

Strengthening the Public Health Nursing and Direct Care Workforce in North Carolina:

Recommended strategies from three reports

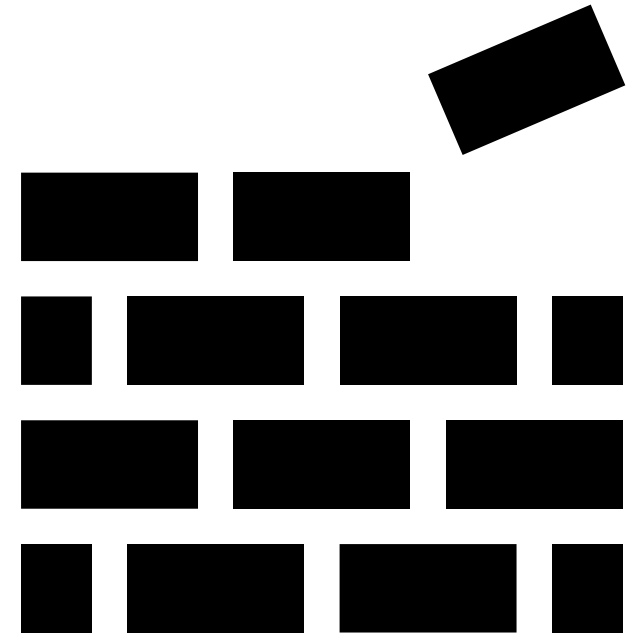
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NC Public Health Nursing Conference
Raleigh, NC
May 31, 2024



At the end of the discussion, learners will be able to:

01

Identify the relationship between the direct care workforce and nursing workforce.

02

Contrast 3 new NC reports on the nursing and direct care workforce.

03

Describe at least three recommendations to strengthen the nursing workforce.

04

Describe at least three recommendations to strengthen the direct care workforce.

05

Derive one strategy that can be applied in their own workplace to strengthen the nursing and/or direct care workforce.

Background

- Nursing shortage
- DCW shortage
- Health workforce ecosystem





NC DEPARTMENT OF
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Investing in North Carolina's Caregiving Workforce:

Recommendations to strengthen North Carolina's
nursing, direct care, and behavioral health
workforce

January 2024



TIME FOR ACTION:
Securing A Strong Nursing
Workforce for North Carolina

MAY 2024



NC AHEC

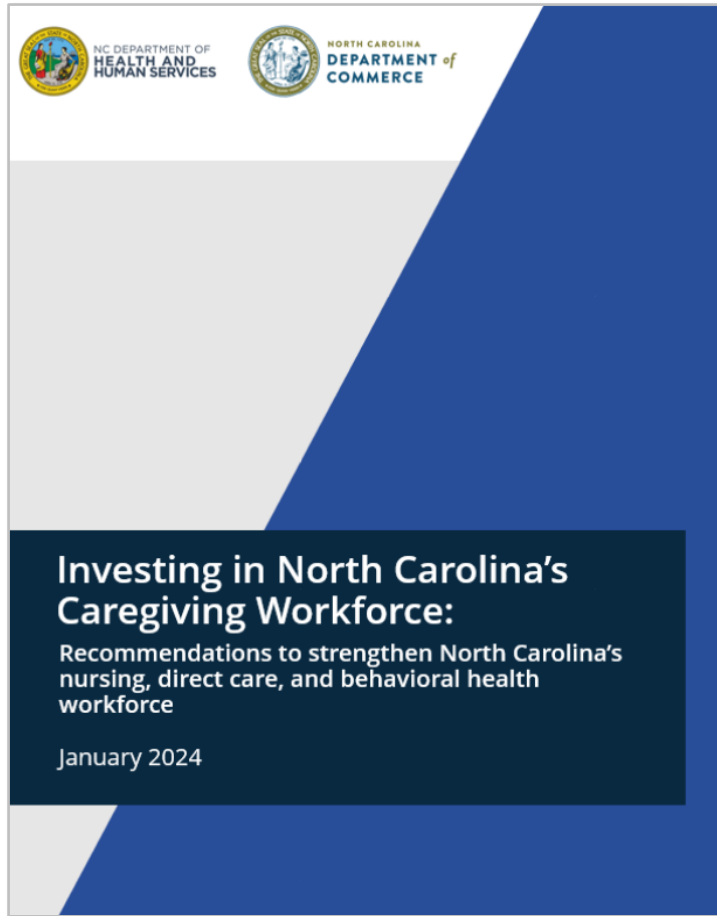
RECRUIT
TRAIN
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Recommendations for HCBS Worker Certification

to the North Carolina Department of Health Benefits

Per contract # 30-2023-007-DHB

Investing in North Carolina's Caregiving Workforce Report Released in January!



This report encapsulates the **collaborative efforts** of the North Carolina Department of Health and Human Services (NCDHHS) and the North Carolina Department of Commerce in **prioritizing the development of a resilient caregiver workforce** to meet current and future caregiving needs in the state.

Spearheaded by a **coalition of leaders** from public agencies, educational institutions, and organizations, the strategic blueprint was crafted to guide the growth of a thriving caregiving workforce.

The **Caregiving Workforce Strategic Leadership Council**, formed in late 2022, brings together experts to address challenges and present solutions, with a focus on **nursing, behavioral health, and direct care**. The recommendations in the report, endorsed by the Council, aim to establish a sustainable structure and governance model for the realization of the strategic blueprint.

The report emphasizes the importance of ongoing collaboration and the involvement of additional perspectives and partners to advance the proposed solutions.

Caregiver Workforce Strategic Leadership Council



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THE CECIL G. SHEPS
CENTER FOR
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RESEARCH



North Carolina Department of
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UNC
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NORTH CAROLINA
INDEPENDENT
COLLEGES & UNIVERSITIES



SCHOOL OF
MEDICINE



North Carolina Institute of Medicine

THE UNC
SYSTEM



Summary of Approach

Recognizing the importance increasing its resilient caregiver workforce, the North Carolina Department of Health and Human Services and North Carolina Department of Commerce convened a Caregiving Workforce Strategic Leadership Council to generate solutions for strengthening the state's Nursing, Behavioral Health, and Direct Care workforce.



Quarterly Council Meetings

ASSESS GOALS AND OPPORTUNITIES

The North Carolina Caregiving Workforce Strategic Leadership Council's assembly of caregiving drew experts from governmental agencies, educational institutions, and organizations. The group met quarterly for over a year to review goals, research, and the working group findings so as to advise and prioritize key opportunities for the final recommendations.

Working Groups

IDEATE THROUGH COLLABORATION

Working groups representing the three focus areas—Nursing, Behavioral Health, and Direct Care—met five times to discuss existing solutions and identify further opportunities to strengthen recruitment, development, and retention of the workforce through updated policies, programs, resources, and communications. The working groups presented these solutions to the Council.

Report Finalization

DEVELOP STRATEGIC RECOMMENDATIONS

The Council reviewed the draft recommendations and report in November 2023 to share final reflections and input. The report was finalized by Deloitte Consulting, who facilitated the Council meetings and working groups throughout the process. The report was prepared for launch in January 2024.

Nursing Workforce Recommendations

- 1 Establish academic coaches for community college nursing students
- 2 Enhance and invest in clinical partnerships
- 3 Improve employee retention and engagement
- 4 Invest in social resources and NCCARE360 expansion
- 5 Increase the number and availability of nurse and faculty loan repayment programs and stipends
- 6 Readjust nurse faculty salaries and schedules



Behavioral Health Workforce Recommendations

- 1 Advance the data landscape for the behavioral health workforce
- 2 Define the unlicensed behavioral health workforce and professional pathways
- 3 Incent recruitment and retention for publicly funded mental health roles, including both licensed and unlicensed professionals
- 4 Increase training and credentialing for peer support professionals
- 5 Establish regular intervals for behavioral health rate adjustments



Direct Care Workforce Recommendations

1 Define what the direct care workforce is

2 Advance the data landscape for the direct care workforce

3 Create a living wage for direct care workers

4 Expand apprenticeship programs

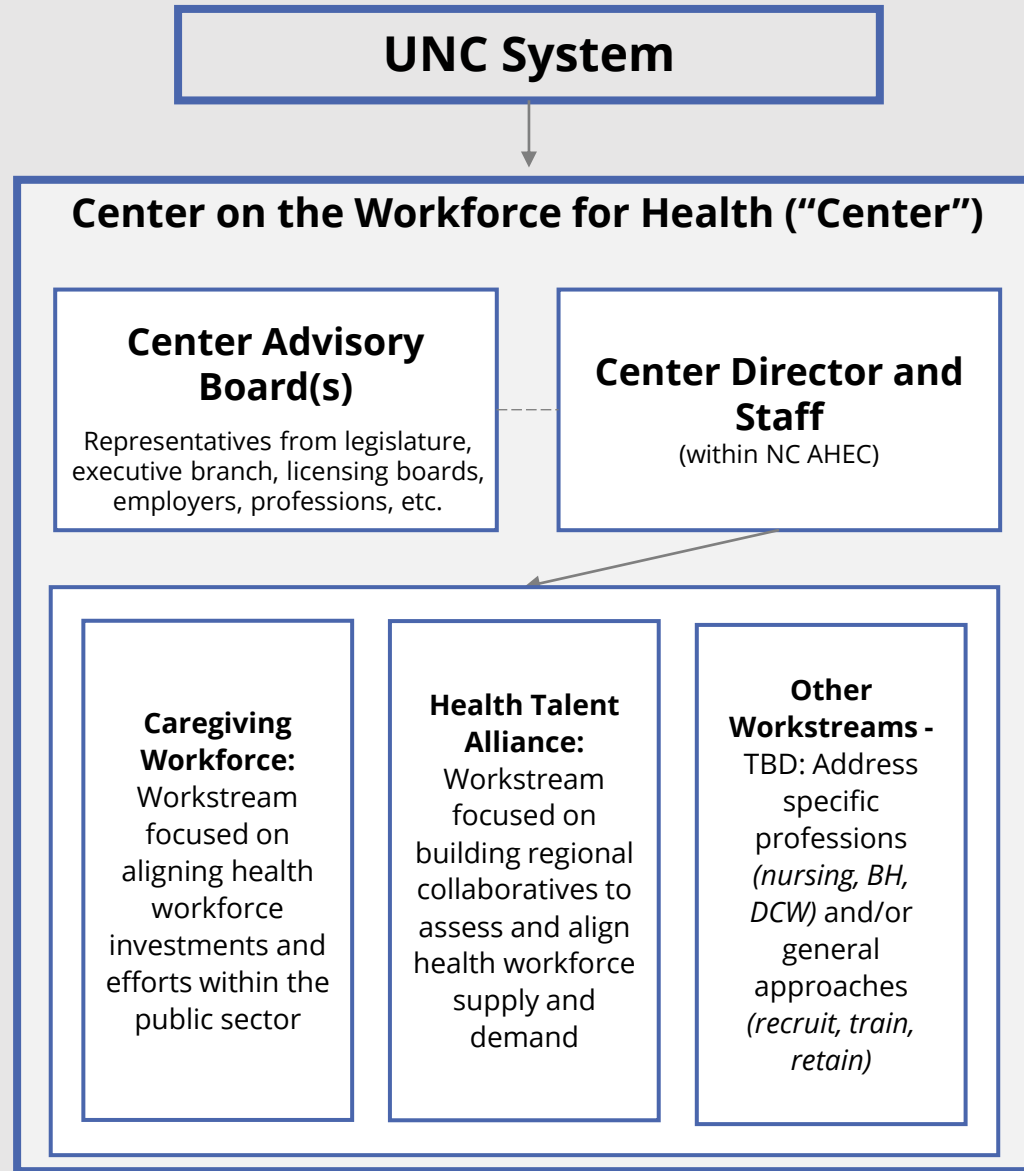


Governance Considerations

- The viability and long-term success of these initiatives hinge on establishing a robust governance structure capable of withstanding government transitions and ensuring sustainability.
- A University of North Carolina (UNC)-affiliated model, deeply connected to students, teaching institutions, NC Area Health Education Centers (AHEC) and the Center on Workforce for Health, has been deemed the most viable option moving forward.
- AHEC plays a pivotal role in supporting preceptors, and students interested health careers, along with providing professional development, and delivering practice support.
- The Center on Workforce for Health will provide the platform where leaders can share coordinated state efforts with the private sector.

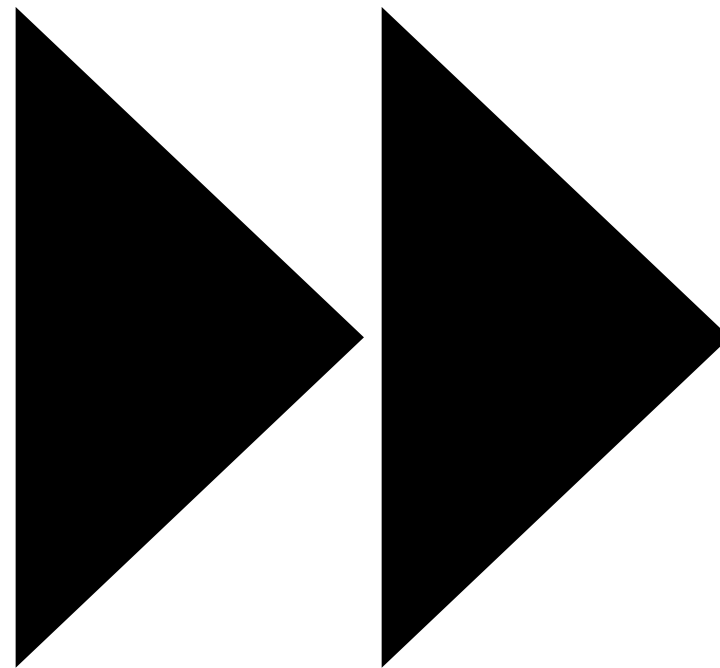
UNC-Affiliated Model

The NC Center on the Workforce for Health will provide the platform where leaders can work collaboratively to address health workforce issues. The Caregiving Council will continue its focus on aligning the public sector work and will coordinate with other public and private sector leaders through the Center.





Next Steps





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Task Force on the Future of the Nursing Workforce

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NCIOM

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What is our shared vision for enhancing and supporting North Carolina's LPN & RN workforce?

What are the structures, investments and policies needed to achieve our vision?

NCIOM Task Force on the Future of the Nursing Workforce

Funders



Co-Chairs



Ernest Grant, PhD, RN, FAAN

Immediate Past President, American Nurses Association

Vice Dean for Diversity, Equity, Inclusion, and Belonging, Duke University School of Nursing



Catherine Sevier, DrPH, MSN

President Emerita, AARP NC



Hugh Tilson Jr, JD

Director, NC AHEC

Task Force Members

- Research
- Academia
- Hospitals
- Long-term care
- Public Health
- Private Practice
- Advocacy Groups
- Professional Associations
- Health Payers (Insurance)
- NC Medicaid
- FQHCs
- State Government
- Philanthropy
- Elected Officials



NCIOM Task Force on the Future of the Nursing Workforce

Themes:

- Need for more new nurses in coming years
- Change in workplace culture, policies, and practices essential for retention
- Value nurses in leadership
- Some great work already happening
- Employers are key and will need supports
- Challenging tradeoffs in health care
- Quantify the financial value nurses bring to care
- Continued focus and collaboration



NCIOM Task Force on the Future of the Nursing Workforce

Areas of Recommendation

Preparing Future
Nurses

Developing, Sustaining,
and Retaining Nurses

Valuing the Work of
Nurses

Recommendation #1: Develop a strong and diverse nursing workforce that is representative of the communities served and is prepared to meet the growing health care needs of North Carolinians

Strategy 1

Expand early pathways to develop a nursing workforce

Strategy 2

Increase nursing program collaboration, sharing of best practices, and connections with employers

Strategy 3

Address faculty shortages

Strategy 4

Improve retention and graduation rates of nursing students

Strategy 5

Enhance the preparation of nursing students through more inclusive education environments and curriculum

Preparing Future Nurses

Developing, Sustaining, and
Retaining Nurses

Valuing the Work of Nurses

Recommendation #2: Enhance the educational and career advancement of nurses through all stages of their careers, particularly those serving in practice environments of persistent shortage (e.g., hospital, long-term care, underserved, and rural settings)

→ **Strategy 6**

Strengthen transition to practice and early career development for nursing students and new graduates

Strategy 7

Identify opportunities for nurses to participate in educational advancement, leadership, mentoring, and preceptorship

Strategy 8

Strengthen opportunities and incentives for later-career nurses to participate in mentor and preceptor roles

Strategy 6: Strengthen transition to practice and early career development for nursing students and new graduates across all care delivery settings

6.1

Academic programs in nursing, NC AHEC, and employers of nurses should collaborate to expand the availability of new graduate nurse residency programs, including in more underserved and community-based settings, such as rural communities and community-based nursing practice.

Recommendation #3: Ensure a workplace culture that values the physical and psychological safety and well-being of nurses

Strategy 9

Create and promote a supportive and inclusive workplace culture

Strategy 10

Protect nurses from violence in the workplace

Strategy 11

Increase awareness and support for the mental health of nurses

Strategy 12

Evaluate the current state of efforts to address equity in the nursing workforce

Nurses' Perception of Employer Priorities, US

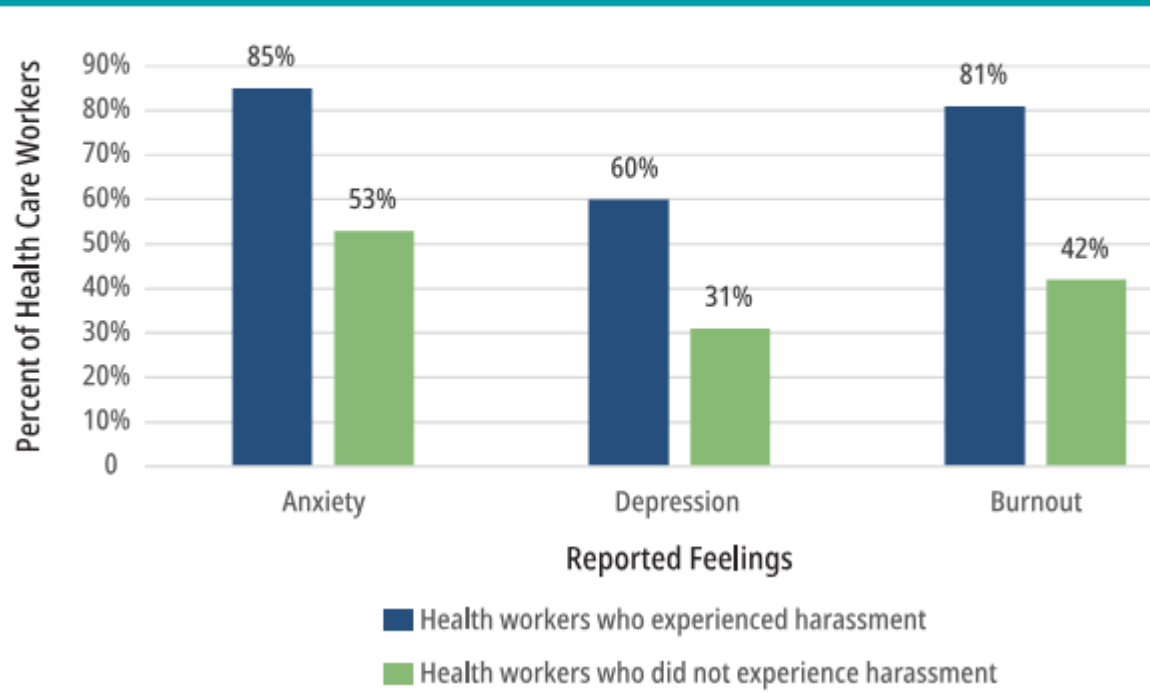
"My workplace culture prioritizes the well-being of its staff."

- **31% Agree or Strongly Agree**
- **42% Disagree or Strongly Disagree**

- Pulse on the Nation's Nurses: Mental Health and Wellness Survey by American Nurses Foundation

Strategy 9: Create and promote a supportive and inclusive workplace culture

Figure 12. Feelings experienced by health care workers who have been harassed vs. those who have not been harassed



Source: Centers for Disease Control and Prevention (U.S.) (2023). Health Workers Report Harassment, Symptoms of Poor Mental Health, and Difficult Working Conditions: What Employers Can Do: Media Statement. <https://stacks.cdc.gov/view/cdc/134792>

“63% of nurses say they have personally experienced racism in the workplace.”

-National Commission to Address Racism in Nursing. Racism's Impact in Nursing. https://www.nursingworld.org/~48f9c5/globalassets/practiceandpolicy/workforce/commission-to-address-racism/infographic-national-nursing-survey_understanding-racism-in-nursing.pdf



Strategy 9: Create and promote a supportive and inclusive workplace culture

9.1

Employer culture; mechanism for report, unsafe working conditions, biases, discrimination, and injustice without fear of retaliation

9.2

Nursing associations educate about available mechanisms to report and provide opportunities for informal reporting and sharing of stories



60% of nurses say workplace violence has led them to change jobs, leave jobs, or consider leaving a job or the profession entirely

Percent of surveyed nurses that experienced the following:

68% Verbally threatened

39% Physically threatened

37% Pinched or scratched

36% Slapped, punched, or kicked

35% Objects thrown at them

33% Verbally harassed based on sex or appearance

30% Spat on or exposed to other bodily fluids

20% Groped or touched inappropriately

Source: Hollowell, A. Violence affects nursing recruitment, retention, National Nurses United report finds.
<https://www.beckershospitalreview.com/nursing/violence-affects-nursing-recruitment-retention-nnu-report-finds>.

Strategy 10: Protect nurses from violence in the workplace

10.1

Employer attention to and promotion of workplace safety strategies

10.2

NC General Assembly designate funding to help safety net organizations, critical access hospitals, and other less-resourced providers access tools and training to reduce the incidence of workplace violence

10.3

Comprehensive review of the application and effectiveness of Session Law 2015-97

Recommendation #6: Equip nurses and the public to be strong advocates for nursing and health care improvement

→ Strategy 18

Enhance the ability of nurses to advocate for their profession

Strategy 19

Enhance the ability of the public to advocate for nurses

Strategy 18: Enhance the ability of nurses to advocate for themselves and their profession

18.3

The Center on the Workforce for Health should engage an advisory council to provide data, guidance, and best practices concerning efforts to address the nursing workforce crisis, provide critical perspectives from key interested parties, and decrease duplication of efforts.

Recommendation #8: Optimize payment for health care services to support nursing care

→ Strategy 22

Increase funding to support school nursing

Strategy 23

Use funding mechanisms to support the long-term care nursing workforce

Strategy 24

Promote RN billing in primary care

→ Strategy 25

Expand the state budget in key shortage areas for nursing care

Strategy 22: Increase funding to support school nursing

22.1

Implement state policies and practices that support schools in billing Medicaid to provide additional funding for school nurses.

22.2

The North Carolina Department of Health and Human Services, North Carolina Department of Public Instruction, and North Carolina Department of Insurance should partner to produce a report exploring additional methods of funding school nursing, such as private health insurance and tax revenue. The North Carolina General Assembly should consider these additional options.

Strategy 25: Expand the state budget in key shortage areas for nursing care

25.1

The NC General Assembly and other key funding entities should expand funding in areas of the state budget that will support nurses who make important contributions to keeping the state's population healthy.

This would include increased funding with the following goals:

- Ensure that a school nurse can be in every school and every Head Start program.
- Increase the number of public health nurses, especially in rural and lower-income communities.

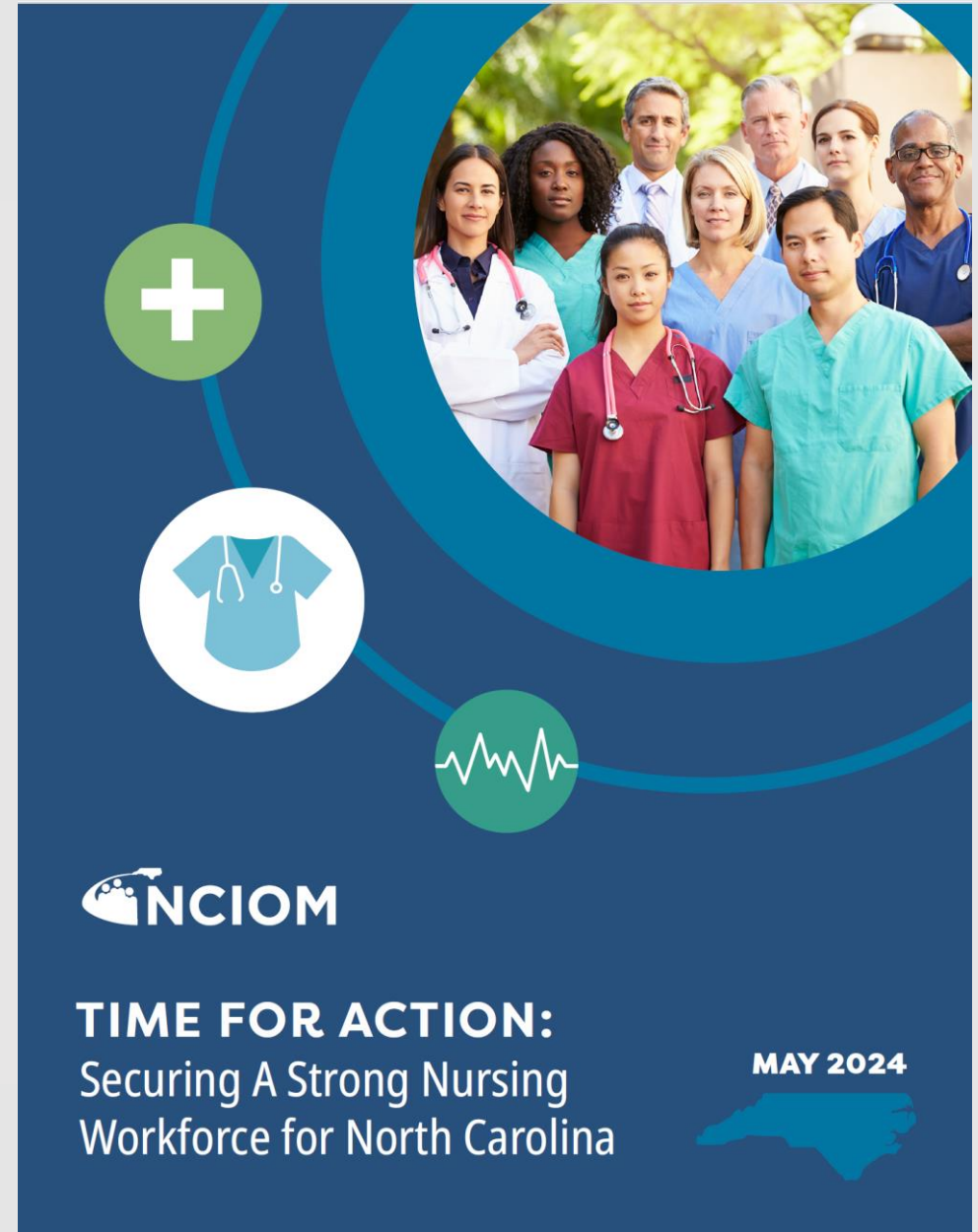
What's next?

Dissemination

- Presentations to nursing associations, legislators, employers, etc.
- Wider distribution through media outlets and national groups

Doing the work

- Role of responsible parties
- Continued attention to recommendations
- Other statewide efforts



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Home and Community Based Services (HCBS) Worker Certification

Contractor [NC AHEC] will provide oversight and coordination in developing a plan that addresses certification as part of the recruitment and retention of the HCBS workforce.

- **Preliminary Certification Research: To determine the scope and impact of worker certification, Contactor will:**
 - Work with other organizations in North Carolina to recommend definitions of the categories and volume of workers that will be targeted by this initiative and the healthcare settings in which they operate.
 - Describe benefits and concerns related to certifying HCBS workers, including recommendations to enhance benefits and mitigate potential concerns.
 - Identify other organizations doing relevant work in North Carolina to understand the timing of their work and to integrate the outputs of their work into a plan of worker certification, whenever possible and appropriate
- **Implementation Support Plan: To support the development and implementation process, Contractor will include the following in the Final Report:**
 - Interview and address questions and concerns of Department subject-matter experts and stakeholders as identified by Department.
 - Describe other organizations doing relevant work in North Carolina and the timing, desired outputs and applicability of that work to the worker certification plan as part of the HCBS worker recruitment and retention plan.
 - Identify potential methods of tracking HCBS worker recruitment and retention efforts, including HCBS workers who are certified under the plan.
- **Final Report: Contractor will deliver a Report including information gathered in a. and b. of this section and a recommended plan to establish HCBS worker certification in NC.**

Steps Taken



Literature review with AHEC librarians



Defined target audience (Appendix A)



Researched and met/scheduled to meet with existing training platforms for workers in the direct care field (Appendix B)



Exploring efforts both inside and outside state of NC (Appendix C and page 34)



Included input from approximately 70 consulting organizations, groups, and individuals (Appendix D)

4 Premises provide a framework for the Implementation Plan

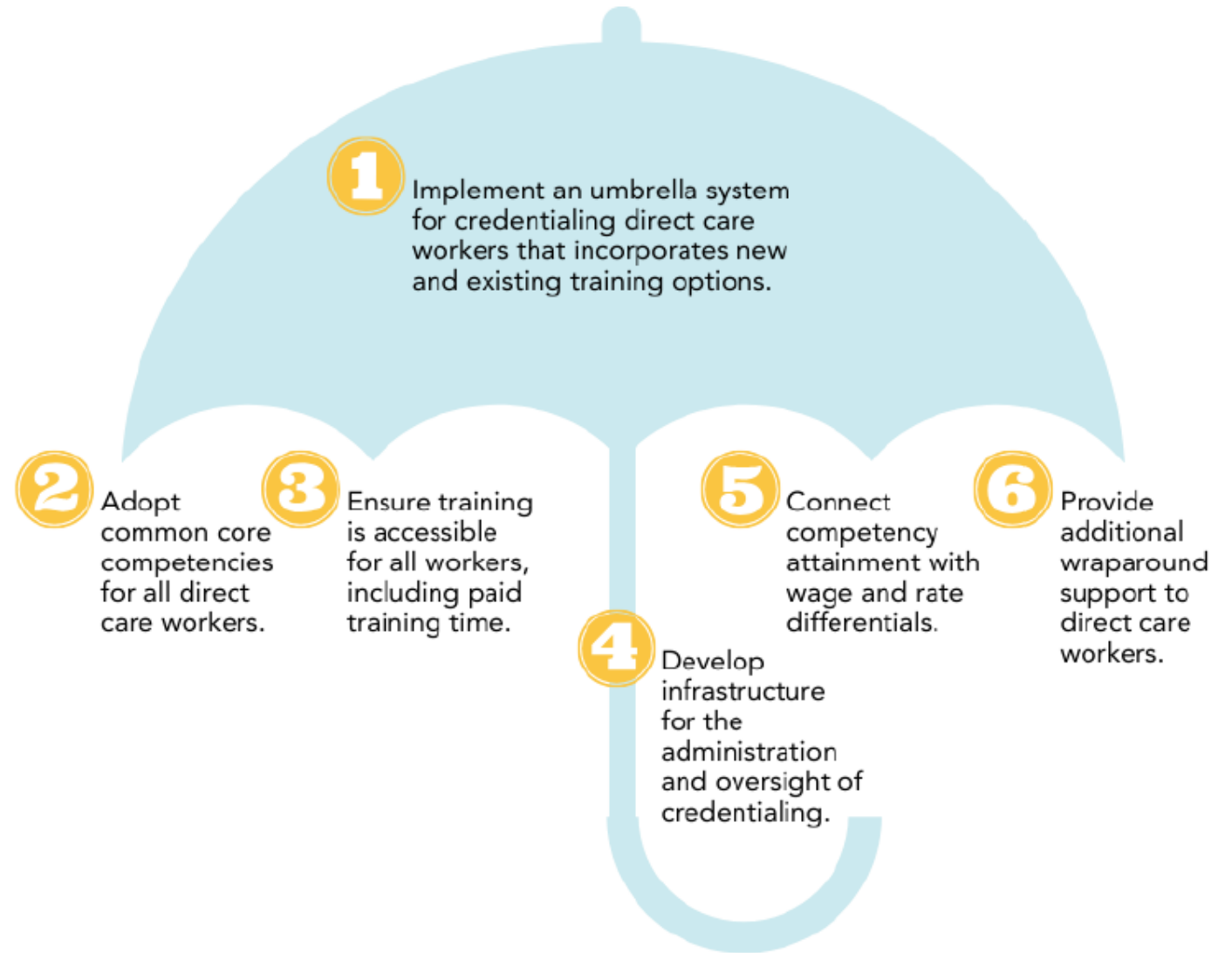
1 Reliable funding must be made available to invest in the recommended activities.

2 Direct care workers move between settings, specialties, and populations.

3 Existing DCW training curricula and platforms can be leveraged.

4 The solution to the direct care worker crisis is not unilateral.

Recommendations for implementing a Credentialing System for Direct Care Workers in NC: **The 6 Core Elements**



2

Adopt common core competencies for all direct care workers.

Foundation of core competencies

Additional competencies can address specific context needs

1

Implement an umbrella system incorporating new & existing training options.

Tiered competency framework

Embraces existing experience, training, and on-the-job learning

System of buildable skills and qualifications

Freedom for employers to determine training needs for their workers

Status quo is considered the entry-level direct care position

4

Develop infrastructure for
administration & oversight
of credentialing.

Lead organization dedicated to move work forward

Formation of advisory committee of subject matter experts

Employers receive resources for clear implementation guidelines and best practices

5

Connect competency attainment with wage & rate differentials.

Competency achievement linked to rate differences for employers and wage increases for workers

Training costs and time do not burden workers

Employers adequately compensated to support worker training and advancement

3

Ensure the accessibility of training for all direct care workers.

Prioritizes worker accessibility

Employers should provide paid time for worker training and development

LMS supports stackable certifications, is portable, offers annotation capabilities and effective tracking, caters to adult learning, is available in multiple languages, and is compatible with assistive devices

6

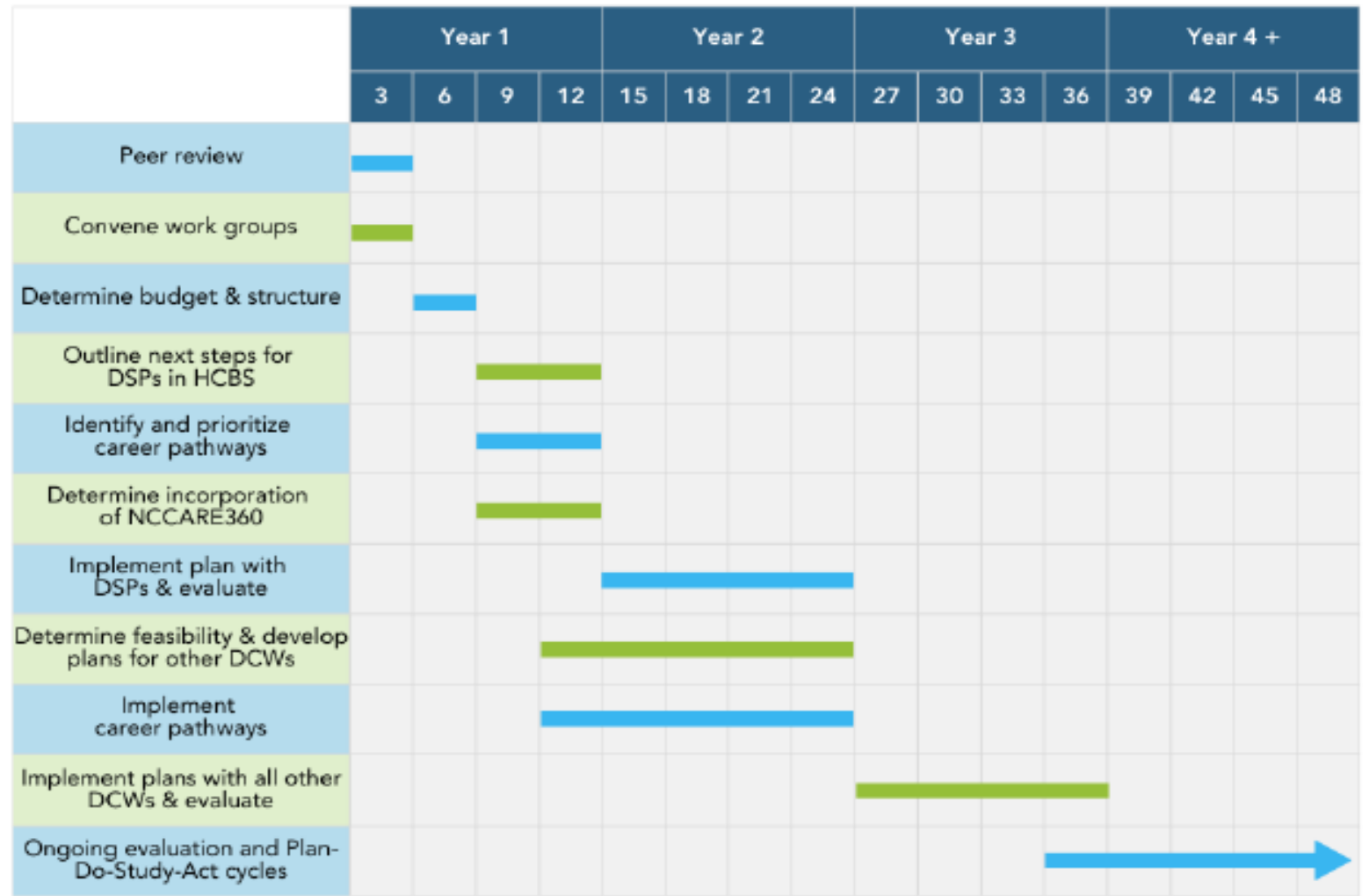
Provide additional supports to direct care workers.

Provide wraparound support for workers - supports range from fulfillment of basic human needs to creating hope for the future

Comprehensive social services can enhance workplace success

Key areas requiring support include childcare, transportation, and access to safe, affordable housing

Next Steps and Suggested Implementation Timeline



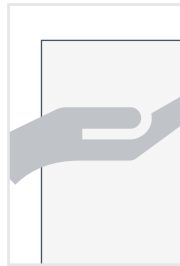
Why does this matter to nurses?



Pipeline/pathways



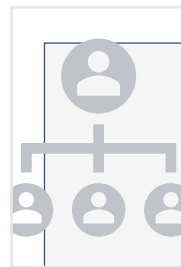
Interprofessional,
team-based care



Support services



Delegation



Management



- Small group work:
- 5-10 people
- 20 minutes
- Choose one of the following topics. You may apply the questions to one, two, or all three reports.



Developing Collaborative Action Plans:

How can nurses collaborate with other healthcare professionals, policymakers, and community members to advance these recommendations?

Are there existing initiatives or networks that could be leveraged to support the implementation of these recommendations?

How can your group prioritize the recommendations to focus on immediate action steps?

What strategies can be employed to garner support for these recommendations from stakeholders such as policymakers, healthcare institutions, and community organizations?

Impact, Sustainability, and Longevity:

What metrics or indicators could be used to evaluate the effectiveness of these recommendations over time?

How can ongoing feedback and assessment be integrated into the implementation process to ensure continuous improvement?

How can these recommendations be integrated into long-term workforce development strategies for nursing and direct care in North Carolina?

What mechanisms can be put in place to ensure that the momentum generated by these reports leads to sustained improvements in the workforce?

Overcoming Resistance:

What potential barriers or challenges do you anticipate in implementing these recommendations?

Are there any resource constraints (financial, staffing, etc.) that could hinder the execution of these recommendations?

How might you address potential resistance or skepticism from stakeholders who may be resistant to change?

What strategies can be employed to effectively communicate the importance and benefits of these recommendations to diverse audiences?

Follow-up Work

Make a Personal Commitment to Action

What specific actions can you take to support the implementation of these recommendations within their own spheres of influence?

How can you hold yourself and each other accountable for following through on these commitments?

TELL US MORE!

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