Meeting the Demand for Health

#CAFutureWorkforce

FRESNO BRIEFING

APRIL 23, 2019
California Future Health Workforce Commission Releases Final Report

The California Future Health Workforce Commission has announced bold recommendations to eliminate the projected shortfall of primary care health providers, nearly eliminate a severe psychiatry shortage, and bolster the pipeline of students and health workers to deliver care in underserved communities — all by the year 2030.

- Read the Executive Summary or Full Report of the Commission’s Recommendations.
- Learn about California’s health workforce shortages.
- See who served on the Commission.
- Watch brief video testimonials from Commissioners.

www.futurehealthworkforce.org
Today’s Panel of Experts

- **Rishi Manchanda**, MD, MPH, President, HealthBegins
- **Janet Coffman**, PhD, MPP, Faculty, Healthforce Center at UCSF
- **Joseph Castro**, PhD, MPP, President, California State University, Fresno
- **Katherine Flores**, MD, Director, UCSF Fresno Latino Center for Medical Education and Research, Associate Clinical Professor, UCSF
- **Cathy Martin**, Vice President, Workforce Policy, California Hospital Association
- **Dawan Utech**, Director of Behavioral Health/Public Guardian, Fresno County
Commission Values & Strategies

Strategy 1
Increase opportunity for all Californians to advance in the health professions.

Strategy 2
Align and expand education and training to prepare health workers to meet California’s health needs.

Strategy 3
Strengthen the capacity, effectiveness, well-being, and retention of the health workforce.

Vision for California’s Workforce
Return on Investment for Californians

- **60,000** students on health profession path
- **47,000** health workers added
- **30,000** workers from underrepresented communities
- **14,500** providers trained - physicians, nurse practitioners & physician assistants

*Eliminate* state’s primary care provider shortage & *nearly eliminate* the shortage of psychiatrists by 2030
Commission’s Top 10 Priorities for Action

1.1 **Expand & scale pipeline programs** to recruit & prepare students from underrepresented & low-income backgrounds for health careers

1.2 **Recruit & support college students**, including community college students, from underrepresented regions & backgrounds to pursue health careers

1.3 Support **scholarships** for qualified students who pursue priority health professions & serve in underserved communities

2.1 Sustain & expand the **PRIME program** across UC campuses

2.2 Expand number of **primary care physician & psychiatry residency positions**
Commission’s Top 10 Priorities for Action

2.3 Recruit & train students from rural areas & other under-resourced communities to practice in community health centers in their home regions

3.1 Maximize role of nurse practitioners as part of care team to help fill gaps in primary care

3.2 Establish & scale a universal home care worker family of jobs with career ladders & associated training

3.3 Develop a psychiatric nurse practitioner program that recruits from & trains providers to serve in underserved rural and urban communities

3.4 Scale the engagement of community health workers, promotores & peer providers through certification, training & reimbursement.
Calculating the Impact

Healthforce Center and Health Management Associates conducted impartial assessments

◦ Analyzed the recommendation and its assumptions
◦ Reviewed the literature to verify likely effects
◦ Clearly identified and articulated our assumptions

Detailed impact report provided to the Commission

◦ Summarized in the final Commission report
Impact on the Number of Health Workers

New health workers: **over 47,000**
- **310-510** medical school graduates
- **630** UC-PRIME graduates
- **1,872** primary care residency graduates
- **2,202** psychiatry residency graduates
- **5,500** additional nurse practitioners
- **25,000+ graduates** from Community Colleges & Cal State health workforce programs
- **Scholarships** for students across all fields from underrepresented groups & rural communities
Why do we Care about Numbers?

Investments in health workforce saves money & lives

- Increased supply & capacity of home care workers will help people with disabilities live at home
- CHWs, promotores & peer providers will support wellness, health education & support care teams
- Primary care shortages will be eliminated
- Behavioral health workforce growth ensures access to care for mental health and substance use treatment
- Better access to care leads to cost savings
Why We Need to Act

- 40% of California’s population is Latino
- Only 7% of doctors are Latino
- 7 million patients with limited English proficiency
- State has 20% as many Spanish-speaking doctors as needed
- 7 million Californians live in Health Professional Shortage Areas (HPSAs)
Fresno State At-A-Glance

- **88%** students from Central Valley
- **66%** students first-generation college students
- **More than 60%** eligible for Pell grants

*Students succeed in tremendous ways; support and guidance is key.*

Source: California State University, Fresno
HCOP - Health Careers Opportunity Program

- Helps **undergraduate students** from **disadvantaged backgrounds** prepare for careers in medicine
- Focuses on advising, internship opportunities, tutorials, summer programs, professional development seminars
- **60-70% success rate** of students entering a health field, most at a Masters or Doctoral level
HCOP & Pipeline Success

“Both of us came from families where we didn’t have anyone to look to for guidance in pursuing medicine and so HCOP really became that for us." Veronica Ramirez said. “We literally were in that office day in and day out and it was through that program we learned what it takes to be a good student, a good science student, because that was something very new to us.”
Allied Health Professions

- Professionals at bedsides or behind the scenes
- Provide laboratory, imaging and other critical services needed to diagnose and treat patients
- Strong partnership with community colleges
Behavioral Health – A Top Priority...

Too many with mental illness don’t get treatment

62.8% - Need help, but not getting it

Treatment for Mental Illness in California (2011-2015)

- Received Mental Health services: 62.8%
- Did Not Receive Mental Health Services: 37.2%

...Growing Issue for Many Californians

KFF/CHCF poll released in January:

- Nearly 9 in 10 say ensuring people get mental health treatment extremely or very important policy priority

- Half of all Californians believe their community does not have enough mental health providers
QUESTIONS?
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