



WORKFORCE DEVELOPMENT BOARD OF VENTURA COUNTY

HEALTHCARE COMMITTEE MEETING

Friday, March 6, 2020

8:00 a.m. – 9:30 a.m.

United Food and Commercial Workers (UFCW), Local 770
816 Camarillo Springs Road (Orchid Room), Camarillo CA

MEETING AGENDA

8:00 a.m.	1.0 Call to Order and Agenda Review	Greg Barnes
8:03 a.m.	2.0 Public Comments <i><u>Procedure:</u> The public is welcome to comment. All comments not related to items on the agenda may be made at the beginning of the meeting only.</i>	Greg Barnes
8:10 a.m.	3.0 Approval of Minutes: November 1, 2019	Greg Barnes
8:15 a.m.	4.0 Chair Comments	Greg Barnes
	5.0 Ventura County Regional Strategic Workforce Development Plan	
8:20 a.m.	• Regional Director, HWI South Central Coast: Update	Irene Ornelas
8:35 a.m.	• Vista Del Mar Hospital: Update	Michelle Culpepper
8:50 a.m.	• American Medical Response OJT Program: Update	Jeremey Shumaker
9:00 a.m.	• Prioritize Regional Needs and Next Steps	Committee Members
9:20 a.m.	6.0 Committee Member Comments	Committee Members
9:30 a.m.	7.0 Adjournment <u>Next Meeting</u> May 8, 2020 8:00 a.m.- 9:30 a.m. TBD	Greg Barnes

Individuals who require accommodations for their disabilities (including interpreters and alternate formats) are requested to contact the Workforce Development Board of Ventura County staff at (805) 477-5306 at least five days prior to the meeting. TTY line: 1-800-735-2922.

For information about the Workforce Development Board of Ventura County, go to workforceventuracounty.org



WDB Healthcare Committee Meeting

Friday, November 1, 2019

8:00 a.m. – 9:30 a.m.

United Food and Commercial Workers (UFCW), Local 770
816 Camarillo Springs Road (Meeting Room/Suite A), Camarillo CA

MINUTES

Meeting Attendees

Committee

Greg Barnes* (Chair)
Michelle Culpepper
Marilyn Jansen*
Christina Lee
Irene Ornelas
Lisa Safaeinili

WDB Administration

Patricia Duffy

Guests

Yvonne Jonason (ETP- Employment
Training Panel)
Jeremey Shumaker (American Medical
Response)

**WDB Member*

1.0 Call to Order and Agenda Review

2.0 Public Comments

No public comments

3.0 Approval of Minutes: August 9, 2019

Motion to approve: Christina Lee

Second: Irene Ornelas

Abstain: Greg Barnes

Motion carried.

4.0 Ventura County Regional Strategic Workforce Plan

- Regional Director, HWI South Central Coast: Update

Irene Ornelas, Regional Director for Healthcare (HWI) introduced Jeremey Shumaker Regional Director for AMR American Medical Response. Mr. Shumaker described his new DAS registered OJT paramedics program, which provides career pathway OJT apprenticeship training for EMTs to become paramedics.

Irene Ornelas reported on collaborating with Vista Del Mar Hospital to discuss potential Psychiatric Nurse training. The curriculum is in review by the new Director of Nursing. Training is a total of 36 hours. (36 CEUs)

The course objective is to prepare new RNs and new to psych RNs for practice. Ms. Ornelas commented on the job analysis (DACUMs) that are to be completed through HWI on November 18-

November 21. The job analysis is for the following careers; school nurse, medical scribe and peer support specialist. Lisa Safaeinili, Westminster Free Clinic, added that the Westminster Clinic has a scribe training program with their own scribe curriculum. Irene informed the committee that Behavioral Health Awareness Day is April 24th. Ms. Ornelas reported on applying for a Kaiser Grant that will support work to develop a behavioral health pipeline. She mentioned that HWI (Health Workforce Initiative) has developed a statewide subcommittee to do mapping to identify training programs and gaps in training.

- Vista Del Mar Hospital Update:

Michelle Culpepper, Director of Human Resources Vista Del Mar Hospital, updated the Committee members on the progress of the hospital. The hospital burned down in the 2017 Thomas fire. It is the one year anniversary since they have been back on the grounds. The rebuilding has been approved for one building with three floors. Recruitment issues have stabilized and they have hired a Chief of nursing and a Director of Business Development. This region has a critical shortage of Psychiatrists and they have received approval for a telehealth site to access psychiatrists.

- Developing an Action Plan for Prioritizing Regional Needs

The Committee members continued their discussion, from previous meetings, on prioritizing needs. The Committee reviewed the action plan and discussion from the previous meeting.

1) A need to map what is currently in the region for mental health training programs. 2) Identify career ladders and gaps in training. 3) Prioritize exploring curriculums for incumbent worker training in mental health, such as Mental Health First Aid that can be used in the healthcare industry to train all levels of incumbent workers including security guards, C.N.A.s and ER staff on de-escalation and working with behavioral health patients. There was a discussion on how this could be delivered and having it be delivered in training modules on-line was mentioned since many incumbent workers can't leave the workplace for training. Exploring delivery of the training was discussed.

Action Plan:

- Research available curriculum, such as Mental Health First Aid, for incumbent worker behavioral health professional development training.
- Consult with the Healthcare Committee industry partners to determine which curriculum would address their industry needs.
- Identify most appropriate delivery method for training.
- Mapping of behavioral health pathways in the region/ identify gaps
- Behavioral health career day- exploring mental health careers and career ladders.

The delivery of training was discussed, since it would be mostly incumbent workers. On-line or a lunch and learn was suggested or a short half day course. A review of current curriculum and a survey of industry partners, once a curriculum is identified was suggested.

- ETP- Funding for Employee Training

Yvonne Jonason, Economic Development Analyst, Employment Training Panel presented on how industry can utilize the funding to train incumbent workers. The Employment Training Panel (ETP) provides funding to employers to assist in upgrading the skills of their workers. The ETP is funded by California employers through a special payroll tax. It is a funding organization to fund training and is not a training program. The training is provided by the employer. Ms. Jonason gave examples of how this funding source works and how it can support incumbent worker training and apprenticeship training.

5.0 Committee Member Comments

Lisa Safaeinili, Director of the Westminster Free Clinic, announced the opening of a new free clinic site at the St. Paul's Methodist Church in Oxnard. The clinic will be on Tuesday nights in Oxnard. They will have a total of 109 medical assisting high school student interns for both clinics in Thousand Oaks and Oxnard. Ms. Safaeinili announced they have a career counselor on site and the students have gone onto college and successful careers. Students have attended colleges throughout the country including the UC system, Stanford and Tufts.

6.0 Adjournment

The meeting adjourned at 9:35 a.m.

Next Meeting:

January 3, 2020

8:00 a.m. - 9:30 a.m.

Location TBD

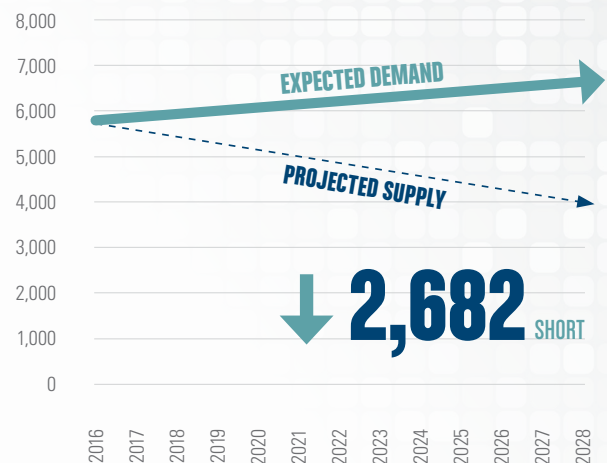
HOW MENTAL HEALTH SERVICES ACT FUNDS COULD BE USED TO ALLEVIATE CALIFORNIA'S GROWING SHORTAGE OF PSYCHIATRISTS

BACKGROUND

The California Future Health Workforce Commission's 2019 final report identified 10 priorities for action to address the state's growing health workforce shortages. To close shortfalls of behavioral health providers in particular—and create a more diverse workforce—the Commission proposed expanding the number of psychiatry residency and psychiatric mental health nurse practitioner (PMHNP) positions to recruit and train providers in underserved communities.

The state has taken an important step toward this goal with the development of its 2020-2025 Mental Health Services Act Workforce Education and Training (WET) Five-Year Plan, a strategy for addressing mental health system shortages that prioritizes increasing the number of psychiatrists and PMHNPs. After the previous WET plan expended nearly \$235 million over five years, the 2019-20 state budget includes \$60 million toward implementing the updated plan.

PROJECTED DEMAND & UNDER-SUPPLY OF PSYCHIATRISTS



THE CHALLENGE:

How much of this year's \$60 million should be allocated to producing more psychiatrists and psychiatric mental health nurse practitioners—and what share of funding should be allocated to each?

OPTIONS FOR CLOSING TODAY'S GAPS

Over the next decade, California is expected to have 41% fewer psychiatrists than it needs—a shortfall of 2,682 qualified health professionals. This year's budget won't be enough to close this gap, but a series of targeted investments can begin to address these shortfalls—and create a template for fully addressing this issue in future years. The Commission estimated it would cost \$627.8 million over 10 years to completely close the state's shortfall of psychiatrists—an investment of just over \$60 million per year.

If the state were to commit a portion of this year's WET funds toward closing its behavioral health workforce gaps, how many providers could it produce? The table below outlines options for psychiatrists and PMHNPs—the two types of specialists authorized to prescribe medications for behavioral health issues. This analysis assumes California's Office of Statewide Health Planning and Development (OSHPD) would spend \$246,000 per resident to educate psychiatry residents and \$52,000 per PMHNP student.

PROVIDER PRODUCTION SCENARIOS – WET SPENDING IN 2019-20 BUDGET

	\$20 Million	\$30 Million	\$40 Million
80% psychiatrists • 20% PMHNPs	65 psychiatrists 77 PMHNPs	98 psychiatrists 115 PMHNPs	130 psychiatrists 154 PMHNPs
70% psychiatrists • 30% PMHNPs	57 psychiatrists 115 PMHNPs	85 psychiatrists 173 PMHNPs	114 psychiatrists 231 PMHNPs
60% psychiatrists • 40% PMHNPs	49 psychiatrists 154 PMHNPs	73 psychiatrists 231 PMHNPs	98 psychiatrists 288 PMHNPs

WHERE NEW WORKERS AND PROGRAMS HAVE THE BIGGEST IMPACT

Not all communities across California are experiencing the state's shortage of behavioral health professionals in the same way. While some areas already have a sufficient pool of providers, others do not: Indeed, ten inland counties have been sanctioned by the Department of Health Care Services for having inadequate behavioral health provider networks. Meanwhile, many counties with the lowest supplies of psychiatrists and PMHNPs do not have local training programs—making recruitment and retention difficult, especially in underserved communities.

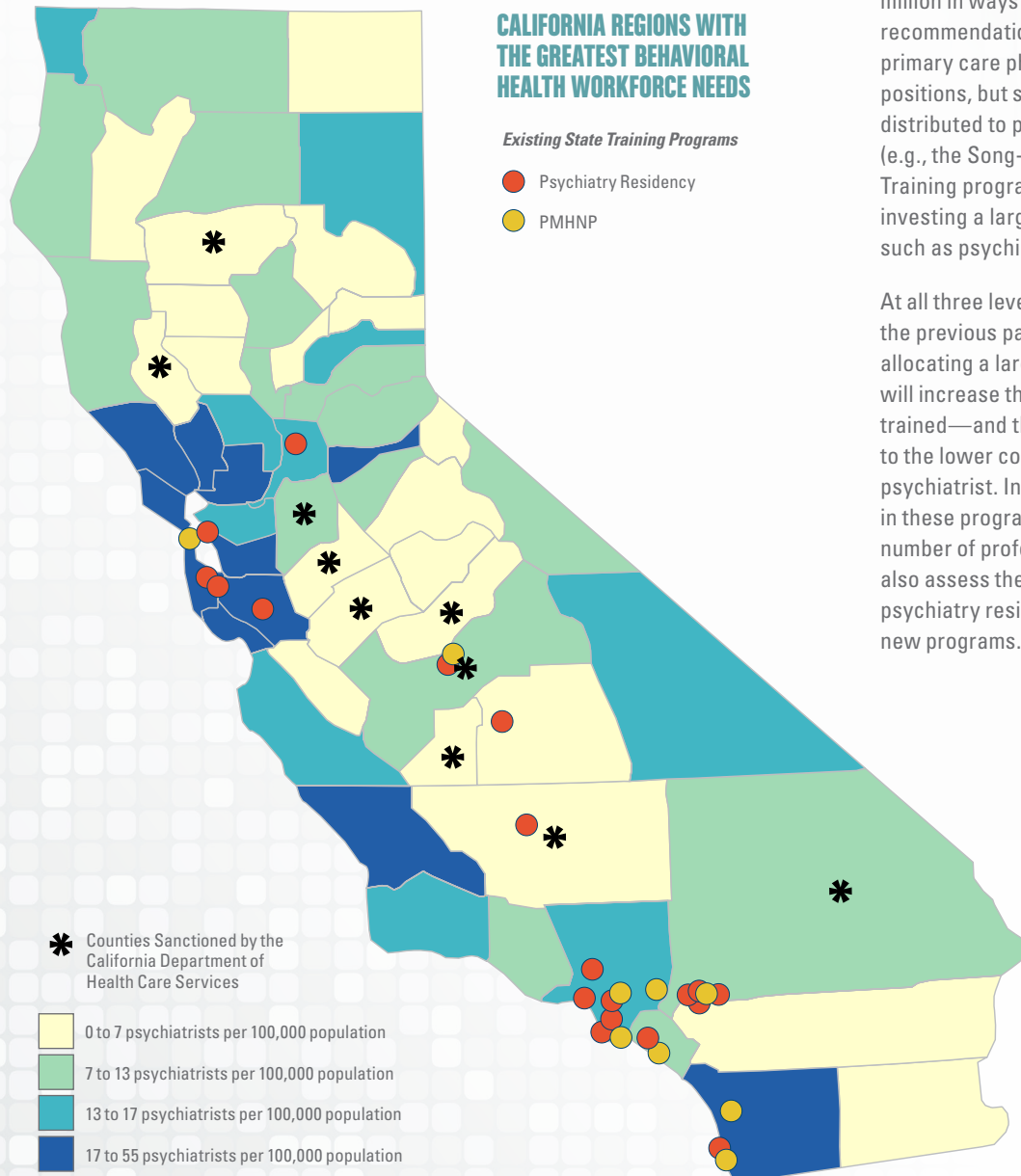
As the state considers where and how to invest this year's WET resources, it should consider taking steps to ensure significant portions of this year's funding goes to psychiatry residency programs and PMHNP programs in areas experiencing these shortages. WET funding will be most beneficial if it also supports programs with a strong commitment to recruiting racially/ethnically and socio-economically diverse trainees, as well as trainees to work with underserved populations following graduation.

California faces a mismatch between its most significant behavioral health workforce shortfalls and the location of existing training programs. Addressing this challenge will require more providers—of all types—as well as new programs in shortage areas.

ADDITIONAL CONSIDERATIONS: HOW THESE DOLLARS COULD BE SPENT

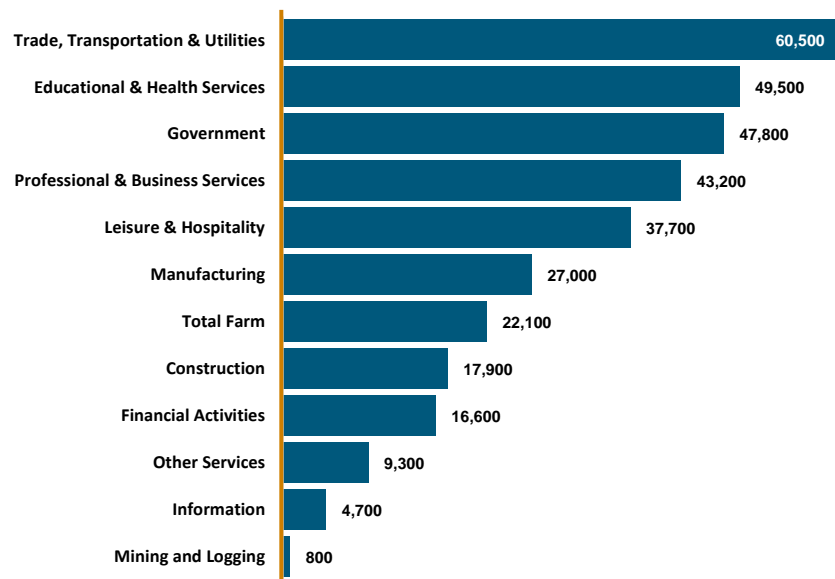
This year's state budget allocates another \$75 million in ways that explicitly support Commission recommendations for expanding the number of primary care physician and psychiatry residency positions, but since most of those funds are distributed to primary care residency programs (e.g., the Song-Brown Healthcare Workforce Training program), it is worth considering investing a larger share of WET dollars in fields such as psychiatry.

At all three levels of investment outlined on the previous page, it is also worth noting that allocating a larger share of funding to PMHNPs will increase the total number of new professionals trained—and the number of patients served—due to the lower cost of training a PMHNP versus a psychiatrist. Investing even more state resources in these programs would further increase the number of professionals trained, but OSHPD must also assess the feasibility of expanding existing psychiatry residency programs and establishing new programs.

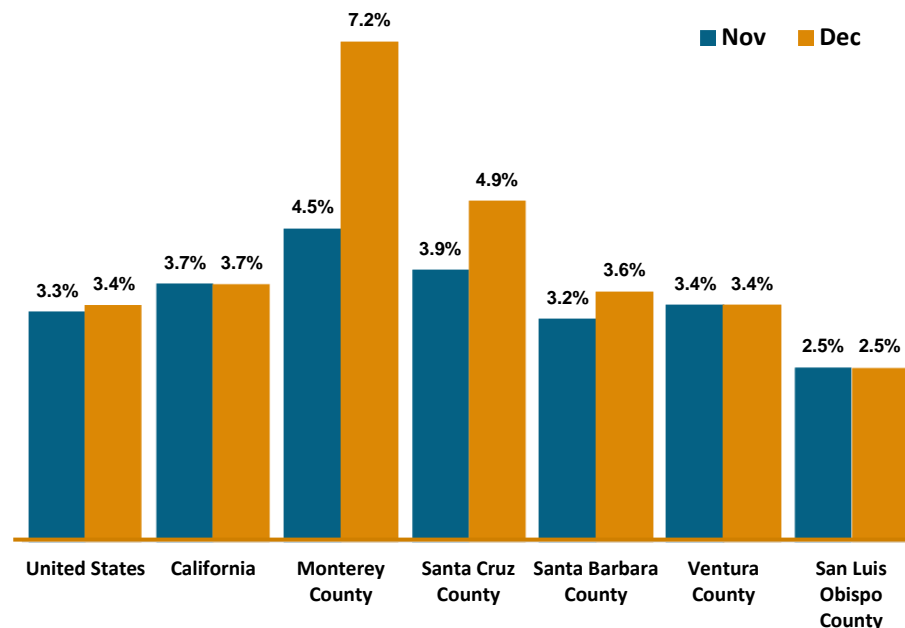


This fact sheet was prepared to advance the recommendations of the California Future Health Workforce Commission, under the auspices of a contract with the Public Health Institute. Research and data were compiled by Janet M. Coffman, PhD, MPP, Healthforce Center, UCSF. For references used and to learn more about the Commission and its recommendations: futurehealthworkforce.org/our-work/fact-sheets.

September Industry Sectors Ranked by Employment Size¹



Unemployment Rate (%)²



Online Job Advertisements – December 2019 Help Wanted OnLine³

Top 10 Employers

Amgen Inc. - 1,002
Ventura County Community College District - 160
Memorial Health - 158
Securitas - 154
Allied Universal - 145
Macy's - 132
Saalex Solutions - 111
HCA - The Healthcare Company – 105
Aerovironment, Inc. - 102
Adventist Healthcare - 97

Top 10 Occupations

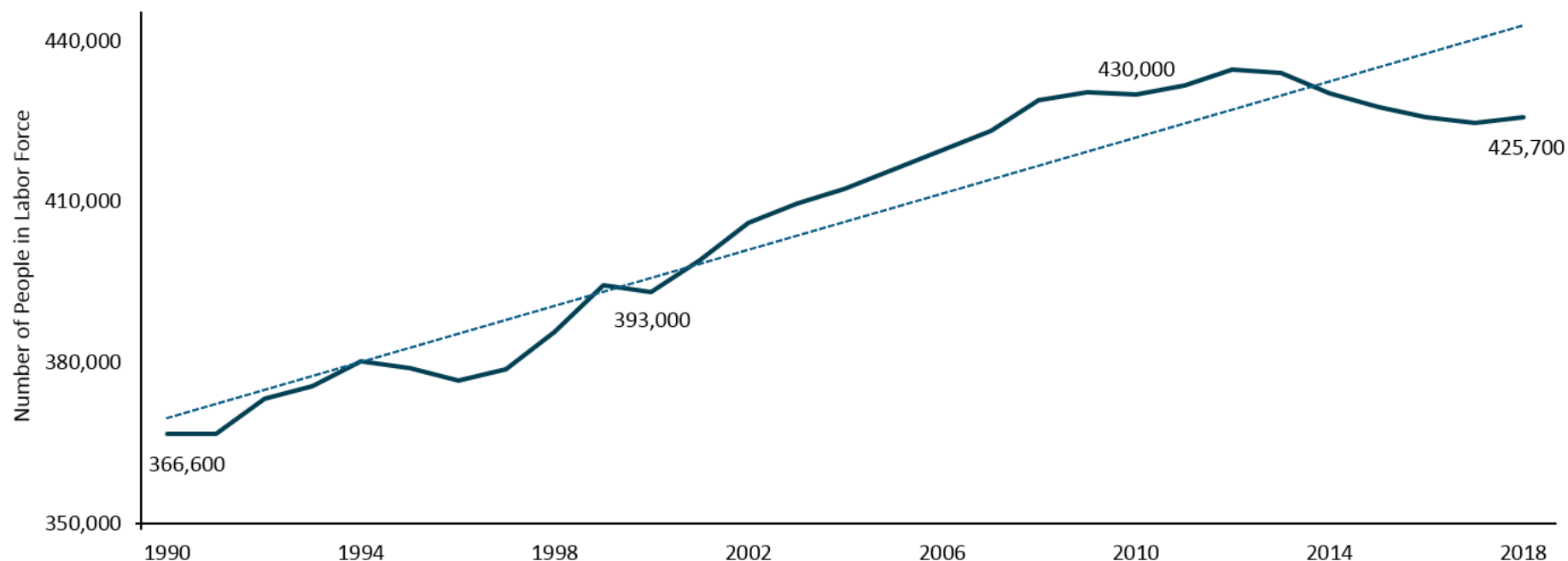
Retail Salespersons – 552
First-Line Supervisors of Retail Sales Workers – 360
Security Guards – 331
Registered Nurses - 269
Industrial Engineers – 225
Customer Service Representatives – 176
Medical Scientists, Except Epidemiologists - 156
First-Line Supervisors of Food Preparation and Serving Workers - 151
Software Developers, Applications - 145
Stock Clerks, Sales Floor - 143

Top 10 Cities

Thousand Oaks – 2,754
Ventura – 1,615
Oxnard – 1,471
Simi Valley – 1,130
Camarillo – 1,049
Port Hueneme – 502
Moorpark – 383
Newbury Park – 230
Santa Paula – 158
Fillmore – 111

Sources: ¹ Current Employment Statistics (December 2019), ² Local Area Unemployment Statistics (December 2019), ³ Conference Board; Help Wanted Online (December 2019).

Long-Term Labor Force Trend in Ventura County¹
1990-2018 Annual Averages



Since 1990, the labor force in the Central Coast increased by 19%, or 182,700. However, that growth has been uneven over time, ranging from 11% between 1990 and 2000, to 6% between 2000 and 2010, to just 1% between 2010 and 2018. Despite lower growth, between 2010 and 2018, the labor force increased in 4 out of 5 counties, with the largest increase observed in Monterey County by 8,300, and smallest increase observed in Santa Cruz County by 900. Only Ventura County experienced a decline of the labor force by 4,300 people.

Sources: ¹Current Employment Statistics (1990-2018 Annual Averages).

Historical Labor Force by County¹
Annual Average

	1990	2000	2010	2018
Monterey County	172,700	203,400	215,800	224,100
San Luis Obispo County	99,800	122,600	133,700	140,900
Santa Barbara County	192,500	202,600	212,300	216,700
Santa Cruz County	135,700	148,500	141,700	142,600
Ventura County	366,600	393,000	430,000	425,700