March 21st, 2023

CALL TO ORDER: 5:03 PM
TYPE OF MEETING: Via Zoom

ATTENDEES:
Chair, Sara Salek, M.D. (AHCCCS)
Dan Derksen, M.D. (Center for Rural Health)
Laura Mercer, M.D. (ACOG)
Antonio Hernandez (ADHS)
Lisa Villarroel, M.D. (ADHS)
Vicki Buchda, MS, RN, NEA-BC (AZHHA)
Jennifer Hartmark-Hill, M.D. (ArMA)
Bill Thompson, M.D. (ArMA)
Suzanne Pfister (Vitalyst Health)
Keith Frey, M.D. (Wellbeing Collaborative)
Miriam Anand, M.D. (ArMA)
Brittney Kauffman (HSAAZ)
Candy Espino (Arizona Council)
Anne Stafford (AZAAP)
Marisa Domino Ph.D. (ASU)
Karen Tepper Ph.D. (Terros Health)

STAFF:
Ms. Libby McDannell, ArMA CEO
Hayley Chicoine, HAWC Project Manager

Welcome & New Member Introduction | Presenter: Dr. Salek
Discussion:
- Dr. Salek called the meeting to order and thanked everyone for attending.
- Introductions were made.
- Dr. Domino and Candy were welcomed to the coalition.

Approval of 2.23.23 Meeting Minutes | Presenter: Hayley Chicoine
Discussion:
- Minutes reviewed and approved without objection.

Workforce Initiative Research | Presenter: Hayley Chicoine
Discussion:
- Data was shared showing the current shortages in Arizona and the projected healthcare workforce shortages in the next ten years. It was noted that a deep dive into the data and its sources will inform where HAWC should focus its efforts.
Primary Care Health Professional Shortage Areas were also reviewed. Since the data is from 2019, pre-pandemic, ADHS was asked to provide more recent data they may have on the shortage areas. As part of the HPSA review, it was noted that Health Professional Shortage Areas (HPSA) designations are used to identify areas and population groups within Arizona that are experiencing a shortage of health professionals. There are three categories of HPSA designations based on the health discipline experience shortages: 1) primary care; 2) dental; 3) mental health. The primary factor used to determine an HPSA designation is the number of health professionals relative to the population.

Licensing boards are supposed to be collecting workforce data, however, implementation is not consistent across various boards.

- Action item – HAWC leadership to work with appropriate coalition members to share best practices on the collection of this workforce data. Dr. Derksen is a good resource for what has been developed to date. This data could help inform HPSA designations and make more funding available for the areas with the greatest need.

Other coalition members shared additional data sources including:

- ADHS noted it was working on projections for 2030 hospital bed surge situations.
- The March of Dimes has released a report on maternity deserts – it was suggested that a review of maternal mortality data be gathered and added as an overlay to the maternity deserts.
- HPSA and SVI (social vulnerability index) a CDC score, are good indicators of the most vulnerable populations.

Analysis of state efforts

- A brief overview was presented of general efforts currently happening in Arizona related to Healthcare Workforce shortages.
  - Action item – a more detailed listing is needed for the next meeting. The AzHHA meeting will be helpful as we do this deep dive.
- A review of surrounding states included Nevada, New Mexico, and Utah was also shared. More analysis is needed on the efforts of surrounding states that have been successful.

Approval of HAWC Measures of Success & Framework | Presenter: Dr. Salek

Discussion:

- Dr. Salek reminded participants of the HAWC goals including:
  - Establishing a coalition of stakeholders to develop and vet workforce strategies.
  - Research successful workforce strategies employed by other states.
  - Define tangible short-term, mid-term, and long-term strategies that address workforce needs.
  - Ensure a focus on diversity, health equity, and inclusion for hiring and training a diverse workforce across all levels of the healthcare team.

- Draft measures that demonstrate the success of the coalition were shared and developed from feedback provided at the last HAWC meeting. These included short-term goals as follows:
  - Comprehensive assessment of healthcare shortages.
  - Evaluation of current strategies in Arizona.
  - Augment current strategies.

- Participants were supportive of the success measures suggested.
- During discussion of the success measures, several potential strategies were suggested including:
  - Considering adding residency programs to other healthcare disciplines (i.e., nurse practitioners, nurse midwives, and PAs)
  - Instead of only focusing on the pipeline, make sure there are also efforts looking at extending the careers of nurses and physicians by two to five years and what it would take for this to happen.
• Be sure to address turnover and retention data along with the internal culture of healthcare systems.
• We need to look at factors that contribute to burnout like administrative burden, reimbursement, etc.

- Dr. Salek presented a draft action plan that would initially focus on:
  - Finalizing which healthcare professional disciplines HAWC should focus on.
  - Reconciling all data sources through a comprehensive analysis. A discussion of whether a workgroup could do this or if HAWC could partner with a university ensued. There was support for the concept of a partnership with a university, and it was suggested that include The University of Arizona and Arizona State University, as well as potentially Northern Arizona University.

Arizona Healthcare Workforce Summit | Presenter: Vicki Buchda

Discussion:
• Vicki Buchda highlighted the AZHHA Workforce Summit at the end of the meeting and encouraged everyone to attend.

Next Steps & Other Business

Discussion:
• It was suggested that our Coalition could potentially be nimble and sign in to support/oppose current legislation that could address workforce issues. At a minimum, it was recommended that HAWC create recommendations for next year’s legislative session and priorities.
• Accountable Care Organizations may also be good data sources for this initiative. Dr. Frey has some connections within Maricopa County.
• We need to be cognizant that there may be different healthcare workforce shortages in different healthcare settings (i.e., hospitals vs. private practice vs. FQHCs, etc.)

The next meeting was noted as April 25th.

With no further business to discuss, Dr. Salek adjourned the meeting at 6 pm.