**Burlington Aging Council Workgroup: Health Care Workforce**

**Meeting Held Wednesday February 9, 2022**

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| **Workforce Development- HC** |
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1. **Identify/discuss needs to better understand health care workforce issues affecting older adults in Burlington.**
2. **Make Recommendations for further action to address barriers.**
3. **Next Steps**
4. **Issues:**
5. **Workforce shortages:**
* Direct and Clinical care providers including Licensed Nursing Assistants, Personal Care Aides, Residential Care Aides, Home Care Aides.
* Shortages also exist under LTC Surrogate /Self Directed Care employment situations. E.g. clients have identified care givers, yet they can’t hire them as they would need surrogate employers- which are difficult to find.
* Shortages occur in multiple settings: LTC settings/Nursing Homes, Residential Care, Hospitals, Home Health Agencies, Assisted Living Facilities.
* Shortages of Primary Care Physicians, Geriatricians, Podiatrists, Geri-Psych providers and Geriatric Social Workers.
1. **New Americans with Degrees/Professional Credentials Not Recognized in VT**
* Many New Americans arrive to VT with professional degrees or training that is not recognized.
* Many end up working in menial jobs, which contributes to Mental Health/Depression/Suicide among these people.
1. **Vermont Is Not Taking Advantage of Our Mature Workforce**
* Many older Burlingtonians (and older Vermonters) would like to work yet they are not offered opportunities.
* Tax implications for Social Security is an issue for older/retired workers.

**Barriers:**

* The Burlington program to train new LNA’s has been very effective however a barrier to licensure due to Red Cross backing out of VT to provide certification examinations has created further challenges.
* Prometrics will assume this function but there are delays through March 2022.
* Pay rates are very low for these allied professions. There is no incentive to consider these types of roles due to pay scale issues.
* Transportation barriers in these roles are real. Many require driving significant distances around the state to care for clients in different locations/settings.
* Options for childcare is a barrier.
* If salaries were increased, many of the staff who receive other state benefits through Medicaid (Food Stamps, WIC etc) would lose these benefits.
* Ongoing need for training and funding for entry- level health care positions such as these.
1. **Recommendations:**
* Follow up with DAIL to understand if there are alternatives to testing contracts for LNA certifications. **Action**: Jeanne and Jane will discuss at the DAIL Advisory Board on 2/10/22.
* Explore options in the Workforce Development Strategic Plan and determine if we adopt/endorse any of these recommendations: (See page 17 for recommendations related to Nursing, Dentistry).
* [**https://gmcboard.vermont.gov/sites/gmcb/files/documents/VT%20Health%20Care%20Workforce%20Development%20Strategic%20Plan%2010-15-21%20Final%20GMCB.pdf**](https://gmcboard.vermont.gov/sites/gmcb/files/documents/VT%20Health%20Care%20Workforce%20Development%20Strategic%20Plan%2010-15-21%20Final%20GMCB.pdf)
* Explore expanded career ladders starting with HCA/PCA/RCA→LNA→RN. Could partnerships with Tech Centers, Burlington City Program collaborate to develop such a ladder and target specific enrollment each term.
* Explore workforce training funding sources through ARPA funds to the State. Determine if these could be deployed for support of career ladders into allied professional roles/direct service providers and beyond.
* Explore “Top of License” initiatives for New Americans who hold professional/clinical degrees from their native countries.
* Inventory the number of New Americans with professional degrees, clinical licenses or training achieved in other countries. Seek data to understand how impactful this volume might be. **Action**: Jeanne will reach out to UVMMC recruiters to see if they track this data or can determine how we might get this information and follow up Rep. Colston for input.
* Explore collaborations with USCRI to advocate for changes to clinical/medical credentialing practices for foreign- trained clinicians.
* Research barriers within the Vermont Board of Medical Practice who credentials all International Medical Graduates (IMG’s). Further understand how we might advance change to facilitate licensure for these graduates given the significant shortages (MD’s) and advocate for these changes legislatively. **Action:** Jane will research Board of Medical Practice and follow up.
* Promote legislation that reduces barriers to licensure for IMG’s -similar to the recommendations to reduce licensing barriers for Nursing noted in the Workforce Development Strategic Plan.
* Advance /promote the concept of Age Friendly Universities as a place for retraining or retaining mature workforce.
* Address SS tax/wage issues for mature workforce/retirees, through legislation.
* Support the current proposal at the legislature to increase the income threshold to the VT Social Security tax exemption.
1. **Next Steps:**
* Continue discussions/planning at a follow up meeting in two weeks.
* Jane will send out meeting notices so we have a schedule in between each BAC meeting monthly.