Delaware Health Care Commission Health Workforce Subcommittee Meeting

Anchor Location: Conference Room 198 at DHSS Herman M. Holloway Campus 9:00 a.m. – 10:30 a.m.

April 10, 2025



Subcommittee Attendance: Roll Call

- Kathleen Matt
- Co-Chair
- Nicholas Conte
- Brian Frazee
- Timothy Gibbs
- Cheryl Heiks
- Elisabeth Massa
- Maggie Norris-Bent
- Chris Otto

- Nichole Moxley
- Co-Chair
- Michael Quaranta
- Gwendolyn Scott-Jones
- Shauna Slaughter
- Joanna Staib *
- Mark Thompson
- Avani Virani
- Rosemary Wurster



Agenda

Call to Order

II. Action Item: Approve March 19, 2025, Meeting Minutes

- **III. Presentation: The Scholar Pipeline Project**
- IV. Update: Data/Surveys/ Licensure
- V. Health Workforce Recommendations
- **VI. Public Comment**
- VII Adjourn



Action Item:

• Approve March 19, 2025, Meeting Minutes



Presentation: The Scholar Pipeline Project

Elizabeth Speakman, EdD, RN, FNAP, ANEF, FAAN Sr Associate Dean and Chief Nurse Executive, School of Nursing, University of Delaware

Rosemary Wurster DNP, RN, MPH, NEA-BC, FACHE Sr Vice President Patient Care Services, Chief Nurse Executive, Bayhealth



The Scholar Pipeline Project: Striving to Address Current Staff and Faculty Workforce Challenges



Our Commitment Runs Deep

Elizabeth Speakman, EdD, RN, FNAP, ANEF, FAAN Sr Associate Dean and Chief Nurse Executive, School of Nursing, University of Delaware

Rosemary Wurster DNP, RN, MPH, NEA-BC, FACHE Sr Vice President Patient Care Services, Chief Nurse Executive, Bayhealth



AGENDA

- Overview of UD SON & Bayhealth-'The synergy'
- Discuss the 'State of Affairs' in nursing leading to the project design and implementation
- Review the project design and goals
- Describe the implementation process of the Scholar Pipeline Project
- Review the schematic design and associated metrics used to determine success
- Dialogue with the audience about how this project can be replicated in their respective institutions.



BACKGROUND

- Hospital RN turnover rate stands at 18.4%
- 34% of RN turnover was nurses with <1 year tenure
- Average nurse vacancy rate remain ~10%

*NSI Staffing Solutions 2024



The nationwide shortage of nursing faculty is 9%, with Delaware facing a more significant 12.3% shortage for full-time faculty (Delaware Nurses Association).



The Health Resources and Services Administration (2022) predicts a deficit of 78,610 full-time RNs by 2025.



The COVID-19 pandemic has exacerbated nursing shortages, driving collaboration between nursing schools and hospital facilities to find innovative solutions.



WWW.BAYHEALTH.ORGBAYHEALTH.ORG

The Clinical Scholar Program strengthens the connection between nursing curricula and realworld nursing practice.



THE EVIDENCE

The Colorado Clinical Model, established in 2004, which emphasizes structured **academicclinical partnerships** to bolster nursing education and practice readiness. This model, which emphasizes continuity and in-depth involvement within a single healthcare setting, prepares students for a **seamless transition from student roles to full-time positions**, reducing the challenges of adapting to new workplace environments.



PROGRAM DESCRIPTION



The literature is replete documenting the impact of the coexisting nursing shortage on patient care delivery



As a result, recently published white papers have directed both academia and practice leaders to develop impactful and sustainable collaboration through innovative and creative opportunities



The Scholar Project Pipeline © which '*Strives to address current faculty and staff workforce challenges*' was developed as a grassroots effort to build a strong connection between nursing curricula and nursing practice



PROJECT IMPLEMENTATION



a collaborative approach to ensure a seamless transition from education to practice.



An expansion of traditional residency programs to capture more comprehensive growth



A connection between a prominent university and a high performing health system to set a standard for collaboration across professions



DEVELOPMENT

Final-year BSN students complete their senior year at an integrated community health system that serves both urban and rural communities, receiving a stipend and guaranteed employment with a two-year work commitment postgraduation.









THE FIRST COHORT





WWW.BAYHEALTM.WRGBAYHEALTH.ORG

NEW KNOWLEDGE

- The faculty shortage reality must be considered simultaneously. Without one, the other will not exist.
- Students who feel 'part of the system' early on are more likely to become enculturated
- Systems that have 'seen themselves' as separate and distinct entities can work together toward a common goal
- Quality care delivery is a responsibility of all and students who transition into practice need to 'see' the collective mission and vision



FACULTY SCHOLARS





rienced es undergo ek-long ing to bme clinical Ity while aining paid pital ployees with ease time for aching.

WWW.BAYHEALTMMORGBAYHEALTH.ORG

TOOLS FOR SUCCESS

- Mutually innovative partners
- Motivating purpose
- Operational commitment
- Mind for measurement
- Courage to remain open to change



CONTACT US







REFERENCES

- Evaluation of a Model for Preparing Staff Nurses to Teach Clinical Groups of Nursing Students. (n.d.). <u>https://doi.org/10.3928/00220124-20101201-05</u>
- Horner, M. D., Center, D., Strauss, W. P., Kowalski, K., & Foss, K. (2009). Childbearing families: implementation of the Clinical Scholar Model for clinical teaching. *The Journal of perinatal & neonatal nursing*, *23*(3), 230–240. https://doi.org/10.1097/JPN.0b013e3181ae725c
- Jarrett, S., Horner, M., Center, D., & Kane, L. A. (2008). Curriculum for the Development of Staff Nurses as Clinical Faculty and Scholars. *Nurse Educator*, 33(6), 268. <u>https://doi.org/10.1097/01.NNE.0000334793.53170.1b</u>
- Horner, M. D. (2021). Clinical Scholar Preparation: An Approach That Works. *Journal for Nurses in Professional Development*, 37(4), 211. <u>https://doi.org/10.1097/NND.000000000000741</u>
- Kowalski, K., Horner, M., Carroll, K., Center, D., Foss, K., Jarrett, S., & Kane, L. A. (2007). Nursing Clinical Faculty Revisited: The Benefits of Developing Staff Nurses as Clinical Scholars. *The Journal of Continuing Education in Nursing*, *38*(2), 69–75. <u>https://doi.org/10.3928/00220124-20070301-08</u>
- Strengthening the workforce | UDaily. (n.d.). Retrieved November 13, 2024, from https://www.udel.edu/udaily/2024/october/school-of-nursing-bayhealth-scholars-workforcepipeline/



Dr. Elizabeth Speakman Senior Associate Dean, Chief Nurse Executive, Professor - University of Delaware - School of Nursing

Elizabeth Speakman, EdD, RN, FNAP, ANEF, FAAN, Senior Associate Dean, Professor and Chief Nurse Executive of Nursing at University of Delaware since August 2020. Prior to this, Dr. Speakman was Associate Provost for Interprofessional Education at the University of the Sciences, and administrative appointments at Thomas Jefferson University, Co-Director- Jefferson Interprofessional Education Center, Professor of Nursing and Associate Dean of Student Affairs.

Dr. Speakman is a Fellow in the American Academy of Nursing, Fellow in the Academy of Nursing Education, Fellow in the National Academies of Practice and Robert Wood Johnson Foundation Executive Nurse Fellow. In 2014, Dr. Speakman received was the McManus Medal for Distinguish Service and inducted into Columbia University Nursing Hall of Fame.

Dr. Speakman received a BS in Nursing from Wagner College, and a Master's degree and Doctorate in Nursing from Columbia University and a Certificate in Healthcare Education from the Harvard-Macy Institute at Harvard University.



Dr. Rosemary (Rosi) Wurster Senior Vice President / Chief Nurse Executive Bayhealth

Rosemary (Rosi) Wurster, DNP, RN, MPH, NEA-BC, FACHE, is senior vice president, patient care services and chief nurse executive at Bayhealth.

In her 10th year of executive nursing practice, Dr. Wurster leads the planning and execution for enterprisewide nursing practice and care delivery, pharmacy services, team member and patient education, and capacity management across the system. Dr. Wurster is also the administrative leader of surgical services, women's and children's services, emergency and trauma services as well as inpatient care. Dr. Wurster is the accountable executive for leadership in patient experience and team member wellbeing. Dr. Wurster is a member of a variety of professional organizations and is and advisory board member of several nursing education programs in the state of Delaware. She holds an appointment as affiliated associate professor at the University of Delaware and is president – elect of the DE Organization of Nurse Leaders.

Dr. Wurster is a board-certified advanced nurse executive and a fellow in the American College of Healthcare Executives.



WWW.BAYHEALTH.ORG TH.ORG



Our Commitment Runs Deep





School of Nursing

Thank You!





Recommendations From the Health Care Workforce Subcommittee

Recommendations From the Health Care Workforce Subcommittee

¹⁾ **Data/Surveys/ Licensure** - need to refine the data further to provide more information on the current workforce and their statewide distribution, as well as information to enable forecasting of the future workforce needs.

2) Clinical Training / Preceptors/ Enhancing healthcare workforce pipelines- need to work out financing and partnerships of hospitals and educational institutions, high schools, and middle schools to create a healthcare career pipeline. Also need mechanisms to grow the next generation of health care workforce educators and fill the ever-expanding demand

3) Health care professional shortages – need to solve shortages of physicians, dentists, dental hygienists, nurses, specialists, behavioral health specialists, etc.. How do we grow our own in the state, and recruit and retain the workforce needed in our state

4) Long-term care- need to grow all levels of health care professionals to serve in much-needed areas, create career ladders for individuals so they can enter at all different levels and achieve credit for their work in the field.

5) Delivering care to Rural and Underserved populations – need to work on geographic distribution, telehealth options, etc. Can we establish more clinics in underserved areas that we can then recruit health care professionals to establish practices there.



Recommendations:

• Data/Surveys/ Licensure - need to refine the data further to provide more information on the current workforce and their statewide distribution, as well as information to enable forecasting of the future workforce needs.





Data/Surveys/Licensure

Key Factors in Understanding Health Workforce

Scope

- Clinical Roles
- Allied Health Professionals
- Non-Clinical Roles
- Public Health Professionals
- Support Staff
- Diagnostic Roles

Composition

• Distribution of roles and specialization areas.

Capacity

• Assess the number of healthcare workers relative to the population they serve.

Geographic Distribution

• Examine how the workforce is distributed across urban and rural areas.

Policy and Regulation

- Licensing requirements
- Work conditions
- Continuing education mandates
- Malpractice Insurance

Workforce Challenges

- Burnout
- Under-staffing
- Migration of Professionals

Impact on Healthcare Delivery

 Assess the impact of workforce factors (availability, training, motivation) influence on healthcare quality, accessibility, and outcomes.

Data Analysis

• Surveys, reports, and studies to analyze workforce data.



Data/Surveys/Licensure Key factors in Understanding Health Workforce

Surveys

• Designed to gather specific, relevant information about the health workforce

Decision Making

• Clear insights into workforce trends, challenges, and needs

Responsiveness

• Targeted data allows for quicker understanding and identification of workforce gaps or issues

Stakeholder Engagement

• Well-designed surveys can encourage participation from healthcare professionals

Customization

Create a Health Care Workforce Initiative and Innovation Fund

• We need the state to invest funds (\$2M) in the creation of a Health Care Workforce Initiative Fund to grow and strengthen our health care workforce. We have large gaps in funding for health care education at all levels of health care professionals. We need to financially support the development of strong pipelines for the development of the healthcare workforce we need in Delaware. The committee overseeing the funds would review collaborative proposals that foster different aspects of the education, training, recruitment, and retention of our health care workforce. These proposals would require showing joint investments by the partners submitting the proposals and would require a plan to show sustainability for the initiatives. These funds could be used to initiate pipeline programs across middle schools and high schools and their partnerships with universities and hospitals. The funds could help support the development of preceptors, and payment of preceptors across our clinical sites and thereby enhance clinical training for our Delaware students. Funds could be used for the development of clinics throughout the state for medical and dental care that help enhance our ability to recruit specialists from outside the state to come to Delaware to set up their practices. Funds could be used for these types of initiatives as well as **many other innovative** ideas.

Health Care Education Round Table

Bayhealth
Beebe
CCHS
Tidal
St. Francis
Nemours
UD

DSU

DTCC

DHSA



Public Comment



Adjourn



THANK YOU