

Meeting Report & Recommendations

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Planning Committee

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Special thanks to Senators Alison Clarkson and Suzanne Prentiss as well as Former Rep. Tim Briglin for providing advice and connections to make this discussion its most productive. I also want to thank Ella Harper-Schiehl, who volunteered to take the notes that became the first draft of this report.

Event Sponsors



Purpose & Understanding

The Public Health Council of the Upper Valley (PHC) hosted the Upper Valley Bi-State Legislative Breakfast on Monday, November 6, 2023. The purpose was to provide state-level legislators from the Upper Valley region with information, stories, and policy guidance on the many levels and layers of workforce challenges impacting health and wellbeing in our region.

Goals included:

- Develop relationships with legislators.
- Educate about policy related issues.
- Promote cross-border awareness/collaboration on issues.
- Help legislators become more responsive to the needs of constituents.

The agenda included presentations by leaders in education, housing, childcare, and local health care from both NH and VT. See page 3 of this report for a copy of the full agenda. We had 31 people in attendance, including five NH Representatives, two VT Representatives, and two VT State Senators.

Through presentations and discussion, the meeting highlighted a few key messages for policymakers relative to the health care workforce crisis. These include:

- 1) the healthcare workforce is struggling, even more so after the pandemic, and with the aging of our populations, the crisis will only worsen;
- 2) current and potential healthcare workers at all levels need ready and affordable access to (continuing) education, childcare, and housing if they are to do this critical work; and
- 3) all of these required supports face real barriers right now that must be addressed together.

As speakers and panelists laid out challenges and opportunities for policymakers to consider, a general understanding of the workforce crisis emerged.

Healthcare Workforce Struggles

- Job openings in healthcare have grown consistently since 2019. Both job postings and hiring have increased, particularly in nursing positions. However, the skilled healthcare workforce is aging, and younger workers are not stepping up to fill the gaps. This is happening at a time when our populations are aging and in need of more healthcare.

Workforce Education & Training

- Higher Education must be allowed and supported to adapt to meet current and future workforce needs.
- For nursing-related professions, universities struggle to recruit professors to teach as travel and per-diem jobs pay much more than universities can. Many people who work in the field and have been willing to teach part-time are no longer able to due to shortages in their own workplaces.

- Clinical placements are an essential part of preparation, but the workforce shortage means that potential preceptors do not have the capacity to mentor students.
- This is a vicious cycle. Lack of time to teach leads to fewer students graduating, which leads to a lack of staff to hire, which leads to a lack of time to teach.

No Place to Live

- One reason healthcare employers (indeed, all employers) are struggling to recruit and retain employees is the difficulty in finding affordable housing near enough to work. Our region needs 10,000 more housing units by 2030 to keep up with current demand. The current pace of building is nowhere near this level.
- Many younger people, who are critical for our workforce, cannot find “middle ground” housing such as townhouses or condos when they want to start a family. They are forced to move to other areas to find a balance of work, housing, and childcare.
- Lack of housing is limiting the vibrancy and diversity of our area.

Who Cares for the Caregivers’ Children?

- The importance of early childhood care and education has been neglected. The childcare crisis is not new, but has worsened since the pandemic. There were thousands of childcare job vacancies prior to COVID-19 and that number has only grown.
- Childcare serves two vital roles in our communities that must be respected and supported: 1) we need the younger workers who need childcare to work and 2) young children need the jump start in education and social-emotional skills to be ready to succeed in kindergarten and beyond.
- We must shift our thinking away from childcare being an option or a luxury for families. Most families cannot survive, much less thrive, without safe, quality, affordable care for their children.

It Will Take All of Us to Fix This

- To address these inter-connected challenges, collaboration between all stakeholders is critical. This includes businesses, state policymakers, municipalities, educational facilities, and non-profit organizations.
- When businesses help fund degrees, they are guaranteed employees to fill positions, and graduates are guaranteed a job.

PHC and members of the Planning Committee wish to thank all the elected officials who joined us for this event and the many local experts who came to share their wisdom and experience. We hope this report will provide a guide for our policymakers over the next year of legislative activity.

Agenda

- 8:30 to 9:00 Networking and Continental Breakfast
- 9:00 to 9:10 Welcoming Remarks
Alice Ely, Public Health Council of the Upper Valley
- 9:10 to 9:30 Workforce Crisis in Health Fields: Where are we now? What have we done?
Kate Luczko, NH Health Force
Sarah Truckle, Vermont State University

Facilitated Panel Discussions:

- 9:30 to 10:00 Contributions of Housing Policies to Workforce Crisis
Panelists:
 Andrew Winter, Twin Pines Housing
 Clay Adams, Mascoma Bank
- 10:00 to 10:30 Contributions of Childcare Policy to Workforce Crisis
Panelists:
 Shaun Mulholland, City of Lebanon
 Joanne Roberts, Consultant to Vital Communities
- 10:30 to 11:00 Workforce Pipeline and Retention
Panelists:
 Kris van Bergen-Buteau, Director of Workforce Development & Public
 Health Programs, North Country Health Consortium
 Erika Schneider, Hartford Area Career and Technology Center
 Carolyn Isabelle, Dartmouth Health
- 11:00 to 11:30 Closing: Final Thoughts & Next Steps

Key Policy Recommendations

Workforce Education & Training

- Starting recruitment to healthcare fields early is important, and encouraging current employees to attend professional development and to upskill can help fill in the gaps.
- Across the board strategies to support:
 - Area Health Education Centers (AHEC) are vital in recruiting and retaining workers. Vermont supplements federal funds and has a robust AHEC network that supports Vermont's needs. New Hampshire does not currently support the AHEC's.
 - Make clinical placements for students easier to complete (e.g., incentives for preceptors, qualifications for preceptors, paid placements, etc.).
 - Prevent/reduce student debt by increasing scholarships and financial aid options.
 - Incentivize employers to fund training and establish training partnerships that feed them with employees at the end of training.
 - Incentivize students to practice in rural and underserved communities.
- Within Secondary Education System:
 - We need to help high school students explore healthcare job options, develop skills and professionalism, and connect with the internships that lead to jobs.
 - Aligning school calendars across the state would help students access shared training programs such as those offered through Career and Technology Centers.
 - Fund the development of infrastructure and programs at the secondary level.
 - Make it easier for professionals to transition from working in industry to serving in educational roles. This includes teacher preparation, licensing requirements, and salary policies.
- Post-Secondary Education:
 - Fund Critical Occupation Scholarships (e.g., Vermont supports scholarships that address critical needs as they define them. Currently includes Computer Software Development, Paramedicine, LPN, RN, BSN, Radiologic Science, Respiratory Therapy Science, Dental Hygiene).
- Career Upskilling Opportunities:
 - Create and fund programs that encourage current workers to upskill as they are working. This includes on-line flexible learning; free or low-cost tuition; and licensure/certification that takes current working experience into account.
- Who is part of the healthcare workforce and where do they come from?
 - Immigration Policy: The reality is that immigrants have been a steady, valuable source of quality healthcare workers for a long-time. However, recent changes, such as a pause on visas for nurses enacted last May 2023, have put even more pressure on the workforce. Support for policies that allow immigrant workers to fill gaps in our current workforce is needed.

- Think more broadly about who can play a role in healthcare delivery.
 - Support training for laypeople to fill roles such as: Doulas, Recovery Coaches, Community Health Workers.
 - Support reimbursement for services provided by these additional roles to ensure healthcare systems can support them and pay them a living wage.
- Ensure licensing policies between states are aligned, preferably reciprocal, to ensure our neighboring states are not competing for the same pool of workers. Reduce unnecessary barriers to licensure and certification that do not serve the best interest of patients.

No Place to Live

- Reduce barriers to the scale of housing development needed to meet needs:
 - Infrastructure, including water and sewer, is vital to building the housing needed in the Upper Valley. The current state leads to costly delays in development. Building wells and septic systems are not the answer to municipal infrastructure; they are expensive, time-consuming, and of limited capacity. Invest in infrastructure development and take steps that mobilize federal and other investments.
 - Simplify the permitting process for housing development and encourage housing growth, The permitting process can take months to years, and well-established and supported projects are failing due to a lack of appropriate infrastructure.
- Incentivize municipalities to take more responsibility for promoting housing growth.
- Encourage rezoning that encourages housing growth.

Who Cares for the Caregivers' Children?

- Early childhood education must be a priority for all, and access to affordable, reliable, quality childcare must be available to all.
- Municipalities must play a lead role in addressing the childcare shortage; however, state policy can incentivize local action by reducing barriers and back-filling revenue losses.
 - Municipalities could provide property tax exemptions for childcare facilities.
 - Increase childcare subsidies to provide adequate revenues.
- Fund early childhood education programs in career and technical schools as well as community colleges, especially those programs that allow people to work while getting credentialed. Encourage reciprocity between Vermont, New Hampshire and other neighboring states.
- Provide financial incentives for people training for the early childhood education field: e.g., scholarships, stipends for credentialing costs, free tuition for children of childcare workers.
- Incentivize employers to fund childcare workforce training and support childcare costs. This will help them recruit and retain the employees they need.

Resources

HealthForce NH

Designing the Future of Our Healthcare Workforce

[HealthForce NH](#) is a collaborative of healthcare providers, practitioners, and educators banding together with state government and business leaders.

Giving Care: A Strategic Plan to Expand and Support New Hampshire's Healthcare Workforce (March 2022)

[Giving Care Executive Summary](#) || [Giving Care Full Report](#)

Vermont Department of Health

[Health Care Workforce Status and Reports](#)

Keys to the Valley

The greater Upper Valley region has a housing crisis. Here's what we can do about it.

The [Keys to the Valley Initiative](#) was undertaken by three regional planning commissions – the [Upper Valley Lake Sunapee Regional Planning Commission](#) of New Hampshire, and the [Two Rivers-Ottawaquechee Regional](#) and [Mount Ascutney Regional Commissions](#) of Vermont. The three commissions, called the “Tri-Commission”, cover 67 communities on both sides of the Connecticut River of the greater Upper Valley.

Attendance

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