



Rural Health Workforce Needs

A FEDERAL CHALLENGE OR LOCAL OPPORTUNITY?

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Viewing the rural health workforce shortage issue from a job growth perspective, rather than from a health access perspective, raises the question: Is this rural workforce shortage issue a challenge, an opportunity, or both?

Assistant US Secretary of Labor Emily DeRocco met with NRHA leadership in the summer of 2003 to discuss the workforce needs of rural healthcare. The results of this meeting can be seen through announcements this fall of new grant opportunities intended to counter rural health care labor shortages. The Department views these grants as “seed money” to jumpstart growth in a specific job sector of the national economy. Between the years of 2002 and 2012, the healthcare industry is predicted to add nearly 3.5 million new jobs according to the US Bureau of Labor Statistics. Many of these new jobs will require less than 4 years of college education, although most technical jobs will require at least a 2-year technical degree.

As viewed from the US Department of Labor, rural America presents a high job growth environment. In fact, the NRHA was one of five national health care organizations that conducted an executive forum with the Department, as they prepared to launch the High Growth Job Training Initiative in 2004. To date, the Department has invested \$24 million into targeted grant programs at the local level to counter the health care labor shortages, with more grant money on the way.

In meetings with Department staff, they note the irony present in the fact that federal level discussions on rural

TARGET AREAS

Among the areas in which the Department hopes to target and address include:

- Expanding the pipeline of youth entering the health care profession;
- Identifying alternative labor pools such as immigrants, veterans, and older workers;
- Developing alternative training strategies;
- Transitioning workers in declining industries to work in the health care industry.

America often never connect the dotted line between the problem of health care worker shortages, and the problem of rural economic development. According to the US Bureau of Labor Statistics, almost 16 percent of all new wage and salary jobs created in the next decade will be in health services. Connecting these two issues is exactly what the Department of Labor is attempting to accomplish.

However, as highlighted in other articles within this issue of NRHA's Rural Roads, changing technology, and the advanced use of telemedicine within rural areas, will push the demand for career advancement programs and entry level training programs that can keep pace with changing technology. Job training for rural healthcare must keep pace.

The US Department of Labor is pushing forward with the concept of rural healthcare as a national economic opportunity. But will rural America follow? The NRHA is an organization dedicated to improving rural access, equity and quality in healthcare. Promoting rural health-care jobs and job training does address all three of these

lofty goals. But nonetheless, it also does require efforts and partnerships outside of the traditional healthcare linkages of the past. Linkages with business and educational partners must be established on both the local and national levels.

It also requires the development and use of a different advocacy message, but one that should resonate well with all rural advocates. Rural America, through ongoing improvements in technology and health education, can once again be seen as an area of growth and opportunity. As a result, federal investments today in rural healthcare job training, education, and placement, can result in economic growth and sustainability tomorrow. This resonates with a message of optimism- a federal opportunity to embrace, not a federal challenge to overcome.

Additional information on US Department of Labor grants can be found at www.doleta.gov/brg. Or by contacting the NRHA Government Affairs office at 703-519-7910.

FELLOWSHIP IN RURAL FAMILY MEDICINE

Tacoma Family Medicine (TFM) announces 4 openings for August 1, 2005 in our Fellowship in Rural Family Medicine. TFM, a 27 year-old Family Practice Residency affiliated with the University of Washington, has a strong history of training physicians for rural practice. We are currently in the 15th year of our Fellowship in Rural Family Medicine and 4 Fellows are currently participating in the program. Applicants should have previously completed or be finishing a Family Practice Residency in 2005 and have an interest in rural practice. The curriculum consists of 6 months of intensive training in high risk and operative obstetrics and 6 months of electives tailored to the needs of the individual. Elective options include adult and pediatric emergency and critical care, all medical and surgical specialties, procedural skills, rural preceptorships, public health, practice management, etc. As the only civilian residency in Tacoma, WA, located on beautiful Puget Sound, this is an ideal training site.

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