Agency Recommendation Summary

The Health Workforce Council is charged with identifying and addressing state health workforce shortages. On the Council’s behalf, the Workforce Board requests an ongoing 1.25 FTE to staff the Council including helping to coordinate policy development, analyzing and recommending action on health workforce data, and exploring and advocating for innovative programs and models. The Council also requests funding to continue the nationally recognized Health Workforce Sentinel Network, which provides real-time information on emerging workforce trends from Washington’s healthcare employers. Critical federal funding sources that support the work of the Council and Sentinel Network have ended, and limited Workforce Board resources have reduced the Council’s capacity to conduct vital work. No state resources have been dedicated to staff the Council since it was established in statute in 2003.

Program Recommendation Summary

Fiscal Summary

Dollars in Thousands

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Package Description

Health Workforce Council Overview
The Health Workforce Council (Council) is made up of a broad mix of healthcare stakeholders. They include professional/occupational groups, employers, organized labor, healthcare facilities, education providers, and government agencies and regulators. This wide range of health and education stakeholders recommends policy and funding priorities, and helps bring a unified voice to statewide healthcare needs.

The Workforce Board, by statute (RCW 28C.18.120), convenes the Council and provides the research, policy, and administrative support to advance its work. Policymakers, healthcare organizations, and even other states, routinely contact the Workforce Board with questions or requests for information or assistance on health workforce issues. As an example, the Council assisted the Healthier Washington team by developing a list of recommendations and priorities for the workforce component of the Healthier Washington plan. The Council was funded to lead the development of a comprehensive policy report on the state’s behavioral health workforce in 2016-17, including policy recommendations, provider data, and a deep dive on each of the state’s most common behavioral health occupations.

The Council benefitted from a federal healthcare grant when it was first created 15 years ago. However, those funds have ended. The Workforce Board, a small agency with a broad research and policy portfolio, is limited in its ability to support the Council in its continuing work. With a more stable staff allocation, the Council could engage in a lot more of this type of work, including further research into behavioral health, long-term care, or other specialty areas.

With dedicated staff support the Council could identify further opportunities to:
- Address current and emerging health workforce shortages.
- Provide a deeper analysis of shortages and/or uneven distribution of providers by occupation and geographic area.
- Explore and test health occupation data to create data-driven healthcare solutions.
- Tackle health workforce challenges by investigating and providing feedback on policies that provide clear career pathways for existing healthcare workers, and attract new people to the field.

Council Funding Poses Continuing Challenge
The Council has never been directly funded by the state budget, and securing dedicated staff support has been a Council priority for several years. The Council has included a request for dedicated staff in its recommendations to
policymakers since 2015. In the Council’s early years, beginning in 2003, the Workforce Board supplemented the work of the Council by leveraging federal funds, including the Governor’s discretionary workforce dollars, along with healthcare grants. As those limited funds and grants ended, the Workforce Board has done what it can to support the Council’s work, including dipping into its base budget, to support the Council since federal grant funding ended in 2012. Because the Workforce Board is a small agency, this support has been allocated as available, on a limited basis, from the agency’s small cadre of policy, administrative, and research staff.

Providing this support has been especially difficult since the passage of the federal 2014 Workforce Innovation and Opportunity Act (WIOA). The Workforce Board faces many new obligations in helping coordinate and implement this far-reaching federal act throughout the state’s workforce system. The agency’s ability to maintain the continued work of the Council is increasingly challenging; an expanded health workforce research and analysis portfolio is not possible.

**Sentinel Network Provides Key Feedback, Even as Funding is Scheduled to End**

Making sound healthcare policy decisions is difficult, even with solid data. This is especially true in healthcare, where positions are evolving quickly, hiring challenges vary widely by region, and technology is spurring rapid change. Faced with this challenge, the Health Workforce Council issued a recommendation that led to the creation of a groundbreaking, online healthcare portal that has become a nationally recognized model since launching in 2016.

Dubbed the Health Workforce Sentinel Network (http://www.wtb.wa.gov/HealthSentinel/), this portal gathers frontline feedback from Washington’s healthcare employers on hiring challenges and emerging workforce needs from all parts of the state. In order to know more quickly—and with more certainty—where shortages and the unmet need for specific skills are affecting particular regions of the state, employer “sentinels” in the Network regularly report on changes in workforce demand at their organizations, and contribute to the discovery of emerging workforce trends. Sentinels provide information about the facility types they represent, Washington state counties from which their client and/or patient population is drawn, and health workforce concerns over the previous six months. Information from the Sentinel Network has been used for local workforce planning including projecting recruitment needs, setting policy, and writing grants. The Sentinel Network is administered by the Workforce Board, in partnership with the University of Washington Center for Health Workforce Studies.

Unfortunately, funding for the Sentinel Network is about to run out. Initial funding was provided by Washington’s Health Care Authority through its federally-funded Healthier Washington initiative. This funding ended earlier this year, in January, 2018. As a stop-gap, the Health Workforce Council was able to secure one-year bridge funding, with support from Governor Inslee’s federal workforce discretionary dollars, to continue the Network until June 30, 2019. But there are no funds to continue this work beyond that date. The Council is requesting, via the Workforce Board, ongoing state funds ($100,000 annually) to continue the Sentinel Network, rather than close it after three years of operation.

**Critical Time in Health Workforce Planning**

Closing the Sentinel Network would not only end our state’s real-time data from employers on health workforce shortages, but it would come at a time when other states are beginning to implement Washington’s model. We are currently in negotiations with health workforce planners in Connecticut, California, and Hawaii. These states are weighing whether to contract with Washington to implement the Sentinel Network in their own states.
Meanwhile, this is a critical time for health workforce planning in our own state, as Washington’s Accountable Communities of Health work to implement the Healthier Washington Medicaid transformation plan in their individual communities. The Sentinel Network is one of the few sources that offers important, region-specific data on workforce issues—from hiring challenges in rural and underserved areas, to the changing skill sets demanded of healthcare workers as occupations evolve. A recent Council meeting again brought attention to the need to continue this work. Representatives from several healthcare organizations in attendance stated that they would be willing to provide limited funding to expand the reach of the Sentinel Network, in partnership with the state’s investment.

The Sentinel Network provides a rare regional look (most data is statewide, and has a year or more lag in publication) on employer needs. This resource is even more valuable, as it is offering a look at employer needs in near real-time, which can help local communities and education providers more quickly begin to address these needs through additional program slots, change in curriculum, or other targeted solutions. The Network has five data collection points to date, and can highlight trend lines and regional disparities. This resource complements other data sources, but can also pinpoint when annual statewide data is not sufficient in telling the full story of what’s happening. This is an important role, as healthcare is rapidly changing in response to federal and state laws, as well as emerging research and interest on the value of integrated, team-based care. In many cases, the Sentinel Network complements other data sources, helping tell the full story of what’s happening to our state’s health workforce.

The Sentinel Network provides:

- Rapid turnaround signals of workforce demand changes.
- Information about the “how and why” behind health workforce demand signals.
- Details about the skills needed by employers to fill specific roles.
- Information about local conditions that may make hiring difficult.
- An easily accessible, online platform that allows the full network of stakeholders to provide feedback.

Without ongoing funding, the Sentinel Network will close. This detailed, ground-level information will end, as will the momentum among Washington healthcare providers to help identify and solve workforce problems in a coordinated way.

**Assumptions and Calculations**

_Expansion or alteration of a current program or service:_
Not applicable to this decision package.

_Detailed assumptions and calculations:_
This request, if funded, would enhance the information available to the healthcare community and policymakers by providing a dedicated 1.25 FTE focused on health workforce research, analysis and program development, as well as the continued operation of the Sentinel Network, at an ongoing cost of $100,000 per year.

_Workforce Assumptions:_
Program requires 1.25 FTE total. This includes 1 FTE of a Program Specialist - Range 60 and .25 of an Administrative Assistant 3 - Range 39. Detailed assumptions related to salary calculations is included as an attachment to this decision package.
Strategic and Performance Outcomes

**Strategic framework:**

**Goal 4: Healthy and Safe Communities**

The Health Workforce Council’s overarching goal is to ensure Washington residents have access to a broad range of healthcare providers throughout the state. In particular, the Council addresses Goal 4 (Strategy 4.3): “Increase the percentage of residents who report they have a personal doctor or health care providers from 75 percent to 82 percent by 2018.” The Council is actively working on this goal, and could do even more work to achieve it with dedicated staffing that allows for more research, policy work and advocacy. The Council has also addressed Goal 4 (Strategy 3.2). This strategy focuses on providing care for residents in their homes as long as possible. For long-term care needs, the Council has recommended in the past that a workgroup be convened to focus on recruitment, training, and retention of entry-level healthcare providers such as home care providers and certified nursing assistants.

**Goal 1: World Class Education**

The Health Workforce Council, through stakeholder feedback, research, and reports, and real-time data provided by the the Health Workforce Sentinel Network, works to expand access to healthcare education programs and increase the number of education opportunities that align with the state’s health workforce needs. This work aligns with Goal 1 (Strategy 1.3), “Increase annual attainment of certificates, apprenticeships and degrees from 72,000 to 149,000 by 2023.” In the mid-2000s, for example, the Council led an initiative to dramatically ramp up access to nursing courses and programs in response to a critical nursing shortage. The Council used American Recovery and Reinvestment Act (ARRA) funds to do this. The Council is well-positioned to weigh in on and lead similar strategies to increase the number of healthcare providers graduating from Washington’s postsecondary education programs. Ground-floor data from employers responding through the Health Workforce Sentinel Network can help ensure these education options align with healthcare needs by region.

This proposal meets many of the strategies outlined in the Workforce Board’s strategic plan, Talent and Prosperity for All. In particular, this request speaks to to the portion of the plan that focuses on strengthening business engagement in the workforce system. By engaging business—in this case healthcare providers—the Health Workforce Council is better able to advocate for training programs that solve regional health workforce challenges, as well as champion incentive programs that encourage healthcare personnel to practice in rural and hard-to-serve areas. The Council’s broad membership, which includes healthcare providers and other industry professionals, helps ensure this work is on point.

The Sentinel Network is a prime example of engaging industry proactively in planning for their future workforce. By engaging in these periodic check-ins about their hiring and retention needs, industry is providing valuable information to education providers, which can then be used to build up or adapt programs to meet these evolving needs in their health workforce.

**Performance outcomes:**

By funding this request for dedicated staff support, the Council could conduct more extensive research, analysis, and policy development on the state’s key health workforce issues. This work, coupled with feedback from the state’s healthcare employers through the Health Workforce Sentinel Network, helps policymakers, education institutions, and healthcare providers and facilities more effectively allocate limited training funds, and shape education programs to meet Washington’s evolving healthcare needs.
The Sentinel Network has played a pivotal role in surfacing ground-floor, healthcare needs from employers across the state—from hiring challenges to the changing skill sets required of healthcare professionals. Continuing to fund the Sentinel Network would ensure this vital work continues. The Sentinel Network makes findings readily available to educators, planners, and policymakers who can respond to signals of emerging workforce needs. Continuing this work would allow for additional, regular data on employer needs, and could serve as a model for other industries beyond healthcare.

Fully staffing the Council, and continuing to fund the Sentinel Network, supports ongoing initiatives to increase the number of trained healthcare providers through specific postsecondary program completions (Goal 1) and increasing access to healthcare professionals to all Washington residents (Goal 4). With the necessary resources, this work will continue in a coordinated, data-driven manner—rather than in an ad hoc, scattered fashion.

Other Collateral Connections

Intergovernmental:
The Council is made up of a broad mix of healthcare stakeholders, including Accountable Communities of Health (ACH) regions, labor organizations, education providers, facilities, and provider groups. The members have consistently supported both the request for staff support to the Council, and have actively discussed how to continue the Sentinel Network before funding runs out next year. We are not aware of any opposition to this request.

Stakeholder response:
See above. No anticipated concerns.

Legal or administrative mandates:
Not applicable to this decision package.

Changes from current law:
Not applicable to this decision package.

State workforce impacts:
Not applicable to this decision package.

State facilities impacts:
Not applicable to this decision package.

Puget Sound recovery:
Not applicable to this decision package.

Reference Documents

- 2018 Health Workforce Council Membership.docx
- Council Leadership Support Letter.docx
- Health Workforce Council Sentinel Network Decision Package Cost Analysis.xlsx
- Sentinel Network Data Snapshots.pdf

IT Addendum

Does this Decision Package include funding for any IT-related costs, including hardware,
software, (including cloud-based services), contracts or IT staff? No