



## Vermont Health Care Innovation Project Workforce Work Group Meeting Minutes

### Pending Work Group Approval

**Date of meeting:** Wednesday, October 21, 3:00-5:00pm, Conference Room 101, Vermont State Colleges, Stonecutters Way, Montpelier.

Agenda Item	Discussion	Next Steps
<b>1. Welcome and Introductions</b>	Mary Val Palumbo called the meeting to order at 3:00pm. A roll call attendance was taken and a quorum was not present.	
<b>2. Approval of August minutes</b>	Due to the lack of a quorum, approval of August 2015 minutes will be postponed until December 2015 meeting, with a correction to the minutes from Dawn Philibert: Chris Winters is not within the AHS Secretary's office, but at the Secretary of State's office.	
<b>3. Updates: Demand Modeling; NASHP conference on Community Health Workers; Future of Nursing Grant Relicensure Survey—2015; Other updates</b>	<p><i>Demand Modeling update:</i> Amy Coonradt provided an update. The State and its selected vendor have negotiated a contract, but the contract is still pending at CMMI for approval. We hope to execute a contract by the end of the calendar year.</p> <p><i>NASHP conference on Community Health Workers:</i> Georgia was not able to attend, but provided a written update, which Amy relayed to the group.</p> <ol style="list-style-type: none"> <li>1. CHWs will be a big part of the APHA meeting in November</li> <li>2. There is still a lot of disagreement about what a CHW actually is and it seems like states are all over the place in defining roles and responsibility.</li> <li>3. Medicaid recently changed their reimbursement structure (allowing more flexibility) and they are encouraging states to pursue more SPAs and waivers to support this work. Note: this isn't really applicable to Vermont due to our waiver, but a good information to have.</li> <li>4. HRSA has interest in this area, but is concerned that we can't really count CHWs so therefore we can't change how we pay them or credential them.</li> <li>5. CDC was non-committal, other than to say that integration of CHWs is important and we need to better understand what they do around the country.</li> </ol> <p><i>Future of Nursing Grant Relicensure Survey:</i></p>	

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	<p>Mary Val provided an update. The project has received two additional years of funding, and will select two positions to receive Community Health Worker training through the Community College of Vermont. There are currently discussions on how the CHWs can help the nurses with various populations and different settings. Questions still remain regarding how to count CHWs and hand off patients to them safely. The community health workers for this grant were identified by the VNA of Chittenden county.</p> <p><i>Other statewide updates:</i></p> <p>Paul Bengtson shared that the Robert Wood Johnson Foundation visited St. Johnsbury as part of their rethinking about redirecting future foundation investments in healthcare reform. They expressed interest in Accountable Communities for Health work in St. Johnsbury and how these structures can function and bring together various community and social services to address issues for the future.</p> <p>Lorilee Schoenbeck gave an update on the development of postgraduate career training and resident training program for naturopaths.</p> <p>Tom Alderman discussed a work group established by the legislature that will function with federal funds that come through the Agency of Education. The work group will work to create statewide programs of study and establish common outcomes instead of having different programs at different technical centers, and will also take an inventory of currently successful programs and try to replicate them around the state and scale them up.</p>	
<p><b>4. Update: Work Force Supply Data/Surveys at VDH</b></p>	<p>Dawn Philibert gave an update on provider reports and surveys and led a discussion on next steps for the work group. The following points were discussed:</p> <ul style="list-style-type: none"> <li>- At present VDH has completed surveying and reporting on the 2013 Dentist relicensure surveys. For larger professions (also including physicians and physician assistants) VDH tries to see a census (close to 100% response rate as possible)</li> <li>- There is still a backlog of data and professions to survey, but need to discuss going forward how to best analyze and use this work force supply data</li> <li>- The group discussed ways to flesh out the quantitative findings from the survey data with more qualitative information to paint a fuller picture of Vermont’s provider supply landscape and any potential shortages.</li> <li>- An “insider” opinion of each profession’s data would be helpful, as well as any legislative/environmental/regulatory changes that could be affecting the data.</li> <li>- Discussed fleshing out data for each profession in this way and then presenting it to the work group. However, it would not be feasible to do this for all 58 professions currently being surveyed, on a rolling basis.</li> <li>- Dawn Philibert will put together a straw man proposal for fleshing out data with input from Peggy Brozicevic and Moshe Braner from VDH.</li> <li>- Discussed where on the VDH website this information on all 58 provider types will be housed—the VDH website is currently being redesigned, and the information can be put wherever is most useful and meaningful.</li> </ul>	<p><b>Dawn Philibert to put together a proposal with input from other VDH staff on moving ahead with these reports</b></p>

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<p><b>5. Discussion: Strategic Plan – Recruitment and Retention recommendations</b></p>	<p>Mary Val led the work group in a discussion of the three “Recruitment and Retention” recommendations from the Health Care Work Force Strategic Plan. The group discussed the following:</p> <p><i>Recommendation #4:</i></p> <ul style="list-style-type: none"> <li>- Need to be able to look at regions, not the state as a whole, when designating shortage areas: Northeast Kingdom may have more of a PCP shortage than Chittenden County</li> <li>- Vermont at a disadvantage (compared to other, larger states), due to road system and difficult terrain. Though there may be a provider within the 25 mile radius cut-off, they may be more difficult to get to than in other states with more navigable road systems.</li> <li>- Various players in the state have been working on this initiative for 10+ years, with heavy support from Bernie Sanders’ office. This item is currently on the back burner, and the group will table it and revisit it every year to monitor status and potential future action.</li> </ul> <p><i>Recommendation #5 &amp; #6:</i></p> <ul style="list-style-type: none"> <li>- How are students in high schools/technical centers being advised in this area [that selection criteria at Vermont colleges should include an assessment of qualities which make a student more likely to specialize in primary care and practice in rural, underserved areas], and is there an extra level of consideration that should be given to students around this? What do teachers in the technical center health programs know about this, and what do high school guidance counselors know about this?</li> <li>- Through the example of dentists and dental residency programs, it has been shown that 50% of those in a dental residency program remained in Vermont, and that 60% of dentists in Vermont are recruited out of dental residency programs.</li> <li>- Suggested that the group could do more monitoring of how many students come to the state, and how many end up staying to practice.</li> <li>- Lorilee Schoenbeck suggested that the work group write a letter to the deans of the Medical Schools, recommending that any school preparing students for primary care should consider students from a rural area and have rotations in rural areas.</li> <li>- Students are more apt to go on to practice in a rural area if they had a rural rotation during residency/training; a significant barrier to ensuring more rural training is lack of preceptors and rotation opportunities in rural areas. Is there a possibility of finding some funding from the budget to support more rural rotations?</li> <li>- The group will further discuss possibilities of increasing preceptors at the next meeting, along with other ways to create a culture of primary care.</li> </ul>	

Agenda Item	Discussion	Next Steps
6. Public Comment, Wrap-Up, Next Steps, Future Agenda Topics	There was no public comment.  <b>Next Meeting:</b> December 16, 2015, 3:00-5:00pm; 4th Floor Conf Room, Pavilion Building, 109 State Street, Montpelier, VT	

# VHCIP Workforce Work Group Member List

Roll Call: 10/21/2015

Member		Member Alternate		June Minutes	Organization
First Name	Last Name	First Name	Last Name		
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David	Adams	Jay ↓	Ramsby ↓		UVM Medical Center
Tom	Alderman ✓				Department of Education
Molly	Backup ✓				Consumer Representative
Mat	Barewicz	Michelle	Kupersmith		Department of Labor
Rick	Barnett				Vermont Psychological Association
Ethan	Berke				Dartmouth Institute for Health Policy & Clinical Practice
David	Blanck	Lindsay	Herbert ✓		Consumer Representative
Peggy	Brozicevic				AHS - VDH
Denise	Clark ✓				Consumer Representative
Peter	Cobb ✓				VNAs of Vermont
Ellen	Grimes ✓				Vermont Technical College
Lory	Grimes				Northeastern Vermont Regional Hospital
Monica	Hutt <i>light</i> ✓				AHS - DAIL
Lorraine	Jenne				DA - HowardCenter for Mental Health
Janet	Kahn ✓				UVM College of Medicine
Nicole	LaPointe ✓				Northeastern Vermont Area Health Education Center
Robin	Lunge				AOA
Charlie	MacLean ✓				University of Vermont
Madeleine	Mongan ✓				Vermont Medical Society
Stephanie	Pagliuca				Bi-State Primary Care
Mary Val	Palumbo ✓				University of Vermont
Dawn	Philibert ✓				AHS - VDH
Lori Lee	Schoenbeck ✓				UVM Integrative Medicine
Nancy	Shaw ✓				Vermont State Colleges
Beth	Tanzman				AHS - DVHA - Blueprint
Deborah	Wachtel				Consumer Representative
<del>Burton</del>	<del>Wilcke</del>	Wade	Parson		University of Vermont
Chris	Winters				Office of Professional Regulation

27 NO QUORUM

## VHCIP Workforce Work Group Participant List

Attendance:

10/21/2015

C	Chair
IC	Interim Chair
M	Member
MA	Member Alternate
A	Assistant
S	VHCIP Staff/Consultant
X	Interested Party

First Name	Last Name		Organization	Workforce
David	Adams		UVM Medical Center	M
Tom	Alderman	here	Department of Education	M
Susan	Aranoff	here	AHS - DAIL	S
Molly	Backup	here	Consumer Representative	M
Ena	Backus		GMCB	X
Mat	Barewicz		Department of Labor	M
Rick	Barnett		Vermont Psychological Association	M
Susan	Barrett		GMCB	X
Paul	Bengston	here	Northeastern Vermont Regional Hospital	X
Ethan	Berke		Dartmouth Institute for Health Policy & Clinical Practice	M
Charlie	Biss		AHS - Central Office - IFS / Rep for AHS - DMH	X
David	Blanck		Consumer Representative	M
Peggy	Brozicevic		AHS - VDH	M
Amanda	Ciecior		AHS - DVHA	S
Denise	Clark		Consumer Representative	M
Peter	Cobb		VNAs of Vermont	M

Amy	Coonradt	<i>here</i>	AHS - DVHA	S
Elizabeth	Cote		Area Health Education Centers Program	X
Karen	Crowley		AHS - Central Office - IFS	X
Kathy	Demars		Lamoille Home Health and Hospice	X
Tim	Donovan		Vermont State Colleges	M
Terri	Edgerton		AHS - Central Office - IFS	X
Gabe	Epstein		AHS - DAIL	S
Erin	Flynn		AHS - DVHA	S
Lucie	Garand		Downs Rachlin Martin PLLC	X
Christine	Geiler		GMCB	S
Ellen	Grimes		Vermont Technical College	M
Lory	Grimes		Northeastern Vermont Regional Hospital	M
Karen	Hein			X
Monica	<del>Howe</del> <i>right</i>	<i>here</i>	AHS - DAIL	M
Deanna	Howard		Dartmouth	X
Lorraine	Jenne		DA - Howard Center for Mental Health	M
Joelle	Judge	<i>here</i>	UMASS	S
Janet	Kahn			M
Sarah	Kinsler			S
Kelly	Lange		Blue Cross Blue Shield of Vermont	X
Nicole	LaPointe		Northeastern Vermont Area Health Education Center	M
Robin	Lunge		AOA	IC
Charlie	MacLean		University of Vermont	M
Carole	Magoffin ✓	<i>phone</i>	AHS - DVHA	S
Georgia	Maheras		AOA	S
Jackie	Majoros		VLA/LTC Ombudsman Project	X
Mike	Maslack			X
John	Matulis			X
Angel	Means		Visiting Nurse Association of Chittenden and Grand Isle Counties	X
Marisa	Melamed		AOA	S
Sarah	Merrill		DNH	X
Madeleine	Mongan		Vermont Medical Society	M
Meg	O'Donnell		UVM Medical Center	A
Stephanie	Pagliuca		Bi-State Primary Care	M

Mary Val	Palumbo	West	University of Vermont	C
Annie	Paumgarten	West	GMCB	S
Dawn	Philibert		AHS - VDH	S/M
Luann	Poirer		AHS - DVHA	S
Lori Lee	Schoenbeck	West	Consumer Representative	M
Julia	Shaw		VLA/Health Care Advocate Project	X
Nancy	Shaw		Vermont State Colleges	M
Nancy	Solis		Dartmouth Institute for Health Policy & Clinical Practice	A
Joy	Sylvester		Northwestern Medical Center	X
Beth	Tanzman		AHS - DVHA - Blueprint	M
Tony	Treanor		DA - Northwest Counseling and Support Services	X
Deborah	Wachtel		Consumer Representative	M
Marlys	Waller		DA - Vermont Council of Developmental and Mental Health Serv	X
Kendall	West			X
James	Westrich		AHS - DVHA	S
Burton	Wilcke		University of Vermont	M
Chris	Winters		Office of Professional Regulation	M
Cecelia	Wu		AHS - DVHA	S
				68

Betty Keller, M.D. here - consumer representative  
 Roland Ransom  
 Jason Grabarino - UVM  
 Wade Carson - UVM  
 Kelly Wagner, M.D.