

Health Policy and Advocacy

#### **CHA WORKFORCE COMMITTEE**

Thursday, September 6, 2018 10:00 am - 2:30 pm

#### **California Hospital Association**

1215 K Street 8<sup>th</sup> Floor Board Room Sacramento, CA 95814

#### **Dial-in Attendees:**

1-800-882-3610 Passcode: 6506506#

#### **A**GENDA

<u>ITEM</u>	<u>TIME</u>	<u>SUBJECT</u>	REPORTING	<u>PAGE</u>
ı.	10:00 - 10:05 am	Welcome and Introductions	Moses Aguirre	3
		A. Kristie Griffin, now with Stanford Health Care		
		B. Welcome to new members and guests:		
		<b>New Member: Muneet Chohan</b> <i>Manager, Workforce Planning &amp; Recruitment Alameda Health System</i>		
		Guest: Cathy Galbraith		
		Regional Director of Talent Acquisition for		
		Adventist Health		
		Guest: Britny Hawkins Human Resources Montage Health		
II.	10:05 - 10:10 am	Minutes from Previous Meeting	Moses Aguirre	7
		A. Approval of Joint CHA Workforce-HR Committee meeting from May 17, 2017		
III.	10:10 - 10:45 am	Landscape Update	All	
		A. All members report on emerging trends and issues		
IV.	10:45 - 11:15 am	Leaves of Absence Joint Sub-Committee Report	Gail Blanchard-Saiger	12
		A. Website		
		B. Tools and resources		

V.	11:15 - 12:00 pm	AB 2105: Health Care Apprenticeship Models  A. Background  B. Progress and next steps	Alana Bui Department of Consumer Affairs	13
VI.	12:00 - 12:15 pm	Working Lunch	All	
VII.	12:15 - 1:00 pm	Heroes 2 Healthcare  A. Model for bringing returning veterans with medical experience into health care occupations	Dave Gregorio Heroes 2 Healthcare	14
VIII.	1:00 - 1:30 pm	<ul> <li>Hospital Association of Southern California Report</li> <li>A. HASC Workforce White Paper Convening in Ventura – August 8 (see attachment)</li> <li>B. Upcoming Specialty RN Convenings (Inland Empire, Orange and Los Angeles)</li> <li>C. HASC College to Career Diversity Internship Program (HASC CCDIP) (see attachment)</li> </ul>	Teri Hollingsworth Lisa Mitchell	18
IX.	1:30 - 2:00 pm	Workforce and Education Legislative Update  A. Update on bills, end of legislative session	Cathy Martin	22
х.	2:00 - 2:15 pm	Other Business:  A. Next meeting via converence call, December 6, 2018, 10 am	All	
XI.	2:15 - 2:30 pm	Final Comments, Adjourn	Moses Aguirre	



**TO:** CHA Workforce Committee

FROM: Cathy Martin, Vice President, Workforce Policy

**SUBJECT:** Welcome and Introductions

**CHA Workforce Committee Rosters** 

#### I. ACTION REQUESTED

Review contact information and titles contained in the rosters on the following pages.

#### II. SUMMARY AND BACKGROUND

Attached please find the most recent CHA Workforce Committee roster. Please review your contact information for accuracy. Forward all corrections to Michele Coughlin at <a href="mailto:mcoughlin@calhospital.org">mcoughlin@calhospital.org</a>.

Welcome to:

#### **Muneet Chohan**

Manager, Workforce Planning & Recruitment Alameda Health System



#### CHA WORKFORCE COMMITTEE ROSTER

#### **OFFICERS**

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#### **CHA WORKFORCE COMMITTEE ROSTER**

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**TO:** CHA Workforce Committee

FROM: Cathy Martin, Vice President, Workforce Policy

**SUBJECT:** Draft Minutes of the Joint HR/Workforce Meeting on May 17, 2018

#### I. ACTION REQUESTED

Review and approve minutes of the May 17, 2018 CHA Joint HR/Workforce Committee meeting.



# JOINT CHA HUMAN RESOURCES/ WORKFORCE COMMITTEE MEETING

Thursday, May 17, 2018 10:00 am - 2:30 pm

#### **Shriners Hospital for Children**

2425 Stockton Boulevard, 7<sup>th</sup> floor boardroom Sacramento, CA

#### DRAFT MEETING MINUTES

Members Participating: Moses Aguirre, Kim Bakken, Michelle Childs, Paul Celuch, Michele Dewyea,

Anette Smith-Dohring, Lisa Foust, Nicole Green, Kristie Griffin, Denise Harding, Paul Herrera, Brian Hickey, Heather Kenward, Jason Koors, Natasha Milatovich, Timothy Olaore, Mark Puleo, Samuel Romano, Deb Rubens, Judy Saito, Colleen Scanlon, Gregory Smorzewski, Linda Van Fulpen, Henry Ventura, Rachelle

Wenger, Cara Williams, Laura Niznik Williams, Robert Wozniak

CHA Staff Participating: Gail Blanchard-Saiger, Cathy Martin, Michele Coughlin

Regional Staff Participating: Terri Hollingsworth, Lisa Mitchell, Rebecca Rozen, Judith Yates

Guests Participating: Cindy Beck, Kish Rajan

#### I. Welcome and Introductions

Moses Aguirre and Robert Wozniak welcomed members and the meeting began at 10:09 a.m. Attendance was taken, followed by individual introductions by meeting participants. Members new to the committee(s) were welcomed to the groups.

#### II. Minutes from Previous Meeting

Moses Aguirre directed attendees to the April 26, 2018 meeting minutes and requested attendees bring forth any changes. No changes were requested.

It was moved and seconded and the minutes from the April 26, 2018 meeting were unanimously approved.

Robert Wozniak reminded members of the Human Resources Committee that the minutes from the February 27, 2018 meeting had been distributed via email for review. He instructed members to let Gail Blanchard-Saiger know of any changes to the document.

#### III. Landscape Update

Gail Blanchard-Saiger started the landscape discussion by informing the group that SEIU has submitted a public records act request to obtain the addresses of record for California CNAs, home health aides,

certified hemodialysis technicians and licensed nursing home administrators from CDPH. Gail shared that the original release of this information was previously set for May 16, however after pressure from provider associations, the date has been moved to May 21 to allow providers the opportunity to change their address ahead of the release. Gail shared a notice detailing this action with the group.

Paul Herrera shared that Folsom Hospital filed a petition with the NLRB to permit the opt-out for payment of union dues. He explained that the union representative had not been to the hospital in a year. He shared that this action would require a 2/3 vote and said he will update the committee on the outcome.

Anette Smith-Dohring shared that Sutter Health has implemented a streamlined method to document students working in their facilities in order to place more structure into the process. The process includes background screening which must be completed 90 days before placement in their facilities. Anette shared that Sutter had received some pushback from the schools on this new requirement.

Gail Blanchard-Saiger then raised the topic of medical marijuana and summarized the content of a bill that aims to protect the use of the substance for medical purposes by requiring reasonable accommodation by employers. Kristie Griffin stated that, despite legalization of its use in California, Dignity Health follows federal law, as it is more prescriptive. Debbie Rubens asked if any streamlined testing was available to determine if the amount of the substance was high enough to cause impairment in the workplace. Michele Dewyea mentioned that the Department of Transportation (DOT) would be a good resource to contact to determine if such a test existed.

Gail Blanchard-Saiger stated that she would look into the standards used by DOT

Gail Blanchard-Saiger then introduced the subject of EDD surveys on wages, as there is regulations being proposed that would make these surveys mandatory, instead of being voluntary.

#### **Center for Competitive Workforce**

Kish Rajan gave a presentation on the developing platform that would merge quantitative and qualitative data to align workforce supply and demand across regional talent development systems in California. Kish explained how the tool would fuse data and insight to turn findings into actionable intelligence to calibrate regional talent development systems. Following the presentation, several attendees shared feedback and asked for the opportunity to review the final product before it was published.

Kish to send Cathy Martin a draft as soon as possible

#### **Leaves of Absence Subcommittee Update**

Gail provided an update on the progress-to-date of the leaves of absence subcommittee. This update included a preview of recently posted resources on a CHA webpage devoted to this topic. Gail asked the group to send additional resources for inclusion on the webpage.

Gail then shared that she is working on developing a resource to help hospitals determine if outsourcing LOA functions is the best option. She shared that the development of this tool would be a process and that she would keep the group updated on the status in the future.

CHA to develop and release a news article to highlight the resources on the LOA web page

#### **Legislative and Regulatory Updates**

Cathy Martin provided an overview of the legislation pertinent to workforce and education. The update included a summary of the following bills:

- AB 2018 (Maienschein): Loan Repayment for Public Mental Health Workers
- AB 2143 (Caballero): Licensed Health Service Provider Education Program
- AB 2202 (Gray): UC Merced Medical School
- AB 2281 (Irwin): Medical Laboratory Workforce Modernization
- AB 2539 (Mathis: Steve Thompson Loan Repayment Program
- AB 2759 (Santiago): Baccalaureate vs. Associate Degree Nursing training and employment
- SB 906 (Beall & Anderson): Peer Specialist Certification
- SB 1348 (Pan): Diversity and demographic reporting for allied health students
- SB 1373 (Stone): Pharmacist Ratios

Gail Blanchard-Saiger provided a history and update on current state and local ballot initiatives. Gail then provided an overview of legislation pertinent to labor and employment, with an emphasis on AB 3087. She informed the group that May 11 would be the last day for policy committees to hear and report to the floor. Gail then gave an update on regulatory activity including information on the Plume petition, indoor heat illness, workplace violence, employee access to IIPP, antineoplastic drug handling and fair employment and housing council. Gail then gave an case law update, which included the latest information on Gerard v. Orange Coast Medical, Alvarado v. Dart Container and Dynamex v Superior Court. Gail concluded her presentation with an update on Paid Sick Leave and on health care workplace violence prevention.

#### IV. California Health Occupation Students of America

Cindy Beck gave a presentation on California Health Occupation Students of America (CalHOSA) to inform the group on the history and purpose of the CalHOSA. Cindy explained that CalHOSA continues to seek advocacy and support, as many in the healthcare industry are unaware of the program. Cindy went on to clarify that CalHOSA is seeking support with opening opportunities for student experiences, not seeking money from hospitals. Cindy went on to acquaint the group with the projects and service that CalHOSA provides. Cindy then distributed informational packets to all meeting attendees.

#### V. Other Business

Debbie Rubens introduced herself as chair-elect of the CHPAC and explained the importance of supporting the work of the political action committee. She explained that individual contributions directly support the PAC and urged attendees to make a donation in any amount. CHPAC contribution forms were distributed to meeting attendees. Moses reminded the committee members that the 2018 goal was 100% participation.

Michelle Childs brought up facility/system representation on the committees. It was suggested that an analysis of facility/system representation be completed to determine where gaps in committee participation may exist.

CHA will conduct an analysis of participation and provide this information to committee members

Members were then reminded of upcoming committee meetings for 2018:

- The next CHA Workforce Committee meeting scheduled for September 6, 2018 in Sacramento
- The next HR Committee meeting is scheduled for July 24, 2018 via conference call

#### VI. Adjourn

The meeting adjourned at 2:35 pm.



TO: **CHA Workforce Committee** 

FROM: Cathy Martin, Vice President, Workforce Policy

**SUBJECT:** Leaves of Absence Sub-Committee Update from Gail Blanchard-Saiger

#### I. **ACTION REQUESTED**

None, update on progress made to date.

#### II. **BACKGROUND**

In September 2017, at the joint HR/Workforce Committee meeting, members agreed to form a joint sub-committee to work on resources and tools for managing leaves of absence. Since that time, the sub-committee has made progress toward this effort and there is now an official webpage on the CHA website dedicated to this topic. Gail Blanchard-Saiger will join the meeting to provide an overview. <a href="https://www.calhospital.org/leaves-absence">https://www.calhospital.org/leaves-absence</a>



TO: **CHA Workforce Committee** 

FROM: Cathy Martin, Vice President, Workforce Policy

SUBJECT: AB 2105 (Rodriguez) Implementation Presentation

#### I. **ACTION REQUESTED**

None, update on AB 2105, earn and learn models for allied health training, implementation.

#### II. **BACKGROUND**

In 2016, the Governor signed into law AB 2105, which required the Department of Consumer Affairs (DCA), by January 1, 2020, to engage in a stakeholder process to update policies and remove barriers to facilitate the development of earn and learn training programs (much like the apprenticeship model) in the allied health professions. Much of this work involves examining barriers to establishing recognized apprenticeships for health care given the myriad of licensing and accrediting bodies that play a role in setting training standards. Text of the legislation can be viewed at:

http://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill id=201520160AB2105

Since enactment, DCA has convened a planning committee that is working to identify areas of opportunity and where barriers need to be addressed. Three areas of opportunity identified by the planning committee include specialty nursing, specialty imaging, and behavioral health.

DCA staff will join us to update the committee and to discuss how employers can engage in this process, which will be on going through 2019.



TO: **CHA Workforce Committee** 

FROM: Cathy Martin, Vice President, Workforce Policy

**SUBJECT:** Heroes to Health Care

#### I. **ACTION REQUESTED**

None.

#### II. **BACKGROUND**

At a recent meeting of the AHA A2 Workforce Members, Dave Gregorio, Executive Director of Heroes to Healthcare, presented a model designed to transition military personnel with health care experience into the civil health care workforce.

Dave will be traveling from Texas to speak with members about the benefits of Heroes to Healthcare and how California hospitals can participate.



# HEROES TO HEALTHCARE



Engaging, energizing and equipping our partners with the knowledge and attitude to excel.



### THE HEROES TO HEALTHCARE MISSION

A US Department of Labor and VA approved program credentialed by industry leading institutions to deliver a blended learning strategy leveraging the most advanced remote and in-person learning with the best industry content by passionate thought leaders within a Registered Apprenticeship design .

#### **Diversity**

20% of current apprentices are women, 54% are minorities, and 10% are disabled veterans. With an average age of 30, 8 years active duty and over two years of extensive healthcare training our Heroes bring a wide range of backgrounds and experiences to help create a solid foundation for success.

#### **Pre-Screened Talent**

We recruit candidates who demonstrate an aptitude for success in our roles. Our team pre-screens highly ranked candidates using specialized quantified assessment tools aligned to your requirements and only select the best for an interview with our Ally Employers.

#### **Trained & Certified Professionals**

Healthcare experienced veterans receive accelerated occupational training and industry recognized certification offered by The AAPC and the NHA, the nations largest healthcare business association and education organizations. Upon successful completion of the DOL Apprenticeship graduates also receive a certificate of completion for their job classification therefore recognizing them as experienced professionals.

#### Retention

Leveraging our US DOL Registered Apprenticeship design our competency map ensures engagement, growth, and performance while also fostering retention. Similar programs have been able to maintain an 82% retention rate after 5 years.

#### **Cost Savings**

Registered apprentice salaries start at 55% of market rate, while also qualifying for other subsidies from state and federal resources designed to support our Ally Employers in offsetting your investment an establishing an advantageous economic model. Our model also leads to considerable savings on recruitment, training and development costs while also providing our veterans a monthly stipend to offset the employer reduced compensation. A Win - Winf or all!

#### Compliance

By leveraging our proven model our Ally Employers don't have to sort through all the state and federal regulations, registration and reporting requirements and wonder what level of skills and competencies exist within their new employee. Our model is designed within the requirements of all government entities to include allowing for healthcare heroes to be compliant with meaningful use applications.

**Ready For Roles Leveraging Certified Skills and Competencies** 

**Health Administrator / Practice Manager - CPPM** 

**Certified Pharmacy Technician - CPhT** 

**Certified Medical Assistant - CCMA** 

**Cyber Security Analyst - Net+** 

heroestohealthcare.com

# HEROES TO HEALTHCARE



## **It's Good Business**

- 160% HIGHER Engagement Score
- 10% HIGHER Customer Metrics
- 17% HIGHER Productivity
- 20% HIGHER Sales
- 21% HIGHER Profitability
- 41% LOWER Absenteeism

- 59% LOWER Turnover
- 70% FEWER Employee Safety Incidents
- 58% FEWER Patient Safety Incidents
- 40% FEWER Quality Incidents(Defects)
- 50% SAVINGS 1st Year Compensation
- 3.7 Times HIGHER NPS

## It's Great Value

Leveraging the Registered Apprenticeship and VA benefits an Ally Employer will experience an **average** savings of 50% of the first year compensation upon completion while still ensuring that veteran total compensation is comparable to active duty. In addition Ally Employers are **eligible for the Work** Opportunity Tax Credit up to \$9,600 AND reimbursement for additional training or development expenses.

# It's Just More Better.....

Ally employers are provided leadership training for non veteran leaders.

Each veteran and ally employer are assigned a coach for 90 days

H2H manages all recruiting, screening and interview coordination

All DOL & VA reporting, management, audits and compliance is done by H2H

Veteran "Cohort Connect" platform is active throughout veteran employment

"The H2H veteran program is not yet another charitable initiative but a means to identify, develop and maximize high performing talent that led our business growth and was instrumental in us reaching new financial goals. It was good business."

- JR. Thomas , CEO Medsynergies



TO: CHA Workforce Committee

FROM: Cathy Martin, Vice President, Workforce Policy

SUBJECT: Hospital Association of Southern California (HASC) Update

#### I. ACTION REQUESTED

Discussion item.

#### II. SUMMARY AND BACKGROUND

Teri Hollingsworth and Lisa Mitchell of HASC will share updates from HASC regarding a registered nurse workforce convening and Health Career Connections.



Ensuring a continuum of well-trained, diverse, health profession leaders through the HASC College to Career Diversity Internship Program, in partnership with:



The HASC College to Career Diversity Internship
Program (HASC CCDIP) is designed
to accelerate Member efforts to address workforce
diversity and shortage objectives, as defined and
measured by the 2017 HASC Southern California
Workforce Solutions Paper, through a sevenpronged strategy:

- 1) Participating host sites identify their three priority workforce objectives to be impacted by a HASC CCDIP intern. HCC manages intern recruiting for placement(s) relevant to these priorities.
- 2) Members ideally commit to a three-contiguous summer participation cycle, and support funding an intern who completes your substantive project(s) in 10 weeks. Interns earn a \$4,000 stipend.
- 3) Participating HASC sites have guided access to HCC's nation-wide alumni network, expanding your recruitment talent pool & efforts.
- 4) HASC member CEO's and/or Behavioral Health, Diversity, Nursing, & HR leaders present at the HCC mid-summer conference and to HCC alumni.
- 5) HASC CCDIP HCC intern alumni convene annually to generate solutions to workforce shortage & inclusion challenges...
- 6) HCC delivers and evaluates a Preceptor training.
- 7) HCC will staff and evaluate this comprehensive & rewarding program for measurable, sustainable ROI success. The cost per intern is \$6,900.



# **Mission**

HASC's mission is "to lead a coordinated regional effort to identify and implement strategic solutions that ensure a sufficient supply of well-trained health care professionals at all levels of the care continuum."

Interns are recruited from and serve in the six counties in which HASC members operate.

# **Reach and Impact**

- **▼** 500 annual SoCal Applicants
- 150 interns placed annually by 2023
- ▼ 80% HASC member participation by 2023
- 1000 major summer projects completed by 2025

# HASC College to Career Diversity Internship Program Connects you to Talent

- HCC recruits, screens, and matches interns whose interests and skills align with your hospital needs, objectives, and projects;
- 90% of interns are from under-represented ethnic populations;
- HASC CCDIP interns are from top colleges and universities, and are from communities served by or located near your hospital or medical center;
- 90% of interns are health initiative advocates, & campus community leaders, mentors & mentees.

## **Proven Track Record**



of preceptors were satisfied with their intern's contribution to the organization



of preceptors say hosting an intern is a good return on investment





HASC Members will have access to HCCs 28 year Alumni network, to support long-term workforce shortage & recruiting needs

# **HASC Member & Preceptor Roles**

- Offer a full-time (40 hours/week), 10 week internship from June through August/September;
- Provide intern with meaningful projects & learning opportunities;
- Provide supervision and mentoring;
- Offer exposure to organizational leadership, collaboration, operations, and administration;
- Meet at least once per week with their intern/s
- Provide intern/s with a place to work (computer, desk, etc.; even if the placement is primarily field/community work)
- Designate a Preceptor to supervise the intern.

# Links to and features of Internships

Edwin Chojolan, AltaMed
https://youtu.be/mVEEcPvzHhs
Andrew Bergman, PIH
https://youtu.be/PSsWCavHqSI

# **Participation Timeline in Brief**

**September to March each year:** New Host Site Recruitment.

September through January each year: HCC recruits candidates, reviews applications, & prescreens candidates. Host sites provide HCC and HASC with their CCDIP intern (paragraph) project scopes of work.

January through February each year: HCC matches candidates to project scopes and geographic location of internship opportunity.

March through April of each year: Host sites interview candidates, and HCC confirms the matches of candidates to sites and preceptors.

May through September each year: The 10-week, full-time internship & professional development program occurs & is evaluated.

**Year round:** Participating host sites have guided access to announce positions, and recruit candidates from HCCs alumni database.



# **HCC Roles within HASC CCDIP**

- Recruit, screen, & match interns with your hospital or department workforce and project needs;
- Manage a structured internship program, which includes facilitating interns' development of an internship plan, and project deliverables;
- Support your hospital Preceptors, and coach and advise interns;
- Organize health professional development workshops, site visits, and networking events;
- Provide annual reports and initiative data to you;
- Evaluate the HASC CCDIP initiative for HASC.

# **Intern Roles**

- Each intern commits to 10 consecutive 40 hour weeks, & is supervised by your Preceptor/staff.
- HCC does require intern participants to attend:
   Orientation, mid-late June, the annual July
   (Friday/Saturday) professional development & health issues conference, as well as one 1/2-day site tour
- Required project deliverables: a) complete a substantive scope of work, b) complete a final report and a 2-minute project video.

## Connect with HASC CCDIP!

To host an intern contact Patricia or Lisa:

Patricia S. Etem, MPH

Regional Manager, Southern California petem@healthcareers.org (562) 208-3508

### Lisa R. Mitchell

Workforce Development Program Manager Hospital Association of Southern California LMitchell@hasc.org (213) 538-0722

# SOUTHERN CALIFORNIA'S HEALTH CARE WORKFORCE:

Challenges, Approaches & Solutions





Health Workforce Initiative

# Over the next five years, Southern California will need to fill close to 150,000 health care job openings.

Join the Hospital Association of Southern California (HASC) in partnership with South Central Coast Health Workforce Initiative (HWI) to learn about the recent HASC Health Care Sector Report. Explore the challenges, approaches and solutions to recruit and develop a strong and skilled workforce.

Aug. 8, 2018 9 a.m. - 2 p.m.

Crowne Plaza Ventura Beach 450 E. Harbor Blvd, Ventura, CA 93001

## **JOIN OUR CONVERSATION WITH:**



Michelle Culpepper Human Resources Director Vista del Mar Hospital



Amy Mantell
Human Resources Director
Dignity Health



Michelle J. Reynolds Human Resources Manager Ventura County Health Care



Henry Ventura
Workforce Development
Program Manager
Cottage Health

### AS AN ATTENDEE\*, YOU WILL HAVE THE OPPORTUNITY TO:

- Voice your opinion on hiring, recruitment, workforce planning, turnover and training as we work together to build tomorrow's health care workforce
- Engage HASC and regional employers and stakeholders about challenges, opportunities and risks connected to hiring
- Explore ways to manage your aging baby boomer workforce in specialty nursing positions

#### LIMITED SPACE AVAILABLE

# **RSVP NOW**

\*All registered attendees will receive a copy of the Southern California's Health Care Workforce: Challenges, Approaches and Solutions report.



**TO:** CHA Workforce Committee

**FROM:** Cathy Martin, Vice President, Workforce Policy

**SUBJECT:** Legislative Update

#### I. ACTION REQUESTED

None, update on legislation in the last month of session.

#### II. SUMMARY AND BACKGROUND

The attachment provides a summary of major 2018 workforce and education legislation and the status of each.

#### **Legislative Update: Workforce Bills – 2018**

AB 2018 (Maienschein)	Loan Repayment for Public Mental Health Workers: This bill would clarify that OSHPD needs to include in the 5-year plan both expansion plans for loan forgiveness and scholarship programs offered in return for a commitment to employment in California's public mental health system and expansion plans for making loan forgiveness programs available to current employees of the mental health system who want to obtain Associate of Arts, Bachelor of Arts, master's degrees, or doctoral degrees.  CHA Position: Support	Senate Appropriations, Died on suspense
AB 2143 (Caballero)	Licensed Health Service Provider Education Program: This bill would, on and after July 1, 2019, add nurse practitioners listed as psychiatric-mental health nurses, physician assistants who specialize in mental health services, and licensed educational psychologists, as specified, to those licensed mental health service providers eligible for grants to reimburse educational loans, and would add additional licensing fees for these professionals to fund the program.  CHA Position: Follow, Hot	Enrolled to the Governor
AB 2202 (Gray)	University of California, Merced, Medical School: This bill would create the University of California San Francisco San Joaquin Valley Regional Medical Education endowment Fund for the purpose of supporting the annual operating costs for the development, operation and maintenance of a branch campus of the UCSF School of Medicine.  CHA Position: Follow, Hot, may support in the Senate if it makes it off of suspense	Enrolled to the Governor
AB 2281 (Irwin)	Medical Laboratory Workforce Modernization: Existing law provides for the licensure, registration, and regulation of clinical laboratories and various clinical laboratory personnel by the State Department of Public Health. Existing law requires a medical laboratory technician to be licensed by the department, sets forth the duties that a licensed medical laboratory technician is authorized to perform, and prohibits a licensed medical laboratory technician from performing microscopic analysis or immunohematology procedures. This bill would exempt from that prohibition blood smear reviews, microscopic urinalysis, and blood typing of moderate complexity.  CHA Position: Support	Signed by the Governor, 8/28/2018
AB 2539 (Mathis)	Steve Thompson Loan Repayment Program: Existing law establishes the Steven M. Thompson Physician Corps Loan Repayment Program (program) in the California Physician Corps Program within the Health Professions Education Foundation, which provides financial incentives, including repayment of educational loans, to a physician and surgeon who practices in a medically underserved area, as defined. This bill would reduce until January 1, 2021, and only for program participants who enroll in the program on or after January 1, 2019, and before January 1, 2021, that the clinic or the physician owned and operated medical practice setting have at least 30% of patients (instead of 50%), if the area is a rural area, as defined, or at least 50% of patients, if the area is not a rural area, who are from the above-described populations. The bill would require the foundation to prepare a study to determine the effect that the revised definition has on funding for loan repayment granted under the program during the calendar years 2019 and 2020. CHA Position: Support	Senate Appropriations, Died on suspense

Revised: August 29, 2018

AB 2759	Baccalaureate versus Associate Degree Nursing training and employment: Would prohibit clinics and health facilities	Introduced:
(Santiago)	that receive public funds from excluding students enrolled in an approved public community college associate degree pre-licensure nursing program from clinical placement. Would also prohibit clinics and health facilities from	2/16/18
	discriminating against a person (in employment, compensation or other means) because he or she has an associate degree in nursing instead of a baccalaureate degree.  CHA Position: Oppose	WITHDREW by the Author
SB 906 (Beall	Peer Specialist Certification: This bill would require the State Department of Health Care Services to establish, no later	Third reading, in
and Anderson)	than July 1, 2019, a statewide peer specialist certification program, as a part of the state's comprehensive mental health and substance use disorder delivery system and the Medi-Cal program.  CHA Position: Support	Assembly
SB 1348 (Pan)	Diversity and demographic reporting for allied health students: This bill would require, beginning in 2019 and in each year thereafter, the chancellor to include in the annual report, for each community college program that offers certificates or degrees related to allied health professionals that require clinical training, specified information relating to clinical training for those certificates or degrees. The report must include both of the following:  (1) The number of students participating at each clinical training site. This shall include information about proficiency in languages other than English.  (2) The license number of each clinical training site. If the license number is not available, the report shall include the employer identification number of the clinical training site.  CHA Position: Follow, Hot	Third reading, in Assembly
SB 1373 (Stone)	Pharmacist Ratios: This bill would require a general acute care hospital licensed by the department to employ, at a minimum, one full-time pharmacist for every 100 licensed beds, and for additional licensed beds, employ additional pharmacists on a pro rata basis. The bill would require a general acute care hospital that is licensed for less than 100 beds to employ one pharmacist on at least a part-time basis.  CHA Position: Oppose	Introduced: 2/16/18 Set for SEN Health: 04/25/18
		Held: Didn't make policy committee deadline