

Senate Committee on Health, Education, Labor and Pensions
The Healthcare Workforce: Addressing Shortages and Improving Care
May 22, 2018
10:00 a.m., Dirksen 430

Purpose

The purpose of this hearing is to discuss the growing shortage of healthcare professionals in rural areas, and examine what the Federal government is doing to mitigate this widening gap.

Presiding Members

Chairman Lamar Alexander, Ranking Member Patty Murray

Senators Murkowski, Cassidy, Kaine, Smith, Hassan

Witnesses

Kristen Goodell, M.D., F.A.A.F.P., Assistant Professor Of Family Medicine, Assistant Dean For Admissions, Boston University School of Medicine

Julie Sanford, D.N.S., R.N., F.A.A.N., Director and Professor, School Of Nursing, James Madison University

Elizabeth Phelan, M.D., M.S., Director, Northwest Geriatrics Workforce Enhancement Center, Associate Professor of Medicine, Gerontology and Geriatric Medicine, and Adjunct Associate Professor of Health Services, University of Washington

Opening Statements

Chairman Alexander discussed the growing shortage of healthcare professionals across the country, in part due to a growing elderly population. The shortage has been shown to affect rural communities more significantly than other parts of the country. The Federal government is funding health workforce training programs, but needs to understand whether these programs are working and how adequately healthcare professionals are trained. Additionally, we must understand how the government can encourage the development of a deeper healthcare workforce.

Ranking Member Murray said it is important to not only encourage a deeper pipeline of healthcare professionals, but to ensure a diverse healthcare workforce as well. The Health Resource and Service Administration (HRSA) provides grants and scholarships to graduate medical education, as well as supports workforce development in geriatrics and behavioral health. Although more needs to be done to support these efforts, the Administration's proposal to slash programs by 90% does not lend to necessary program furtherance. Additionally, strengthening the healthcare workforce also means addressing sexual harassment in the work place.

Testimony

Dr. Goodell discussed workforce deficiencies, particularly within rural areas where 20% of Americans live, but where only 9% of healthcare professionals seek work. To address this gap in coverage, Congress must promote workforce diversity and increase the proportionality of primary care physicians. Residency training models must also evolve to meet the needs of the

current healthcare treatment. Traditionally, residency programs involve large amounts of in-hospital training, but the current healthcare model is pushing to keep patients out of hospitals. Therefore, residency training programs must evolve to meet new schema of treatment, which would involve bringing more clinical training into rural community health facilities.

Dr. Sanford discussed the Title VIII Nursing Workforce Development Program, which provides grants for the training of nurses in rural communities. Some of this training includes the offering of online nursing classes, which has strengthened the quality and diversity of the nursing workforce. The current nursing workforce, however, is aging and retiring, and thus faces added layers to future workforce shortages. Reauthorization of the Nursing Workforce Development Program must be a priority.

Dr. Phelan discussed the Primary Care Liaison Program, which seeks to provide higher quality geriatric care through dissemination of best practice guidance on treating older adults to primary care physicians. Minimal exposure to geriatric care training has been shown to have a significant impact on the overall quality of care to the elderly. Therefore, addressing healthcare workforce shortages must also consider adding geriatric training to required curriculum.

Question and Answer

Sen. Murkowski asked about ways to avoid the concentration of Federal funding to big academic institutions that do not provide a workforce pipeline to rural areas. **Dr. Goodell** said the Teaching Health Center program locates residencies and has residents spend most of their time in community health centers, as opposed to the big university settings. This allows residents to connect with communities, which vastly increases the likelihood that residents will continue their practice in rural areas.

Sen. Murray asked about the problem of geriatrician shortages and how Project ECHO supports geriatric care training. **Dr. Phelan** said the ability of professionals to have access to a community of shared knowledge is critical to bring and keep professionals in rural areas.

Sen. Cassidy asked about the burn-out of physicians, particular among female physicians, when faced with administrative burdens. **Dr. Goodell** said physician burn-out due to administrative burdens is a major problem for the healthcare workforce. Increasing physician flexibility and changing the way in which we pay physicians, paying them for the quality of care instead of paying for volume, is one way to address the burn-out problem.

Sen. Cassidy asked about the mal-distribution of medical professionals, where training slots in the Northeast are not adequately dispersed to the rest of the country. **Dr. Goodell** responded there needs to be better allocation of residency and medical graduate training programs in rural areas.

Sen. Kaine asked about faculty vacancies in academic institutions. **Dr. Sanford** responded the loan and grant repayment programs have been critical in maintaining faculty in academia.

Sen. Kaine asked about online training as a tool to extend training over wide geographic areas. **Dr. Goodell** said online training is a powerful tool used to disperse medical training and provide more people with the care they need.

Sen. Collins asked why it is critical to infuse geriatric training across general healthcare training. **Dr. Phelan** said having a basic understanding of how care of the elderly differs from general primary care is important because essentially every primary care physician will have to care for older adults.

Sen. Smith asked about the problem with recruiting in rural America where there are auxiliary factors for families to consider, such as child care services or limited broadband access. **Dr. Sanford** said a recent grant program at James Madison University (JMU) establishes a partnership with community health centers and places nurse practitioners into each of the facilities within the partnership.

Sen. Hassan asked about how exposure to community centers prepares nursing students to practice in rural communities. **Dr. Sanford** said partnering with community health centers gives students the opportunity to build connections with the communities in which they serve.

Sen. Hassan asked about what Congress can do to support the recruitment and training of geriatric workforce in the future. **Dr. Phelan** said ensuring training prepares physicians for the actual practice and treatment they will provide. Thus, training must include home care, geriatric, and other healthcare training services that take place outside of hospitals.

Sen. Alexander asked how we can be more aggressive to encourage more clinical training in rural areas where physicians want to live. **Dr. Sanford** responded Harrisonburg has a community health training facility that is affiliated with JMU Medical Center. This allows students to receive clinical training in communities while still receiving high academic affiliation with JMU. **Dr. Goodell** added many medical schools now have rural community health clinical training programs as a part of their rotational schedules. This allows the medical students to build relationships with remote communities beyond their traditional hospital training instruction. Students may elect to specialize in rural health, and those who do spend a large chunk of their clinical training in rural clinical settings. This is separate from the residency model, however, which depends on where the resident matches.

Sen. Murray asked how workplace diversity can be leveraged to expand quality care. **Dr. Goodell** said workplace diversity can be enhanced through pipeline programs that help train up and support diverse students. **Dr. Sanford** added that similar holistic mission processes have strengthened workplace diversity in nursing programs, and these types of programs are supported through the Title VIII Nursing Workforce Development Program.