

**SLO Healthcare Workforce Partnership**  
**October 26, 2023**  
**Meeting Minutes**

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**Attendees:** Angel Lopez, Barbara Morrow, Bridgette Bateman, Oscar Ramos, Beth Johnson, Dana Goba, Fernanda Lucas, Frank Warren, Heather Tucker, Jenn Clayton, Jordan Turetsky, Kristen Alexander, Lady Freire, Madisyn Masatani, Marcia Scott, Paul Piette, Suzanne Russell, Tony Girolo, Terrance Harris, Aydin Nazmi, Jessica Peckham, Susan McGraw, Michelle Shoresman

**Review of the National and State Best Practices and Examples of Regional Healthcare Workforce Initiatives** (see slides available on SLOHealthcareWorkforce.org, “For Members.”)

**Discussion Results:**

- ***What insights did you gain from this information on national and statewide efforts to address healthcare workforce shortages that could support this planning process?***
  - How do we build the matrix of programs that will encourage young people to go into these professions?
  - At what age do we need to start so that by high school, when they are looking at colleges, they don't assume doctors/dentists are out of reach, from a cost perspective?
  - How do we address cost of living (i.e., local organizations are offering good salaries, but people are still choosing to live in less expensive areas)
  - How do we align the pipeline?
  - How can individual organizations remain aware of local programs?
  - To address social determinants of health, we should also be focusing on things like childcare, cost of living to support basic needs, housing costs, scholarships.
  - How can we tap into HCAI funding? Monies are available and are being used to increase enrollment (i.e., 15 students or more = \$15,000/student to support education; increase to 30=\$30,000/student).
  - Paid externships for nursing students and other occupations.
  - Important to focus efforts on those individuals who are currently residing here, with “roots” and family support, rather than strictly focusing on outside recruitment.
  - Need to consider the effects of the new assembly bill to increase wages for lower-level positions to \$25/hour. There could be a ripple effect, particularly on small practices. Could help with recruiting people to more entry-level positions.
  - Lack of any dental training programs (dentists and assistants; Hancock students?).
  - Ability of Jr. High and High School students to shadow healthcare professionals, opportunities to work in clinics, direct patient care settings.
  - Reference: [CA Future Health Workforce Commission Report](#) (this link has the full report and the Executive Summary detailing the 27 recommendations).
  
- ***What insights did you gain from these 7 regional approaches to addressing healthcare workforce shortages that could support this planning process?***
  - The project that most resonated with two groups was Salinas Valley, particularly since they are our neighbors. It seems like they had the right people in the room, working with their community college and partners, with a well thought out pathway with summer programs, linking to the community colleges and universities, and a detailed diagram of the organizations that were participating at every level.
  - Creating pathways from HS to career that lead to guaranteed jobs would be even more valuable, to the extent possible. This could help plan staffing infrastructure more effectively and allow local community members to put down roots, start a family, buy a house, because they would know they have job security.

- ***What insights did you gain from these 7 regional approaches to addressing healthcare workforce shortages that could support this planning process? Continued...***
  - Need to engage more people who work in the field in the recruitment, training, and mentoring of students (High School and above), so they have a personal connection to the field.
  - It would be great to introduce the Community Health Worker field to high school students, particularly as that group grows and gets certified. But it is hard to put a program like this together without sufficient funding.
  - Appreciated the diagrams of the pathways. Need pathways for behavioral health and dental (Cuesta working on those).
  - Summer bridge program: These could be offered at Cuesta to bridge HS and higher education programs and the workforce.
  - Who might be missing from the Partnership member group that can help with these developments? Someone from local housing to assist with the need for housing for professionals recruited from out of the area? Some political help at the local or state level (Senator Laird, who is on the health and housing committee)?
  - The educational system struggles with incentivizing faculty to address the need to have flexible teaching schedules (i.e., evenings, summer, weekends).
  - There is a need for more skills labs not just on campus, but also in offices, healthcare facilities. Can't build them overnight, even with funding. Cuesta has one skills lab for healthcare shared among many programs, which limits the ability to expand programs.
  - The use of health navigators is interesting.
  - Leveraging the expertise of other places and combining that with what we have here at Cal Poly to more actively support healthcare would be a good place to start. It is expensive to build new programs, so leveraging the knowledge, expertise on other campuses is important. What could be leveraged to expand existing programs?
  - CenCal has Medi-Cal reserves to invest back into the community, so it is important that they know about the work of the Partnership.
  - Consider including the VA and a military representative as there is a huge lack of access to health care services to military personal and their families, especially mental health. The north county serves Camp SLO, Camp Roberts and Fort Hunter Liggett.