



## **Rural Medical Training Facilities Workgroup Established by 2017 Budget Note to HB 5006**

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TO: Oregon Legislative Assembly and the Legislative Administrator

FROM: Rural Medical Training Facilities Workgroup  
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### **Executive Summary of the Legislative Report on Rural Medical Training Facilities Workgroup Budget Note to HB 5006 (2017)**

Link to Executive Summary and Legislative Report: <https://www.oregon.gov/odva/Connect/Pages/Reports.aspx>  
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#### **Overview and Purpose of the Workgroup**

The Rural Medical Training Facilities Workgroup (Workgroup) was established in the 2017 Oregon State Legislative Session in a Budget Note to HB 5006 to the Oregon Department of Veterans' Affairs (ODVA) (*Attachment A*). This Executive Summary of the Legislative Report to the Legislature was prepared by ODVA and documents the results of the Workgroup as directed by the budget note. Please review the extensive Legislative Report for a full understanding of the results of the Workgroup.

ODVA convened and facilitated the Workgroup in collaboration with the Oregon Health Authority and the Oregon State Board of Nursing, to investigate issues related to alleviating shortages of skilled and experienced nurses, medical technicians, allied health professionals and behavioral health (mental health) professionals, particularly in the City of Roseburg and in Douglas County. The Workgroup was directed to consider issues related to establishing a medical training facility in partnership with local academic programs. In addition, the Workgroup was asked to consider medical training programs for veterans transitioning from the military to the workforce.

#### **Executive Summary**

The Workgroup approached the legislative directive by first determining whether and to what extent healthcare workforce shortages exist and then consider alternative solutions to alleviating the shortages. After careful examination and consideration of significant data available, the Workgroup came to consensus that significant current and projected workforce shortages exist in multiple allied health and behavioral health fields in Roseburg/Douglas County, throughout rural Oregon, and statewide.

The Workgroup then considered alternative solutions and came to consensus that they would not recommend or endorse any particular solution; instead, they would simply present all alternatives in the report to the legislature.

#### **Participants in the Workgroup and Meetings**

A diverse group of individuals participated in the Workgroup, including state Legislators and local elected officials. Participants included representatives from Oregon Department of Veterans' Affairs, Oregon Health Authority, Oregon State Board of Nursing, Umpqua Community College, the Governor's

Office, and local participants including local Oregon tribes, the City of Roseburg, Douglas County, local hospital or medical facilities, including the Roseburg VA Medical Center (Roseburg VAMC), and Mercy Medical Center. Local medical practitioners with experience in training nursing and medical technician students also participated. ODVA provided staffing and coordination. (*Attachment B*). The Workgroup met six times from September 2017 to August 2018. There were 15-20 regular participants of the Workgroup, and 8-15 additional individuals attended each meeting.

### **Two-Stage Approach**

The Workgroup used a two-stage approach to investigate the issues. First, the Workgroup collected and reviewed the data and statistics on the actual shortage of allied and behavioral health professionals, including but not limited to nurses and medical technicians. Second, the Workgroup considered potential solutions to determine how to alleviate the shortage of medical professionals and fill the needs of the community and the region, including examining the capacity of existing medical training institutions in Oregon and establishing a medical training facility.

### **Part I: The Need for Skilled and Trained Medical Workforce**

The Workgroup determined that significant current and projected workforce shortages exist in multiple allied health and behavioral health fields in Roseburg/Douglas County, throughout rural Oregon, and statewide. Additionally, the Workgroup found that existing educational program capacity for those fields/occupations in the state is insufficient to resolve workforce shortages, particularly in Roseburg/Douglas County and other rural areas.

### **Part II: Solutions for Alleviating Skilled and Trained Medical Workforce Shortage, Including a Medical Training Facility**

The Workgroup considered a number of alternative solutions to resolve allied and behavioral health workforce shortages. However, it was important to the participants to state that they did not come to consensus on one or more of these solution; instead, they wanted to simply present all the information they had considered to the Legislature.

The Workgroup determined that there is no single solution, and a better approach would be to have a multi-pronged approach and use a variety of solutions. Among the potential solutions considered are: the expansion and creation of incentive programs; recruitment bonuses for health care and behavioral health care providers; competitive salaries and incentives for health care professors and teachers; and the promotion of health careers at secondary schools.

The most comprehensive approach considered was to build educational capacity through a regional medical college in Roseburg that offers advanced (Bachelors, Masters and PhD) degrees in multiple high-demand allied and mental health fields.

Medical Training Facility. The full Legislative Report provides key findings on allied and mental health workforce shortages, limitations of current educational program capacity in Oregon, and potential solutions, including the creation of a regional non-physician medical college. The main components of a preliminary 74-page business plan developed by Oregonians for Rural Health and its supporting partners that outlines an initial framework for degree offerings and programs is included in the full Legislative Report.