Giving Care: A Strategic Plan to Expand and Support

New Hampshire's Health Care Workforce

Executive Summary—March 2022



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Prior to the pandemic, New Hampshire was second among states hardest hit by labor shortages overall. In 2019, New Hampshire employed an average of 94,100 workers in its health care and social assistance industry. The industry's average growth of 1.6 percent between 2017 and 2019 outpaced that of the state's workforce overall, which grew an average of one percent during the same time period. In addition to being the fastest growing industry, the health care sector had the most unfilled jobs.

The pandemic exacerbated both the need for and strain on health care personnel. In the Granite State, burnout led to staff losses across the health care spectrum, but especially in nursing homes, home health, and community care settings. In its November 2021 letter to the Governor and Commissioners of the New Hampshire Departments of Health and Human Services and Business and Economic Affairs, the Health Care Workforce Coalition explained that "the difficulty to recruit, retain, and fully staff facilities and programs is seriously impinging on patients' access to care and deepening financial stress for our state's health care providers." The aging of the state's primary care provider workforce also complicates recruitment and retention; 24% of its nurse practitioners

1 Dean, Grace. (2021). Nebraska, New Hampshire, and Vermont are states struggling hardest to fill jobs in the US labor shortage, new research suggests. Business Insider (September 24). https://www.businessinsider.com/labor-shortage-dc-nebraska-new-hampshire-vermont-jobs-hawaii-employment-2021-9

and 27% of its primary care providers are over age 60.^{6.7} As well, New Hampshire is projected to be 10th among U.S. states with the most severe nursing shortages.⁸ According to the Health Care Workforce Coalition, such shortages exist across the health care spectrum, including all provider types and those providing other vital support functions.⁹ Ensuring an adequate supply of qualified workers is essential to meet the needs of the state's aging residents and its increasingly diverse population. Given its size and rate of growth, the strength of the health care sector is critical to New Hampshire's overall economy.¹⁰

While the bench of health care workers is simply not deep enough, it also lacks sufficient diversity to address the needs of the state's increasingly diverse population. The workforce is also impacted by:

- Stress, mental health, and barriers to care. Health care workers have endured heightened stress due to risks the pandemic posed to their own health, caring for critically ill patients, too few resources, and a constantly evolving understanding of the virus, prevention measures, and treatment options. Workers experiencing mental health issues experienced the challenges that face the general population, namely stigma and problems accessing care.
- Low wages and high costs to live in New Hampshire. Many health
 care workers in low-paid entry-level and support positions that put
 them at risk for exposure to COVID-19 were forced to work multiple
 jobs to make ends meet while others transferred to other industries

6 Nurse Practitioner Data available at: https://dashboard.nh.gov/t/DHHS/views/2018-19APRNWorkforceDataReport/
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https://dashboard.nh.gov/t/DHHS/views/2018-19Aid=1&%3Aembed=y
https://dashboard.nh.gov/t/DHHS/views/2018-19Aid=1&%3Aembed=y

- 7 Primary Care Physician Data available at: https://dashboard.nh.gov/t/DHHS/views/2019PhysicianWorkforceDataReport/
 Demographics?%3Aiid=1&%3AisGuestRedirectFromVizportal=y&%3Aembed=y
- **8** University of St. Augustine for Health Sciences. (2021). The 2021 American Nursing Shortage: A Data Study. Online Blog Post. (May). https://www.usa.edu/blog/nursing-shortage/
- **9** https://www.nhproviders.org/new-hampshire-health-care-workforce-coalition
- **10** Institute on Assets and Social Policy, The Heller School for Social Policy and Management, Brandeis University. (2014). Strengthening New Hampshire's Health Care Workforce: Strategies for Employers and Workforce Development Leaders. (December). https://heller.brandeis.edu/iere/pdfs/jobs/NH-health-care-workforce.pdf

² New Hampshire Economic Conditions. (2021). Temporary Staffing in New Hampshire's Health Care Industry. (September). https://www.nhes.nh.gov/elmi/products/documents/ec-0921-article.pdf

³ Presentation by Brian Gottlob to the Foundation for Healthy Communities, Concord, NH, June 2021.

⁴ Wagner, E., Amin, K., Cox, C. & Hughes-Cromwick, P. (2021). Health Spending: What Impact has the Corona Virus had on Health Employment. Peterson/ Kaiser Family Foundation Health System Tracker. (December 10). https://www.healthsystemtracker.org/chart-collection/what-impact-has-the-coronavirus-pandemic-had-on-healthcare-employment/

⁵ November 2021 Health care Workforce Coalition letter available at: http://dupontgroup.com/covid-19-resources/workforce-letter/

for more money and less risk. Low wages also make it difficult for health care employers to compete with employers in other states and other professions. Health care workers struggle to afford a range of necessities to live in New Hampshire, including quality and affordable housing, transportation, and childcare, all issues that should be addressed by public policy.

• A thin pipeline and barriers to post-secondary education and training. Too few potential workers have an interest in or adequate understanding of the range of roles available within health care. Investment in efforts to diversify the workforce, including outreach and marketing, have been insufficient. The high cost of education poses a barrier to entry and advancement in health care roles. Too few training and education opportunities exist (e.g., apprenticeships, post-secondary programs, clinical placements), as well as too few supervisors to train health care workers. There is poor alignment of existing education/ training programs with workforce shortages. Employers lack capacity to ensure an adequate pipeline of workers for their organizations. Competition for employees creates a barrier to collaboration among health care organizations to share best practices and address their common workforce challenges.

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• Reimbursement issues. Low reimbursement rates; lack of reimbursement for critical services; and a lack of parity for mental health services affect the wages employers can offer and their ability to recruit and retain workers, as well as the ability of health care workers to make ends meet. By rewarding procedures and quantity over outcomes and quality, current reimbursement structures do not incentivize coordination and integration of care, practices that are essential to quality outcomes. By pressuring providers to maximize the number of patients they see, the current structure adds to provider

- stress and discourages their participation in professional development opportunities and providing clinical placements and supervision.
- Regulatory barriers and constraints. Complying with burdensome regulations and documentation means providers have less time to spend with patients and presents additional barriers to attracting and retaining staff. Licensing and credentialing processes and requirements discourage qualified professionals from seeking employment in New Hampshire and cause major delays in being able to recruit, on-board, and bill for services provided by new employees, particularly those from other states.
- Policy barriers. Multiple policy-related challenges exist. Insufficient
 funding for the state's community college and university systems,
 health care apprenticeship programs, and help to relieve students of
 education-related debt impede the ability to train an adequate number
 of workers. Government employment policies, such as prohibiting
 the filling of positions until vacancies exist, cause delays in hiring and
 create gaps in staffing. Temporary policy and regulatory changes that
 supported telehealth during the pandemic should be made permanent.
- **Siloed workforce development efforts.** While many initiatives exist within the state to bolster the health care workforce, they are largely siloed and lack coordination.
- Data challenges. Data on the health care workforce are collected by multiple entities in varying ways. No central repository exists. Thus, it is difficult to know which data exist and where they can be found. Data can be hard to access, interpret, and use to inform policy and planning. There is a lack of common vocabulary and definitions, an insufficient level of detail, and too few data scientists to assist with understanding and interpreting data.

Beginning in 2020, given the current and anticipated impact of workforce shortages on the health of the population and the state's economic well-being, the Forward Fund at the Endowment for Health prioritized the creation of an action-oriented state plan for health care workforce development. The assessment phase engaged over 50 stakeholders and led to a shared understanding of workforce needs and activities across the state. Thereafter, in a series of facilitated meetings,

The Vision

The New Hampshire health care workforce is strong and diverse due to factors that include competitive, equitable wages commensurate with experience, training, education and an environment that supports diversity, quality care and continuous professional growth. As a result, community outcomes are improved and patients, clients, and the workforce are engaged and healthy.

a diverse group of over 60 stakeholders participated in four workgroups to develop the plan's goals, objectives, and strategies. The plan, intended for implementation within two years, includes 107 strategies to address the **pipeline**, **recruitment**, **and retention** needs facing the state; critical **policy and regulatory** issues; and **data** needs, and provides a mechanism for coordination and **governance** of workforce development efforts.

The strategic plan is intended for multiple (sector) audiences, including state government, legislators, the health care industry/employers, health and behavioral health professional associations, health insurance/payers, educators and trainers of health care personnel and those that contribute to the pipeline of health care workers (e.g., high schools, vocational/technical schools, community colleges, universities, employer-based training programs, Area Health Education Centers), advocacy groups/organizations, the business community (i.e., private industry, both associated with health care and not), and philanthropy. To learn more about the strategies and how you can support health care workforce development in New Hampshire, please contact the Endowment for Health's Forward Fund at info@endowmentforhealth.org.

