

**MEETING NOTICE AND AGENDA**  
**HEALTHCARE SECTOR**

at

**Workforce Development, Inc.**  
2070 College View Road East, Rochester, MN

**Room TBA**

on

**Thursday, March 1<sup>st</sup>, 2018, 1:00 pm**

**Purpose:** To explore and discuss information and initiatives and changes that develop and maintain the Healthcare Workforce in SE MN. To hear about job fairs, grants, and the accreditation process for nursing training providers that are helping fill gaps in healthcare professions. To introduce a structural change in the Healthcare Sector Committee.

Rob V, Guy F. Cheryl G., Kathy Ritchie, Beth, Kolloh, Jim Root, Nadine Holthaus,

1:05-1:05 Introduce Ron VanCraenenbroeck as the Committee Chair:

Charter of sorts done- initial steps- media support for what we are doing and what we are working on- to get people on board. We need to start with a solid charter with a typed plan of what we want to accomplish so there are specific things that they can attach themselves to.

There is a whole sidebar issue- some of the attributes and some of the opportunities that exist in the bigger communities but not in the smaller areas. How do we subsidize that? The population is shifting from the rural communities to the bigger communities. There were employers saying they can no longer run in a year because they don't have the staff.

1:05-1:50 Discuss the upcoming Healthcare Sector Subcommittee Launch event and select presenters and subgroup leads (see agenda outline below)

1:50-1:55 Internationally Trained Medical Worker Program Report

1:55-2:00 Next Meeting, Public Comment, Adjourn

**Rob:** Settle on a time or a date to sit down for a few hours to get some things on the table- the work is relevant and actionable. We need to have a launch meeting.

**Guy-** The key in all of this is the invite portion- it is a lot of conversations and selling. At the end of the day the Taskforce completed some things. The hope was that work would merge into the sector and would continue but it didn't happen. We need to re-energize it. We need to identify who needs to be at that table and have transparent and honest conversation that the work doesn't help.

**Rob:** Who are those people? **SEND THE LIST TO GUY AND ROB.** It needs to be a very honest conversation with people- we need attendance. They were looking at a group that was working with Zumbro education to do CNA classes collectively. They struggled because each district was different. Nothing got done. If we are going to come up with a solution it has to be something that we can agree on. **Guy-** sometimes the solution doesn't have to be the same across the region.

**WHAT DO WE NEED TO DO:**

The first step- we replicate what has been successful and get some momentum from that. Maybe it's not to re-invent anything. Leading-age Minnesota just launched a new training program. Kathy- RCTC works with Century and has online modules.

**Challenges: Trainers and clinical space.**

**The purpose of what we are trying to accomplish: At the end of the day- how do I grow the Workforce for healthcare. Or is there another objective? Jim- it's a common objective but the schools want to fill their seats.**

**The mistake that so many places are making- is that the HR people were failing the administrators. They keep trying to plug the hole.**

**Rob: Create a simple message (this is where you start and this is where you can go) and who do we target, while simultaneously creating programs like Cheryl's to get folks started in the pipeline.**

**Maybe our focus needs to be on the potential populations- high school grads, retirees, etc. and then have a message for each of those groups. What are those groups and what is the message for that group? Jim- we have to be careful to make sure that people are also okay with being CNAs. If this is your goal- a CNA is it- we welcome and respect that.**

**What is the center of the issue that where we can have the biggest impact? Cheryl- we need to get into the elementary schools.**

**We have to think long-term and short-term.**

**If this work has been done the effort might be to resurrect it- and we can get out to the high schools and other populations that exist. Can we do a three hour meeting.**

**Get list of past participants- we are going to have to do this via email- identify who is missing- finalize that list and we can all grab chunks and make phone calls- and see who we can get committed. We need a message as to why they need to come back to the table. What is the catch for them? We can resurrect the old message.**

#### **Innovative Workforce Solutions: SE MN Healthcare Roundtable**

- **Purpose:**
  - To engage healthcare sector employers, Secondary and Post-Secondary educators and community members in the group. **FIND MEMBERS WHO WE CAN CONTINUOUSLY ENGAGE.**
  - Discuss the dire healthcare shortage and the sectors plans to combat the problem.
  - Create smaller subgroups based on specific topics and goals.
  - Begin to implement the plan region wide.
- **Date:** APRIL 2018
- **Location:** TBD (Based on date)
- **Time:** 12PM-3PM
- **Agenda:**
  - Welcome and meeting introduction. Lunch
  - *10 Minutes:* The numbers (Randy or Regional Labor Market folks)

- *5 Minutes:* What we've done so far: Nursing Shortage Solution Taskforce
- *15 Minutes:* The Four Challenges
  1. Awareness and Outreach
  2. Education, Training and Pipeline
  3. Retention- Presentation by Rob
  4. Rural Nursing
- *45 Minutes:* Divide into small groups based on challenge area
  - Discuss the proposed solutions recommended by the Nursing Shortage Solutions Taskforce.
  - Identify additional solutions
  - Determine who is willing to be a continuous member of the subgroup to meet monthly and act on the topics and suggestions
  - Have one committee member at each group be the lead. This person will convene the separate meetings/conversations with the group and report back to the larger group.

### **1. Awareness and Outreach**

- Hot Jobs and Scrubs Camp Events
- Media campaign to leverage local media to cover events
- Career Packet for wide use at school events:
  - Include a copy of potential career ladders
  - Training locations/brochures/etc.
  - WDI Locations
  - Powerpoint/Presentation materials

### **2. Education, Training and Pipeline**

- Figure out how to replicate best practices throughout the region and educate schools on the benefits of such programs
  - Albert Lea and Rochester Public Schools CNA program in high school
  - Bridges to Healthcare Model
  - Financial and Career Navigators for all programs
- Encourage the creation of a collaborative within higher education nursing programs and identify organizations aligned within the state system to create such a collaborative. The initiative should include the following components:
  - a. Create a common nursing application so students can apply to each school of interest through one application.
  - b. Create a referral program so students who are not granted admission to one program can seek out another program with openings.
  - c. Develop a brand/logo for the collaborative so students know who is participating and have a common social media presence.
  - d. Develop an online presence with educational materials on types of nursing, resources for going applying to, and paying for school.
  - e. Develop an agreement amongst the colleges, and release of information paperwork for students so that referrals can be easily made.

- Develop a partnership/agreement between long term care facilities and higher education institutions that would allow tenured, supervisory nursing staff to teach CNA classes as adjunct faculty.

### **3. Retention**

- Mentoring Programs: Develop or identify mentoring programs that can be used specifically in long-term care facilities to increase retention and employee satisfaction
- Develop or solicit Best Practices for an Inclusive and Positive Work Environment
- Provide training to employers

### **4. Rural Nursing**

- Increase training opportunities in rural areas. Utilize online education for introductory coursework.

- *40 Minutes:* Group Report Back and Q&A
  - Each group will spend 5 minutes reporting back their groups plans and answer questions/receive suggestions from the larger group
- *10 Minutes:* Next Steps:
  - Sub-Groups will meet again in late April to set timelines/completion goals for their group and will report back to the larger group at the May Sector Meeting.
  - Both groups will then meet monthly with the Sector meeting at the beginning of the month and the subgroup the third week of the month.
- **Invite List:**