Healthcare Workforce Task Force Meeting June 25, 2024



I. Welcome and Introduction of Members

II. Task Force Operations

A. General Housekeeping for task force operation - The task will meet three times, and public input will be taken at the second meeting of the Task Force. All meetings and materials will be posted on THECB's website. The task force is required to develop a report by Oct. 1 2024. The report will cover specific topics, each with a dedicated workgroup.

III. Workgroup Operations

A. Outline mission of the workgroups and workshops. Each workgroup will meet for one full day. The workgroups will focus on the following topics:

- **1. Expanding the pipeline** This workgroup will be focused on techs, nurses, and other bedside professions. Members will examine the education and training of each profession.
- **2. Modernizing production model** The workgroup will take a broader look to ensure the educational process can address future of healthcare needs. Members will investigate education and clinical training to make sure competencies reflect future workplace needs.
- **3. Faculty and preceptors** This workgroup will identify issues and solutions relating to clinical training. They will focus on increasing the faculty pipeline and promoting innovative models that could be beneficial at larger scales.

IV. Presentations

A. THECB Commissioner Keller - Keller spoke to the urgent healthcare workforce needs in this state. Workforce shortages were exacerbated by the pandemic, particularly in nursing. The conventional incentive programs do not seem to be working, so this task force was established to identify innovative pathways to increasing the workforce. The state will be treating workforce problems as public health problems and applying similar strategies, such as data sharing between entities and scaling identifiable best practices. Keller also discussed the need for clinical space and the "rebranding" of nursing for high school and other dual credit students.



B. Board of Nursing - Kathy Thomas, former Executive Director of the BON, discussed trends in nursing. The Texas population has grown dramatically, which has led to greater demand for nurses. There is also an aging nursing population, and elderly patients are living longer. The number of RNs are growing too slowly, and the number of LVNs is actually declining. APRNs have grown dramatically. Thomas discussed how board operations impact the nursing population. She gave statistics on complaints, information about the licensure compact, and data on survey responses. While nursing salaries are up over half of nurses report increased workload, and 25% of nurses say they are planning to leave the profession. Thomas also discussed operation Nightingale, which is an investigation into a scheme to sell fraudulent credentials.

Janice Hooper, Education Consultant for the BON, discussed the types of programs we have in the state, both for RNs and LVNs. The number of LVN programs is decreasing due to lack of demand. She also discussed the various types of clinical programs the BON has encountered. Hooper also identified some warning signs for education programs, including lack of clinical faculty, limited clinical experiences, poor leadership, and decreasing NCLEX rates.

- **C. Texas Nurses Association** Jack Frazee, Director of Government Relations, discussed the passage of SB 25 last session. That bill created the nursing scholarship program, which received about 12.5 million in appropriations. THECB is in the process of finalizing rules for the program. SB 25 also created the nursing loan repayment program, which received another 12.5 million. SB 25 also removed the statutory cap on repayments from the Nurse Faculty Loan Repayment program and allowed part-time faculty to access the funds. Frazee also discussed some unfunded programs created by SB 25, including a preceptor program, a clinical site program, and a faculty grant program. This most recent session was the largest investment in nurse education in state history. Frazee discussed nurse staffing in Texas, and how our model is more flexible than states like California that have state-mandated ratios.
- **C. Department of State Health Services –** Pam Lauer, Program Director for the Texas Center for Nursing Workforce Studies, gave a presentation on trends in the nursing workforce. She noted that there has been a significant increase in the number of APRNs over the past ten years. She also explained that the demand for RNs continues to outstrip the supply of RNs, creating a significant shortage. Likewise, there is a steep shortfall of LVNs, despite their numbers decreasing over time.



- **D. Texas Workforce Commission -** Mariana Vega, Director at the Texas Workforce Commission, talked about their statistical programs and how they collect and analyze data. There is currently a very large gap between demand and supply of RNs. There are some discrepancies in their data, although they encourage stakeholders to use as many sources of information as possible. Vega provided some information on pathways from "feeder" healthcare jobs into career tracks. Healthcare is the number one employment industry in Texas, and population increases and COVID have been major drivers of continued growth in the industry.
- **E. Local Workforce Boards -** Juliet Stipeche, Gulf Coast Workforce Board, and Mary Ross, Workforce Solutions of West Central Texas, provided information on workforce efforts in their respective areas. The Workforce Boards focus on educating locals on potential career pathways and providing resources for upskill training. They look for ways to meet with industry partners to ensure that their goals are up to date. They have a significant shortage in their rural areas of allied healthcare professions, but the solution is much more complicated than just building more nursing schools. They are trying to develop employer-centric solutions, including "earn-and-learn" opportunities at healthcare facilities.
- **F. Hospital Associations -** Jennifer Banda, Texas Hospital Association, spoke about the need for more nurses in hospitals. She also mentioned that there is a severe shortage of other allied health professionals. One of the major bottlenecks for new nurses in clinical space, and the fact that over 13,000 qualified applications to nursing schools were rejected for the 2022-23 school year.

John Henderson, Texas Organization of Rural & Community Hospitals, added that nursing is the most acute need in rural Texas facilities. Rural communities miss out on talented clinicians because they're unable to provide financial incentives for providers. The state has made significant progress in broadband, but travel burden is still an issue in isolated parts of the state. There is limited training availability in rural areas, and clinicians often end up practicing where they trained. Rural facilities are doing their best to fund opportunities for members of the community to upskill, but they are often limited by their resources.

G. Texas Higher Education Coordinating Board - THECB staff provided an update on the three financial aid programs amended and funded through SB 25. The Commission is currently developing its rules, but they will be ready to provide funds pursuant to the



rules in the Fall. THECB will be spending the next couple of months explaining the programs to institutions to ensure that students have access to the new programs.