goal: Equitable health care workforce distribution Gender, SES, race/ethnicity, age, geography

How can we meaningfully measure to demonstrate progress or areas of need?

How are workforce programs addressing the workforce crisis?

### Discussion:

**Melissa Wendland**: Subgroup of community partners looking at data that's being collected in the community and would be willing to share with the group to being creating measureable baselines.

**Jill Graziano**: Most people who are hiring would be looking at their vacancy rates. Everyone might look at vacancy a different way but you can keep the math simple.

**Kaitlyn Bond**: Internally within our organization we've mapped out at least 16 areas that continue to have key deficits across the organization. Through forecasting we were able to see what are the current needs or the prior year needs, where do we hire, etc.? As an organization we have a forecast out to year 2026 to identify deficits. Happy to help the initiative in any way and share information from Rochester Regional.

**Melissa Wendland**: We're looking to gather a small group of partners to say, here's what data is available, here's what organizations are looking at, and what can we start with? Jill you identified vacancy rates. What are we doing to address that and show if we're moving the needle. I've also heard partners say they really want to understand retention. That will allow us to understand what we need to do programmatically as we're looking to sustain some of the positions we're building.

**Katherine Rogala**: Are we expanding diversity as well, looking at vacancy rates and how we're filling the positions.

**Melissa Wendland:** That's a very good point, that's why we really want to have a small group to thoughtfully dive into this and say here's what we would like to recommend and why. The healthcare workforce data is not available. What is available is not available to partners. We're all looking at this a bit differently so how can we bring all the stakeholders together and say what can we do together? That's really what we'd like to do.

# **Next Steps**

Common Ground Health will continue to utilize monthly healthcare <u>workforce</u> <u>newsletter</u> to share updates to the community.

Members are invited to share feedback on the workforce inventory to Melissa Pennise.

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Common Ground Health will reach out to convene a group for discussion of workforce metrics in June.

Future meeting

• Tentative - August 2023

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