

**Healthcare Workforce Development Division**

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## California Healthcare Workforce Clearinghouse Advisory Team October 8, 2008 Minutes

**Meeting Location:** Sutter Center for Health Professions, 2700 Gateway Oaks Drive, Sacramento, CA, 10:00 a.m. – 1:00 p.m.

Start: 10:08 a.m.

**Participants Present:**

Jim Koontz  
 Patrick Perry  
 Kathleen Flores  
 Cathy Martin  
 Stephanie Leach  
 Ruben Cantu  
 Marsha Hirano-Nakanishi  
 Javier Romero  
 Pamela Petty  
 Cindy Beck  
 Warren Barnes  
 Inna Tysoe  
 Spencer Wong  
 Elizabeth Abbott  
 Lupe Alonzo-Diaz  
 David Carlisle  
 Sabina Ohri  
 Saba Brelvi  
 Andrea Gerstenberger

**Organizations:**

California Association of Health Facilities/QCHF  
 California Community Colleges Chancellor's Office  
 California Health Professions Consortium  
 California Hospital Association  
 California Labor & Workforce Development Agency  
 California Pan-Ethic Health Network  
 California State University, Office of the Chancellor  
 California Workforce Investment Board  
 Department of Consumer Affairs  
 Department of Education  
 Department of Managed Health Care  
 Department of Mental Health  
 Employment Development Department/Labor Market Information  
 Health Access California  
 Health Professions Education Foundation  
 Office of Statewide Health Planning and Development  
 Public Policy Institute of California  
 The California Wellness Foundation  
 University of California Office of the President- Health Affairs

**OSHPD Staff Present:** Angela Minniefield, Stephanie Clendenin, Gloria Robertson, Dorian Rodriguez, Monique Scott, Deb Wong, Deborah Holstien, Felicia Borges, Jeri Westerfeld and Yolanda Avalos-Troyer

**Handouts:** Staff mailed each Advisory Team member a packet with focus group materials prior to the meeting.

Other handouts distributed at the October 8th Advisory meeting included:

- Focus Groups Invited Organizations List in alpha order
- May 2008 report from the Healthcare Workforce Diversity Advisory Council
- Other States Comparison Matrix
- Process for Determining Clearinghouse Data Collection Priorities
- Health Profession Occupations crosswalk from the SOC to the ONET
- The California Endowment's May 2008 report on the "Allied Health Workforce Analysis Los Angeles Region"

- The California Endowment's June 2008 report on "Allied Health Workforce Analysis San Diego Region"

### **Welcome and Opening remarks - Angela Minniefield**

Angela Minniefield, Deputy Director of the Healthcare Workforce Development Division, opened the meeting with greetings from Dr. Carlisle, OSHPD's Director. Angela thanked the Advisory Team members for attending the meeting and for their valuable assistance in establishing the Healthcare Workforce Clearinghouse (Clearinghouse). The main purpose for this meeting is to discuss the Clearinghouse accomplishments and progress since January 2008. Angela mentioned that The California Endowment (TCE) was instrumental in funding a grant to initiate the program.

### **Focus Group Participant Introductions – Angela Minniefield**

The Advisory Team members and OSHPD staff presented brief introductions: name title and organization.

### **AGENDA ITEMS – ANGELA MINNIEFIELD**

Angela briefly reviewed the Agenda and presented a 'Phase I Overview' from January 2008 – December 2008 which included resources, activities, participants and outcome sections. The main purpose of SB139 is to establish a central repository for healthcare workforce and education data. To accomplish this OSHPD has partnered with the Universities of California, California State Universities, Community Colleges, Health Licensing Boards, Employment Development Department Labor Market Information Division, and the California Postsecondary Education Commission.

The activities accomplished since January 2008 include conducting a Feasibility Study Report (FSR); facilitating five regional focus group sessions throughout California addressing the participant's concerns, ideas, data needs; and identifying data gaps, challenges, and issues. In an effort to successfully implement the Clearinghouse surveys were sent to other states regarding their data collection and data availability, data collection methodology. OSHPD has created a Clearinghouse website to include information and updates.

**ACTION:** Jim Koontz requested that handout information to be sent electronically. He would like to present information to his colleagues. OSHPD will provide power point presentations to the Advisory Committee.

### **REGIONAL FOCUS GROUP RESULTS – GLORIA ROBERTSON**

Gloria Robertson presented an overview of the focus group purpose and results which included:

- Purpose: to establish a user friendly, easy and comprehensive data warehouse
- To identify potential users
- To form partnerships to assist in data collection/activities
- Five focus group sessions were held and participation totaled 144 constituents from the Fresno, Los Angeles, Oakland, Rancho Cucamonga, and Sacramento area
- A Stimulus Questionnaire was prepared with five questions relating to common themes, critical needs for the Clearinghouse and policy implications:
  1. How does your organization plan to use the collected data?
  2. What are your recommendations for viewing and accessing the data?
  3. What issues/challenges do you foresee in data retrieval, sharing and transmission mechanisms?
  4. Identify other data needs/resources to be considered in this process.
  5. What questions or activities do you recommend in conducting future focus groups?

The regional focus group findings centered on common themes, critical needs, and policy implications and included the following:

- Data needed from Public Health/Occupations, Prison Workforce and Military Workforce
- Standardize definitions
- Forecasting
- Access capacity
- Trending
- Timeliness
- Link data, demographics, and staffing
- Dash boards
- Graphics and charts
- PDF capabilities
- GIS capabilities
- Cross reference to Health Standard Occupational Classification System
- Allow data access to manipulate and interrogate data
- Secure log-in
- Maintenance and storage of data
- Testing system before roll out
- Technical Assistance
- Staffing
- Future policy implications once system is in place

*For additional information, please refer to the "California Healthcare Clearinghouse Focus Group Overview" handout.*

#### **OTHER STATE'S HEALTHCARE WORKFORCE CLEARINGHOUSE EFFORTS – DORIAN RODRIGUEZ**

Dorian Rodriguez presented an overview of the data collected from other states as identified on the other state comparison matrix. OSHPD identified 12 states who have implemented a health workforce data collection and reporting systems warehouse: Michigan, Texas, South Dakota, Tennessee, Wyoming, Minnesota, North Carolina, Hawaii, Maine, Maryland, New Jersey, and Florida.

A survey was distributed to the aforementioned states and there was a 50% response rate. The survey assisted in identifying and comparing other states data collection related to Clearinghouse data and reporting requirements; data needs identified through focus groups; challenge to collecting health workforce data; and next steps.

Some of the survey findings included:

- Produce quality data
- Data collected is entered manually
- Mandatory reporting does not exist
- Database was not fully functional and lacked a specific purpose
- Too much staff time is required to clean up data fields
- Few or no data validation verification field entries
- Policy implementation reporting
- Add data requirements
- Contract out the survey and HPSA process
- Establish MOU with the Board of Physicians for Maryland and other states
- Develop matrix to examine type of data and information to collect
- Include information from legislation
- Collect current supply of workers, diversity, geographic distribution, by specialty
- Collect current and forecasted demand, by specialty

- Education capacity to produce workers
- Collect other data available from other states
- Trends in wages and salaries
- Need to define certain data elements
- Resource materials need to include hospitals, income benefits, infant mortality rates and shortage designation maps
- Pipeline availability
- Refer to Bureau of Labor Statistics (BLS) for Occupational Statistics
- Crosswalk data to Bureau of Labor Statistics (BLS) Occupational Classifications
- State that collect similar OSHPD data Needs are: Michigan, North Carolina and Wyoming

Next Steps and Other Comments:

- Florida was not included on the matrix because their research is used for job seekers
- Research health work data collected by Hawaii and Maine
- Monitor resources on a national level
- Data available by purchase
- Data availability is at the state level and only a few states collect data by county
- Include hospital facility data and acquire infectious disease data
- Add California data into the matrix

Katherine Flores suggested that OSHPD look at the Area Health Education Centers (AHEC) in the states for further research.

*For more information, please refer to the "Other States Comparison Matrix" handout.*

#### **CLEARINGHOUSE DATA INFRASTRUCTURE – DEBORAH HOLSTIEN**

Deborah Holstien presented an overview on the data infrastructure "Clearinghouse Solution Components" needed to begin building the data architecture.

These components include:

- Data collection and validation
- Data reporting and analysis
- Building a secure data architectural structure
- Secure electronic data collection and validation
- Provide quality and timely data
- Provide easy accessibility for data providers and submission of data
- Validate and edit information
- Feedback for data providers
- Provide comprehensive data which can be integrated across workforce data sources and are relevant OSHPD data sources
- Provide a web based toolset to include graphic, charts, time series and comparison
- Build a secure workforce clearinghouse system structured around OSHPD's existing web based data collection infrastructure (i.e. MIRCAL and ALIRTS)
- Build upon OSHPD's existing enterprise data warehouse infrastructure
- Build upon OSHPD's business intelligence and reporting infrastructure (i.e. ATLAS and OSHPD Data & Reports)
- Link data together across various areas of employment, education, and licensing
- Need a program identifier
- California Postsecondary Education Centers(CPEC) has unique identifiers for students which needs to be researched

Comments from the Advisory Team:

- Standardized data system to eliminate other data systems
- Data warehouse needs to include student information that can be linked or tracked by identifying their educational and employment progression
- Information from the data warehouse would be instrumental in working with the pipeline programs
- Non-governmental entities need to be able to access the data information
- What kind of identifiers will be used to access this information? Do not use the Social Security Number (SSN) as an identifier
- Include time line elements
- Faculty figures and numbers need to be included
- Telemedicine specialty needs to be included in the warehouse for the 900 sites who are requesting this discipline
- Ability to include new healthcare professions (i.e. ITSS healthcare professionals)
- Include data on hospital acquired infections
- Consider legal issues for gathering data
- Need K-12 identifier
- California Postsecondary Education Centers (CPEC) has unique identifiers for students. Research what they are doing

*For additional information, please refer to the "Clearinghouse Data Infrastructure" slide presentation.*

**DATA COLLECTION: PRIORITIZE HEALTH PROFESSIONS – ANGELA MINNIEFIELD**

Angela Minniefield did an overview on the process for determining Clearinghouse data collection priorities and deliverables. Based on the research and analysis of the findings aforementioned, OSHPD's recommendation is to initiate research on health disciplines to be included in Clearinghouse in four different phases beginning in 2009 through 2012, and beyond.

These phases include:

- |             |           |  |
|-------------|-----------|--|
| 2009 – 2010 | Phase I   | <ul style="list-style-type: none"><li>• Identify data available</li><li>• Identify data gaps</li><li>• Research and analyze reporting requirements and relevancy identified in SB139</li></ul>   |
| 2010 – 2011 | Phase II  | <ul style="list-style-type: none"><li>• Identify collection and analysis regarding physicians, physician assistants, registered nurses and licensed vocational nurses</li><li>• Host meetings with licensing and certifying bodies</li><li>• Identify capacity, location, and issues related to SB139 data requirements</li></ul>                  |
| 2011 – 2012 | Phase III | <ul style="list-style-type: none"><li>• Identify data collection and analysis regarding, dentists, dental auxiliaries, core mental health providers, pharmacy and pharmacy technicians</li><li>• Host meetings with licensing and certifying bodies</li><li>• Identify capacity, location, and issues related to SB139 data requirements</li></ul> |
| 2012 +      | Phase IV  | <ul style="list-style-type: none"><li>• Data collection and analysis for other Allied Health Providers (i.e. occupational therapists, physical therapists, nursing assistants, and medical assistants)</li></ul>   |

Angela noted that these priorities are recommendations and may change due to data availability. OSHPD will host meetings with the licensing boards and other entities to best leverage the information by specialties, diversity, ethnicity, and other SB 139 requirements.

Jim Koontz requested OSHPD to review AB 1629 regarding long-term care facilities, caregivers, certified nurse assistant through registered nurses. He suggested that these occupational classifications be added to Phase II.

*For additional information, please refer to the handout "Process for Determining Clearinghouse Data Collection Priorities".*

**ACTION:** OSHPD needs to review AB 1629 for clarification on long-term care.

Cathy Martin requested OSHPD to include clinical laboratory scientists and medical imaging in one of the phases. The clinical laboratory scientists' health profession is a new classification.

**ACTION:** OSHPD needs to research the clinical laboratory scientists' occupational classification through SOC, ONET and CIP.

### **CLEARINGHOUSE WEB UPDATES – FELICIA BORGES**

Felicia Borges presented an overview of the new Clearinghouse website. The website will contain a variety of resources and reference materials which include but are not limited to program information, focus group information, reports and internet resources, announcements, meeting agendas and notes, Advisory Team information, and new data and updates.

The website can be viewed at <http://www.oshpd.ca.gov/hwdd/hwc> .

**ACTION:** It was suggested that a specific place for the Advisory Team members be designated on the website excluding access for non-Advisory Team members.

### **NEXT STEPS – ANGELA MINNIEFIELD**

- ❖ OSHPD will be hiring (4) permanent Clearinghouse Staff
- ❖ OSHPD staff may visit Michigan, North Carolina, and Wyoming to examine their Clearinghouse data warehouses
- ❖ OSHPD staff plan to hold one-on-one meetings with the health licensing boards, EDD-LMID, and CPEC/Education Partners
- ❖ Meetings will continue to be held with the Health Workforce Data Management Team to develop a tactical plan for data collection and submission
- ❖ The next Advisory Team meeting will be planned for next Spring in late April or early May

### **COMMENTS**

- Are any of the other states aware that California is establishing a Clearinghouse and educational pipeline? No additional information has been provided to the other states at this time.

Angela stated that the National Primary Care Officers met at the annual meeting in Florida last weekend and that Boston had inquired about California's Clearinghouse and would like to duplicate the legislation requirements.

Expectations of the Advisory Team beyond this meeting will be to continue sending OSHPD resources, policy changes, or other vital information that can be shared with other constituents.

Dr. Carlisle thanked the Advisory Team for their efforts.

**Adjournment: 12:30 p.m.**