

MONTANA UNIVERSITY SYSTEM OFFICE OF COMMISSIONER OF HIGHER EDUCATION

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OPPORTUNITIES FOR SYSTEMWIDE ACTION – HEALTHCARE WORKFORCE DEVELOPMENT

The state of Montana continues to struggle with meeting our healthcare workforce needs. Low unemployment rates, employee recruitment and retention challenges, the ongoing strain of COVID-19, and larger demographic trends (e.g., a wave of retirements) combine to make healthcare workforce development a real challenge for both the public and private sectors. As our need for high quality health professionals continues to expand, we believe that the Montana University System must further enhance its efforts to support Montana's healthcare workforce development needs.

Toward that end, the Office of the Commissioner of Higher Education (OCHE) led a statewide, cross-sector working group to identify opportunities for systemwide action that will accelerate Montana's healthcare workforce development efforts. These opportunities are meant to be immediately actionable, and to serve as a "system-level" supplement to the wide array of incredible efforts underway on specific campuses across the Montana University System. Through multiple convenings, several subcommittees, and extensive engagement with outside stakeholders, the working group has identified the following areas for immediate and longer-term action. With support from the Board of Regents, OCHE will take immediate action to address these opportunities in concert with relevant campuses, agencies, and other organizations throughout the state.

Immediate Opportunities

- 1. Develop Trunk Analysis educational models at all levels of healthcare education. Most students begin their healthcare education pathway taking a series of pre-requisites and degree specific coursework. However, many students may struggle with academic preparedness, competitive-entry programs or change in interest. Creating educational pathways that model the trunk of healthcare options provides students with more entry and exit points, streamlines advising and makes pre-req coursework timelier for a student's academic completion. Additionally, mapping industry-recognized healthcare credentials through Prior Learning Assessment (PLA), would allow students a clear understanding of how their previous work translates to credit worthiness, without having to challenge coursework.
- 2. Expand Hub and Spoke Training Models for in-demand healthcare fields: Expand on successful pilot of "hub and spoke" programs where the traditional instruction can be delivered online through one of our MUS programs but where the student can gain their work-based learning experiences locally. This style of program helps to 1) provide the correct distribution of training (ex: LPN, RN, BSN) and 2) allows students to earn credentials and "upskill" without leaving their current location and without taking them out of the workforce where they are sorely needed.
- 3. Support the expansion of Preceptor Training and Development: Preceptor programs in healthcare facilities have shown positive return on investment while improving nurse attrition, satisfaction, and performance. A 2021 survey conducted by the Montana Hospital Association suggests that 1) staff possess the skills needed to become successful preceptors and 2) would be interested in receiving training to provide preceptor development. Currently Montana AHEC is administering nursing preceptor training and is interested in growing this program with system-level support with Interprofessional Training Programs, integrating preceptor training at an earlier level, and creating a preceptor needs assessment.

- Interprofessional training program AHEC would drive the charge but would rely on campus programs for
 content. This would integrate paraprofessional, 2-year and other professional training together. The program
 content would be delivered online; creating a one-size fits all model that is free to Montana students. Duplication
 currently exists across the state at public and private models.
- Integrate preceptor training at an earlier level pre-transition to practice The goal here would be to shift responsibility to new folks, using early integration. Establishing a culture of "pay it forward" with first year students.
- Creation of needs assessment Creation of a needs assessment would provide a stronger understanding for
 what areas need assistance. Current preceptors are experiencing burn out. Additionally, an understanding of
 how preceptors are paid or not paid would be helpful. In some cases, including higher ed institutions, preceptors
 are not paid. Looking at possible incentives or tax break options may encourage participation. AHEC/OCHE
 could design assessment and partner with organizations to collect feedback.

Emerging Opportunities

4. Clearer Understanding of Clinical Placement in Montana. The Montana University System does not oversee state-wide clinical placement. Renewed assessment and coordination with provider sites and training programs would ensure that Montana makes the most of its limited clinical capacity and does what it can to keep new healthcare professionals practicing in the state of Montana. This is particularly important given the two new medical schools launching in Montana over the next few years and the clinical strain that is bound to occur. Current placement is overseen by each individual institution. Next steps will be to gain a clear understanding of who is using whom. Multiple Boards across Montana conduct individual survey and data feedback. Having the MUS create and conduct the report saves clinical sites time and would include all facilities in one data set — allowing for a higher level of transparency. Options include coordinating a state-wide matching system, incentivizing and training clinical proctors, and requiring clinical placement reporting through policy.

Healthcare Workforce Development Group Members

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