

Georgia Healthcare Workforce Commission

Meeting

November 30, 2022

Members Present

Caylee Noggle, Chair
Scott Bohlke
Mary Chatman
Debi Dalton
Sherry Danello
Janee Dock
Shawn Little
Sally Perry

Rick Roche
Scott Steiner
Tanya Sudia
Courtney Terwilliger
Pete Quinones
Clark Hill
Jean Sumner

Members Absent

None

The Georgia Healthcare Workforce Commission held its meeting via Zoom teleconference and in person at St. Joseph's/Candler Hospital in Savannah, Ga. The meeting was recorded. The agenda is attached and made an official part of these Minutes.

Shawn Walker, Director of Project Management for the Georgia Department of Community Health, opened the meeting and welcomed attendees to the Healthcare Workforce Commission's second regular meeting which was primarily focused on reviewing draft recommendations that were developed from a compilation of inputs collected from Commission members and external stakeholders.

Paul P. Hinchey, President and CEO of St. Joseph's Candler Hospital, welcomed attendees.

Shawn Walker took official roll of the Commission members in attendance and provided information on the format of the meeting.

Presentation and Discussion

Shawn Walker led the Commission through a review of the proposed opportunity levers and example initiatives:

- General agreement that the opportunity levers were grouped in appropriate categories.
- A1: Retain existing workers
 - Loan forgiveness

Commission members noted that loan payback/bonus programs may need to be backloaded, so that students do not take the bonus and immediately move elsewhere.

Commission members did not align on the ideal length of time for these commitments (e.g., 2 years vs 4) but noted that commitments would need to generate enough impact to justify the cost.

- Workplace violence

Workplace violence is a major issue in healthcare worker retention. Cases are inadequately prosecuted, and traumatic events may push younger workers to leave the medical field quickly.

Moreover, even with prosecution and zero-tolerance policies for violence, the damage of workplace violence is done when it occurs. Strict punishments are unlikely to deter those behaving violently in a medical setting and equally unlikely to retain workers after a violent incident.

- C6: Increase total seats and faculty availability

- Increasing total seats

Medical education programs are notoriously difficult, but GPA is not a direct indicator of success in the profession. Oftentimes, students with low GPAs have other life commitments (childcare, working 40+ hours a week) which take away from potential performance.

Two ways to potentially help these students stay enrolled are offering tutoring services and creating work-study opportunities.

- Faculty availability

The Board of Nursing (BON) could make several language changes that would allow additional flexibility in the healthcare education space.

These include allowing part-time faculty to be counted in student-to-faculty ratios, expanding the number of students allowed to shadow nurses at a given time in clinical settings, and increasing the allowed proportion of part-time nursing faculty at institutions.

- D10: Target a larger pool of future students

Commission members noted that high school programs aimed at funneling students into healthcare professions immediately after graduation are good in theory; however, these programs often struggle to achieve buy-in from hospitals/other medical facilities due to perceived risks (e.g., need for increased liability insurance). Likewise, students may be less enthusiastic for or aware of such programs which may benefit from increased marketing.

Technical colleges may be losing money on medical-related programs; therefore, it is difficult to compel them to offer additional seats without supporting them with additional incentives.

- Additional Takeaways/Comments:

Good data surrounding healthcare workforce retention is paramount. There is a need for a centralized database for healthcare data and more specifically, workplace data among the healthcare profession including where the greatest need resides, pay scales across the state, vacancies across the state, and transparent compensation information.

The “top 3” are heavily focused on nursing. We should incorporate cross cutting recommendations of specific initiatives for EMS and behavioral health as they benefit less

from the wide sweeping things that have been prioritized but require necessary state-level improvements.

Commission members would like more information on how other states have retained healthcare workers at a higher rate vs. GA.

Closing Remarks

Chair Noggle thanked the Commission members and reminded the audience that the Healthcare Workforce Commission would hold its third Regular meeting on December 12, 2022 in Atlanta, Georgia.

AGENDA

Georgia Healthcare Workforce Commission- Regular Meeting #2
Zoom Meeting

St. Joseph's Candler Hospital
Marsh Auditorium
5353 Reynolds Street
Savannah, GA 31405

Wednesday, November 30, 2022
10:00 a.m. – 2:00 p.m.

1. Opening Remarks
2. Recap and discuss framework
3. Discuss opportunity levers
4. Discussion / Q&A
5. Lunch
6. Recap and discuss additional opportunity levers
7. Discussion / Q&A
8. Closing Remarks