Healthcare Workforce Commission

Georgia Healthcare Workforce Commission Meeting One

August 29, 2022

Commission Timeline

	Key Events	Key Deliverables by Staff to Commission
July Wednesday, 20th	Commission Kickoff 7/20 3p Virtual Kickoff	 Identify and schedule interviews with known key stakeholders Healthcare workforce landscape (e.g., trends, pain points) and professions for focus
August Monday, 29th	Meeting #1 8/29 2:30p Mercer University-Atlanta, Atlanta	 Analytics and material to support 1st meeting & 1st open forum Preliminary insights from surveys and interviews
September Thursday, 29th	Open Forum #1 9/29 10a Augusta University, Augusta	 Analytics and materials to support 2nd Commission meeting Fact base on the current workforce for each preliminarily identified profession. Fact base for scenarios on labor force entrants
October Tuesday, 18th	Open Forum #2 10/18 2:30p Albany Technical College, Albany	 Analytics and materials to support 2nd Forum meeting Consolidated evidence base to use for alignment on final list of priority areas and professions Fact base on potential opportunities to close the healthcare gap
November Wednesday, 30th	Meeting #2 11/30 1p TBD, Savannah, Georgia	 Analytics and materials to support 3rd Commission meeting Synthesis of interviews with leading training and educational organizations Draft final communications
December Monday, 12th	Meeting #3 12/12 1p TBD, Atlanta, GA	 Consolidated material to socialize findings, direction, initial conclusions and next steps with all stakeholders Final communications outreach plan

Note: Commission E-Mail Address: <u>HCWF.Commission@dch.ga.gov</u>

Georgia Healthcare Workforce Commission Meeting #1

Agenda

1	Review of Goals for Today	10 minutes
2	Review Healthcare Workforce Fact Base	60 minutes
3	Q&A and Open Discussion	20 minutes

Today's Objectives



Review projections and trends in healthcare workforce demand and supply



Highlight perceived pain points within the healthcare workforce



Review input from the survey and interviews of Commission members

This fact base focuses on seven healthcare workforce categories

Primary Care

Examples:

- Family Medicine Physicians
- Nurse Practitioners

Allied Primary Care

Examples:

Medical Assistants

Specialty Care

Examples:

- Surgeons
- Medical Specialists

Allied Specialty Care

Examples:

- · Respiratory Therapists,
- Physical Therapist Aides

Dentistry

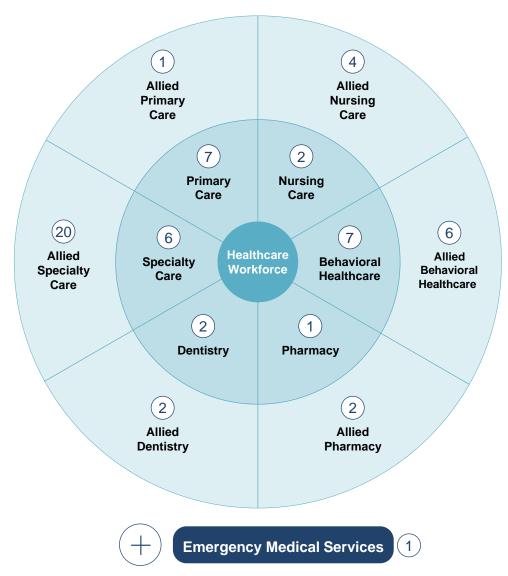
Examples:

- Dentists, General
- Dentists, All Other Specialists

Allied Dentistry

Examples:

- Dental Assistants
- Dental Hygienists



Nursing Care

Examples:

- Registered Nurses
- Licensed Practical and Licensed Vocational Nurses

Allied Nursing Care

Examples:

- Nursing Assistants
- Home Health and Personal Care Aides

Behavioral Healthcare

Examples:

- Psychiatrists
- Therapists
- Psychologists
- Counselors

Allied Behavioral Healthcare

Examples:

- Psychiatric Aides
- Recreational Therapists
- Psychiatric Technicians

Pharmacy

Examples:

Pharmacists

Allied Pharmacy

Examples:

- Pharmacy Aides
- Pharmacy Technicians

Healthcare Workforce Fact Base



Demand/Supply Assessment

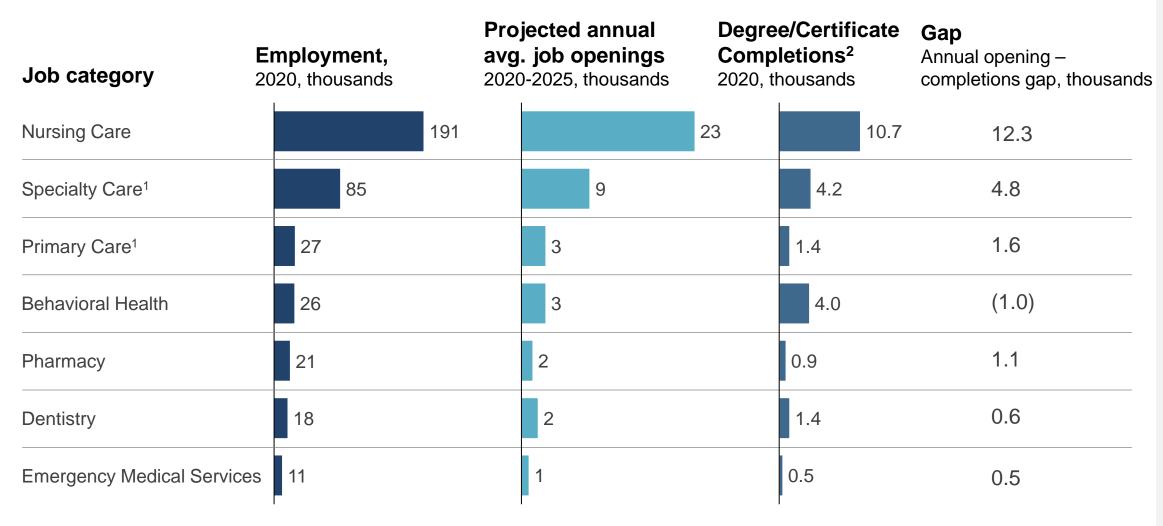
Demand Assessment

Supply Assessment

While variations exist by profession, healthcare demand is growing faster than the supply of healthcare practitioners

- Overall population growth and Georgia's aging population are driving increased demand for healthcare
- At the same time, there is a shortage of healthcare practitioners in Georgia; the share of unfilled roles has nearly doubled since 2020
- The supply of workers does not meet today's demand, and sources of new talent are not filling the growing gap

The demand supply gap may grow in most categories as degree completions are lower than forecasted job openings



^{1.} Medical assistants are included both in primary care and specialty care. Jobs, openings and completions were distributed based on the relative workforce size of both groups (33% in primary care, 67% in specialty care)

Source: Lightcast™ (formerly EMSI-Burning Glass)

^{2.} To adjust for duplication, the number of completions within each instructional program (CIP) was distributed to each corresponding occupation (SOC) by way of a weighted average based on current employment within occupations. Completions were distributed taking into consideration typical entry level education requirements for each occupation. Graduates from doctor's degree in medicine (mapped to psychiatrists, as well as physicians in primary care and specialty care) are counted in the behavioral health, primary care and specialty care categories

Georgia needs roughly 680 practitioners to remove Health Professional Shortage Area designations

Peer states	Total primary care HPSA ¹ designations ²	Population of designated HPSAs (M)	Practitioners needed to remove HPSA designation ³
Virginia	124	2.0	205
Louisiana	160	2.4	256
Tennessee	133	2.4	259
Colorado	120	1.1	260
North Carolina	213	2.8	416
Michigan	269	2.9	482
Illinois	263	3.3	534
Washington	203	3.0	626
Arizona	236	3.2	653
Georgia	243	3.2	673
Texas	424	7.3	969
Florida	276	6.3	1,505

- Commission Member Quote

Source: Kaiser Family Foundation (KFF); as of September 30, 2021

For physicians,
we need to make the State
more attractive for those
who want to come, but also
for those who want to go to
less populated areas

^{1.} Health professional shortage areas

^{2.} Area must have a population-to-provider ratio of at least 3,500-to-1 to be considered as having a shortage of primary medical care providers

^{3.} Number of additional primary care physicians needed to achieve a population-to-primary care physician ratio of 3,500 to 1 in all designated primary care HPSAs, resulting in their removal from designation

Across Primary Care and Allied Primary Care, current completions are not enough to close the gap



"... physicians cannot get their work done without the support of the other staff involved in patient care"



There were **292 new primary care physician openings** in 2020. Of the **568 GA physician graduates**, historic trends would suggest that roughly **200** become primary care physicians, and some of those may leave the state^{1,2}



Non-physician primary care completions (i.e., NP, PA, Allied Primary Care) fill less than 50% of the open positions. For example, there were 1,020 new openings for NPs but only 339 completions in 2020



The challenge extends to the **allied professions** where there **were 4,193 medical assistant openings and less than 900 completions in 2020**

"...Primary Care
physicians that are welleducated [are the most
challenging to
recruit for]"

"[As] shown in multiple studies, a good core of primary care will be great for the overall health of the area as well as most cost effective"

- Commission Member Quotes

Both quantitative and qualitative evidence suggest imbalances within the nursing category





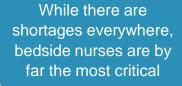
Nurses [are] the role of healthcare that provides the highest amount of direct care/interface with the patient



There were 2,065 new openings for LVNs and 358 completions in 2020. This talent gap would grow over time if openings continue to outpace supply



In a recent survey of nurses providing direct patient care, 29% indicated that they are likely to leave their current direct patient care position in the next year, up from 22% a year ago1





Commission members' interviews suggest that most attention is needed in the **Nursing segment where the** perceived imbalance is most severe and consequential

Nurses are leaving the profession in large numbers and there are many challenges to training new nurses

- Commission Member Quotes

Healthcare Workforce Fact Base



Demand/Supply Assessment

Demand Assessment

Supply Assessment

Demand for healthcare services is growing and reflected in the demand for healthcare workers

1

Overall population growth and Georgia's aging population are driving increased demand for healthcare

2

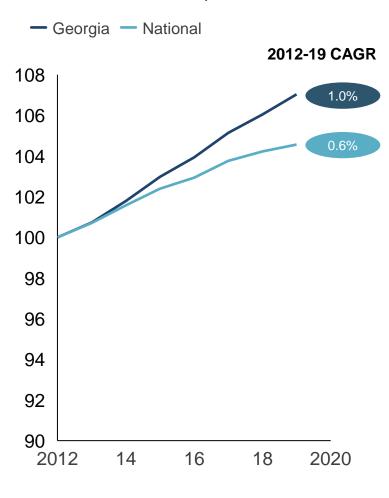
Diseases with significant existing care burden are expected to rise and further increase healthcare utilization

3

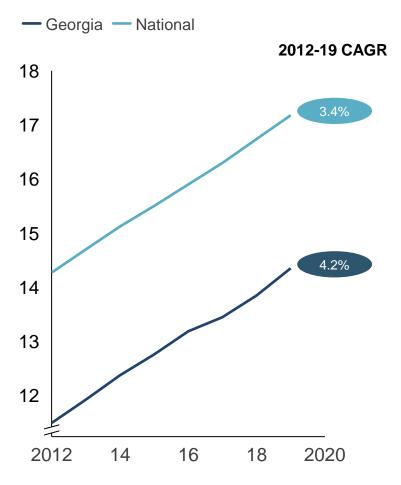
Job postings have been increasing over the last two years – indicating increased demand for healthcare workers

Growth of overall population, and more specifically of those over 65, is higher in Georgia, likely driving demand for healthcare

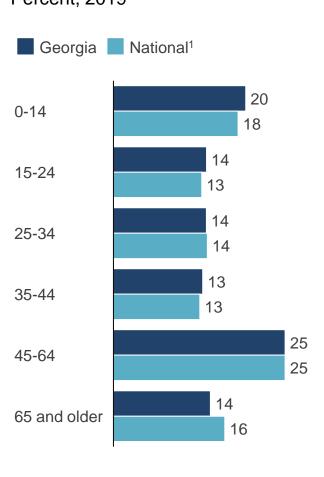
Total population growth in Georgia and United States, Index: 2012=100



Population age 65+ in Georgia and United States, Percent, 2012-2019



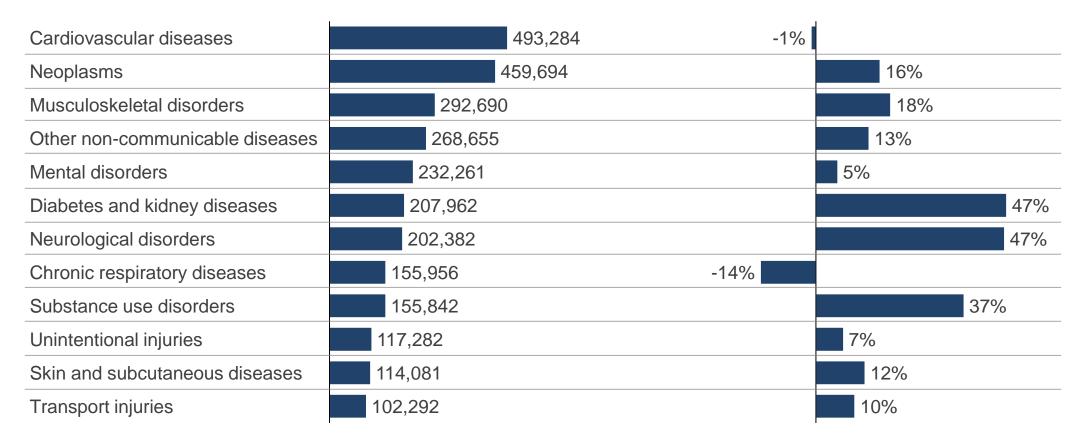
Population by age group Percent, 2019



Except for cardiovascular and respiratory diseases, most other diseases with significant care resource burdens are expected to rise and further increase demand

Top diseases by diseases burden in Georgia 2020. DALYs¹

Change in disease burden between 2020 and 2040 in Georgia, % change in disease burden measured in DALY¹

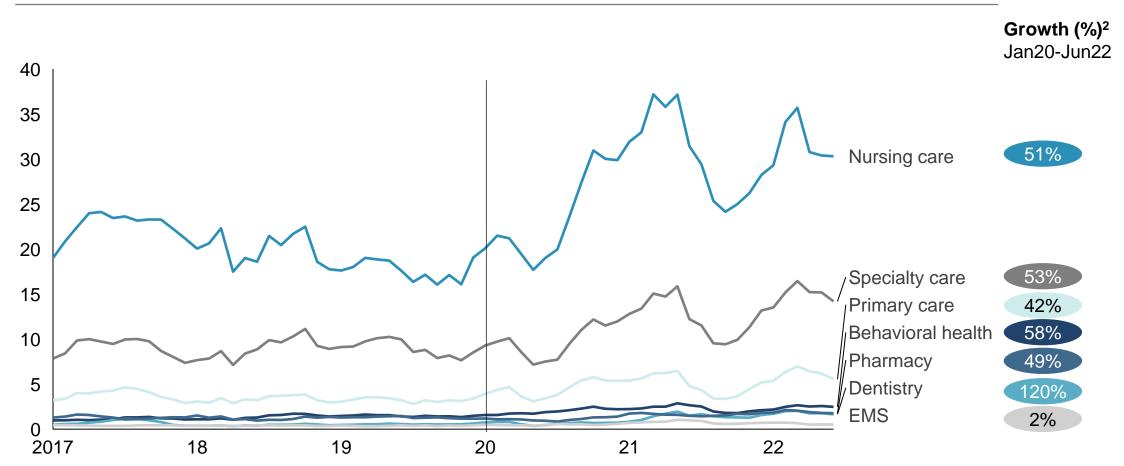


^{1.} DALY = Disability-adjusted life year | 2. STI = sexually transmitted infections. TB = tuberculosis. NCD = non-communicable disease. NTD = neglected tropical disease.

Job postings for healthcare roles in Georgia have increased over the last five years, though a 2021 dip may reflect COVID challenges

Healthcare unique job postings in Georgia by category

Thousands, January 2017-May 2022



^{1.} Job postings for nursing assistants are included both in the primary care and specialty care categories

Source: Lightcast™ (formerly EMSI-Burning Glass)

^{2.} Growth rate for the remaining job categories are: dentistry (120%), pharmacy (49%), emergency medical services (2%)

Demand growth is expected to continue for healthcare occupations (page 1 of 2)

Top 3 healthcare occupations for each category with largest projected demand by category in Georgia

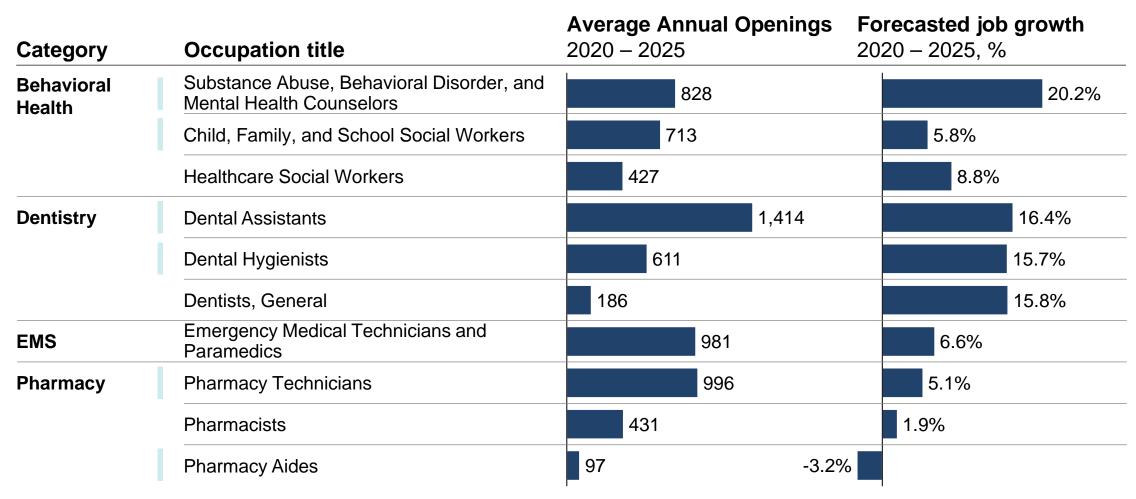
Category	Occupation title	Average Annual Openings 2020 – 2025	Forecasted job growth 2020 – 2025, %
Nursing Care	Home Health and Personal Care Aides	10,099	16.3%
	Registered Nurses	5,200	6.3%
	Nursing Assistants	4,575	1.5%
Primary Care	Medical Assistants	4,198	16.6%
	Nurse Practitioners	1,025	32.8%
	Physician Assistants	536	21.1%
Specialty Care	Medical Assistants	4,198	16.6%
	Clinical Laboratory Technologists and Technicians	1,079	8.3%
	Massage Therapists	587	32.8%

We need more
Primary Care
community-based
physicians and fewer
specialists
Commission Member
Quote

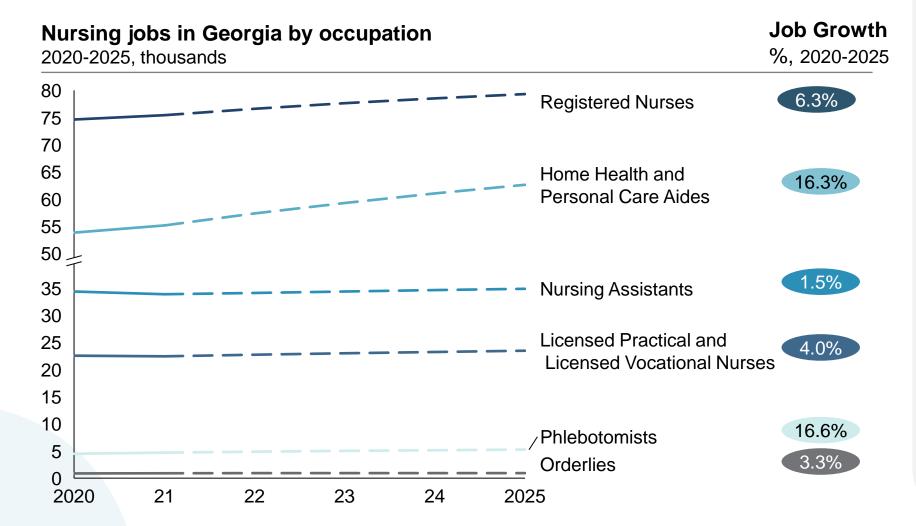
Source: Lightcast™ (formerly EMSI-Burning Glass)

Demand growth is expected to continue for healthcare occupations (page 2 of 2)

Top 3 healthcare occupations for each category with largest projected demand in Georgia



Within nursing and allied nursing care, all job roles may continue to see high job growth



Key factors influencing nursing demand

- Share of Care
 Responsibility: Nurses could
 see increased utilization and
 care responsibility as
 physicians and surgeons may
 not fully meet the growing
 demand for healthcare
 services. That demand is
 further passed through to
 nursing partners
- Non-care Activities: Growth of nonclinical nursing careers (e.g., hospital administrators, health policymakers, and bioinformatic analysts) can take nursing labor out of nursing roles

Healthcare Workforce Fact Base



Demand/Supply Assessment

Demand Assessment

Supply Assessment

Supply is constrained and not matching demand growth

1

Graduation pipeline is stable but not mirroring multiple professions' demand growth, hence insufficient to fill openings from new growth plus retirements

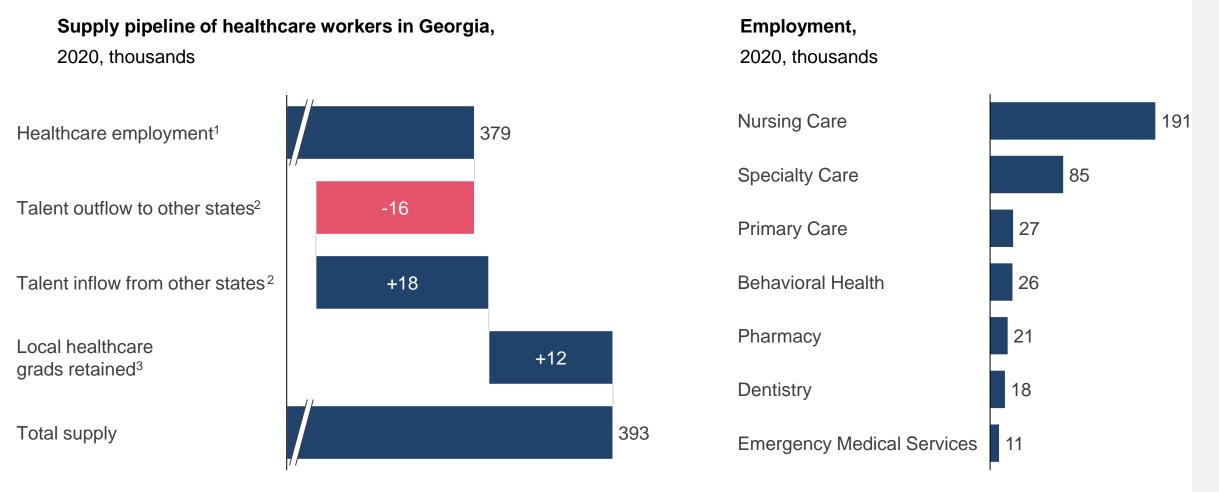
2

A diverse group of private and public educators support the training of the workforce with nearly 50% of healthcare graduates coming from the top 20 institutions

3

Beyond seats, qualitative findings suggest the future workforce is further constrained by other factors, such as staff availability, cost, and access

The healthcare workforce in Georgia includes ~380K workers with a net addition of nearly 14,000 workers annually



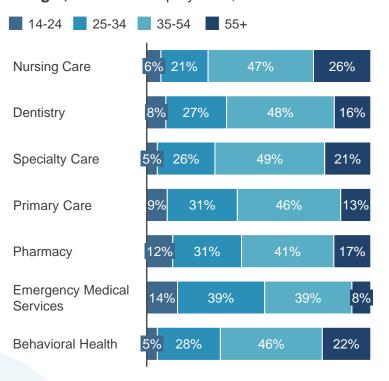
^{1.} Total employment in Georgia for 60 occupations across healthcare practitioners and technical (29-0000), healthcare support (31-0000), community and social service (21-0000) and life, physical and social science (19-0000)

^{2.} Net flow of healthcare and social assistant hires in Georgia (Hires into GA from out of state less hires out of GA to out-of-state). Annual average of 2017-2020 estimates from the U.S. Census, Job-to-Job Flows, 2017 Q1 – 2020 Q4

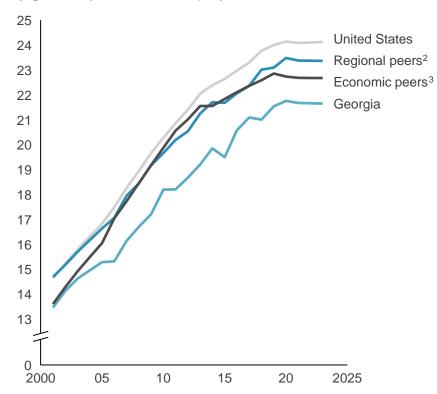
s. 2020 completions in related programs to healthcare occupations. Instructional programs were mapped to occupations based on a crosswalk of SOC-CIP. Retention rate was estimated as the share of grads who remain in-region after completing their degree; based on profiles (LinkedIn, Career Builder, etc.) updated since 2018 for graduates of higher ed institutions

Roughly 20 percent of healthcare workers are over 55 and are likely to retire

Healthcare employment¹ by age by category in Georgia, % of total employment, 2021



Share of aging healthcare workforce¹ by geography (ages 55+), % of total employment, 2001-2023



[Over the past 3 years,] nursing witnessed a Great Resignation and a Great Retirement

- Commission Member Quote

In a recent survey of nurses providing direct patient care, 29% indicated that they are likely to leave their current direct patient care position in the next year, up from 22% a year ago.⁴

Source: Lightcast™ (formerly EMSI-Burning Glass)

^{1.} Includes 60 occupations across healthcare practitioners and technical (29-0000), healthcare support (31-0000), community and social service (21-0000) and life, physical and social science (19-0000)

^{2.} Virginia, North Carolina, South Carolina, Tennessee, Florida, Louisiana, Texas, Missouri, Alabama

^{3.} Michigan, Colorado, Arizona, Ohio

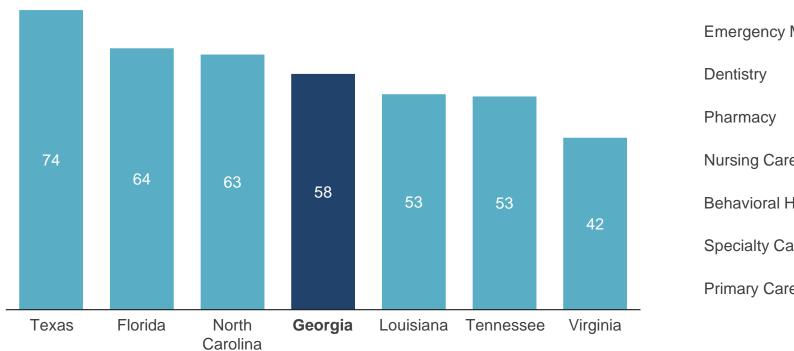
^{1. 2022} NSI National Health Care Retention & RN Staffing Report

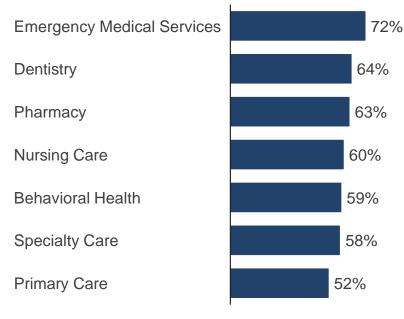
Georgia retains 58% of graduates, about average compared to regional peers; however, there is an opportunity to improve retention rates across all labor categories

Estimated in-state talent retention after graduation for healthcare occupations based on online profiles, %

State, all healthcare job categories







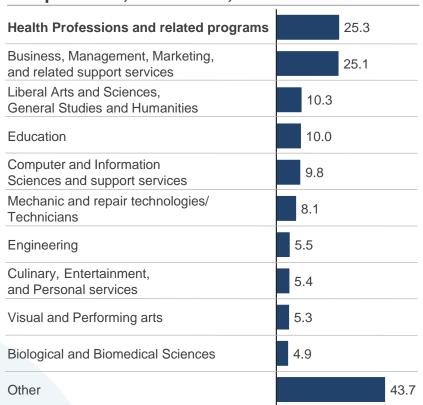
Source: Lightcast™ (formerly EMSI-Burning Glass) 24

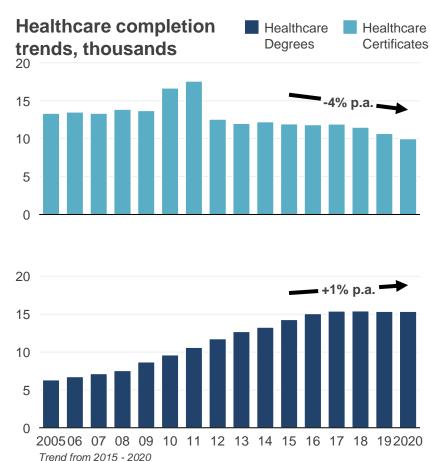
Includes 60 occupations across healthcare practitioners and technical (29-0000), healthcare support (31-0000), community and social service (21-0000) and life, physical and social science (19-0000)

Share of grads who remain in-region after completing their degree; based on profiles (LinkedIn, Career Builder, etc.) updated since 2018 for graduates of higher ed institutions

Health professions are the top field of study, with stable number of degrees and declining number of certificates awarded

Top fields of study in Georgia by number of completions¹, thousands, 2020





It's not as difficult to recruit students and faculty in Medicine and Dentistry, but it is very difficult in other areas of medicine

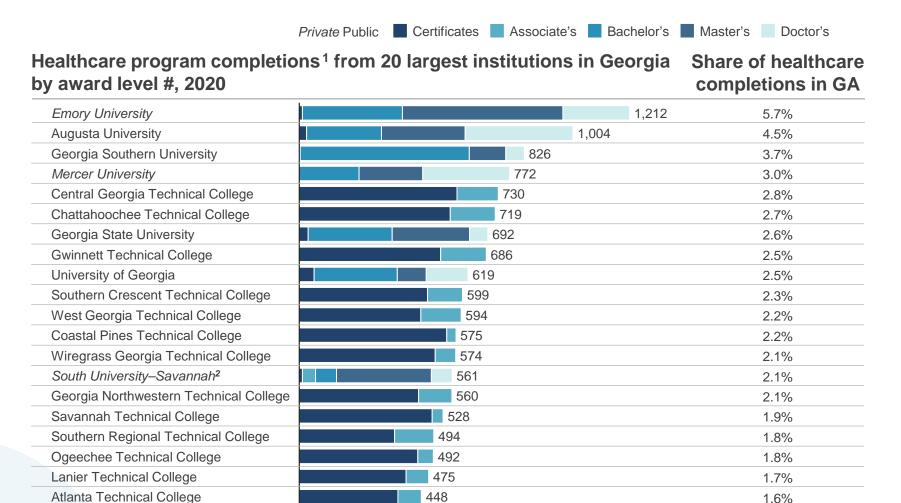
- Commission Member Quote

[We have trouble recruiting for] Nursing faculty - DNP and PhD prepared

- Commission Member Quote

^{1.} Includes both degree and certificate completions for all institutions in Georgia. Healthcare was defined as: health professions and related programs (CIP 51)

Twenty institutions educate nearly half of all healthcare graduates in Georgia



^{1.} Includes all degree and certificate completions for health professions and related programs (CIP 51)

Source: Lightcast™ (formerly EMSI-Burning Glass), National Center for Education Statistics- IPEDS dataset, Gray Associates

Private colleges
have had a strong
positive impact [on the]
nursing pipeline due to
the ability to support the
students and increase
the acceptance of nontraditional
students

- Commission Member Quote

^{2.} Includes: South University- Savannah (139579) and South University- Savannah Online (475121). Completions for this institution were adjusted to only include on-ground completions as well as online completions from in-market students. According to Gray Associates, there were a total of 1858 completions in 2020. On-ground completions accounted for 301 grads. Online programs accounted for 1557 completions (17% from in-market students, for a total of 260 completions)

• • •

Commission Members highlight the important role educational institutions play in the healthcare workforce supply and suggest ways to improve the status quo

Survey responses from HWC Members

Access:

Ensuring
equitable access to
financial support for
students in both
private and public
institutions

Early programs
starting in grade
school to introduce and
connect healthcare
interested students [are
important in addressing
the shortage]

[We should]
examine increasing
full-time academic salaries
for nursing faculty in USG system
institutions; stipends for RNs to
attend USG institution programs
for DNP or PhD degrees to
increase pipeline of faculty and
thereby increase student
enrollment in our publicly
funded schools and
colleges of
nursing

Capacity and Cost:

We need more medical school and nursing school spots.
We make it too difficult to get in

We have to
do more to reduce
this cost. Students are
leaving school with
\$200,000 + of debt
(more if they have
debt from college)

Certification Levels:

We have to look
at the requirement for
having all nursing aides
certified. I am hopeful
that our recently formed
[initiative] can help bring
more high school
graduates into
these critical
positions

Recap and open discussion



- There is a shortage of healthcare workers in Georgia across all professions
- These are particularly acute in Nursing and Primary Care
- The labor shortage may get worse over time due to aging & increasing incidence of disease



Data suggests areas of potential inquiry for opportunities include:

- Increase existing workforce through attraction and retention
- Build and train new workforce through education, licensure, and up/reskilling
- Increase effectiveness of new workforce through evolving care models



We welcome questions from the Commissioners

Next steps

01Host Open-Forum #1

Query the community and select experts for insight on solutions

02

Prepare for Commission Meeting #2

Begin consideration of statewide solutions and identify case-studies of peer actions