Foreign Trained Health Professional Licensing Project Report

New Mainers Resource Center Portland Adult Education

February 1, 2021

Presentation to the Labor and Housing Committee



Portland Adult Education



Who We Are

The New Mainers Resource Center (NMRC) was created in 2013 by the Maine State Legislature to develop and execute a strategy to integrate and better utilize the skills of foreign trained immigrants living in Maine. Established as a pilot project at Portland Adult Education (PAE), NMRC's mission is to support Maine's economic development by meeting employers' demands for a skilled and culturally diverse workforce.

Support for this research and report was provided by

MEHAF MAINE HEALTH ACCESS FOUNDATION

Reducing Barriers to support Maine's Health Workforce

Implementation of the recommendations from this research will:

- Help foreign trained healthcare workers work toward reaching their highest potential
- Address the state's goal of a diversified and culturally competent workforce
- Meet the needs of employers, address the state's health workforce shortage
- Attract highly skilled healthcare workers to Maine

THE PROBLEM: BARRIERS TO PRACTICE

Most new Mainer physicians, nurses, pharmacists, and others are not able to practice in Maine Most are refugees, asylum-seekers, or asylees. As a result of forced migration they do not have the same options as other forgeign-trained health professionals. Based on our findings barriers are too great for most to overcome. Nationally, an estimated 263,000 immigrants and refugees with at least a four-year degree in a health field have largely been sidelined, either employed in jobs that require no more than a high school diploma or are out of work.

State's workforce is in need of diversity and cultural competency

Projected and current sector-wide staffing shortages

Decentralized system of regulating professions - no one entity responsible

Brain Waste among U.S. Immigrants with Health Degrees: A Multi-State Profile

HEALTH DISPARITIES

E Che Washington post Democracy Dies in Darkness

'I'm scared'

Black people — many of them immigrants make up less than 2 percent of Maine's population but almost a quarter of its coronavirus cases Health disparities continue to grow impacting health outcomes.

Lack of culturally competent providers contributes to this crisis.

Sources: <u>Diagnosing and Treating Systemic Racism | NEJM - nejm.org</u> (Sacchetti, 2020)

WORKFORCE SHORTAGES

Hospitals competing for nurses as US coronavirus cases surge

By TAMMY WEBBER November 2, 2020



FENTON, Michigan (AP) — As the coronavirus pandemic surges across the nation and infections and hospitalizations rise, medical administrators are scrambling to find enough nursing help especially in rural areas and at small hospitals. Maine's current shortage of 600 RNs is expected to balloon to a <u>3,200</u> nurse shortfall by 2025.

Maine Department of Labor anticipates a need for at least 3,700 more workers in ambulatory health care services, 2,300 more in hospitals and 1,900 more in nursing and residential care facilities over the 10-year period ending in 2024.

Background: Many state-wide stakeholders have recognized this problem

The New Mainers Resource Center (NMRC) was created in 2013 by the Maine State Legislature

2018 Maine's Hidden Talent Pool Report

2019 Resolve, Directing the Commissioner of Professional Financial Regulation To Create a Working Group To Study Barriers to Credentialing and 2020 Report

2019 FAME Foreign Credentialing Loan Program - Small loans to help cover costs for work ready expenses for eligible immigrants

2020 - Supporting Maine's Foriegn Trained Professionals - Report to the Governor's Office of Policy, Innovation, and the Future

Pilot Project and Process

Areas Identified for Research

- 1. Removing barriers and expanding access for at least three professions
- 2. Possibilities for mid-level health professionals
- 3. Removing overall barriers to licensing for foreign trained health professionals
- 4. Continue to provide advice, case management, and support to foreign-trained health professionals

Process

Survey, Meetings, and Interviews with new Mainer foreign trained health professionals

Experience working with new Mainers pursuing professional careers and collaborations with immigrant groups and other organizations

Input from Maine employers, colleges and universities, licensing boards other stakeholders

Research of national programs, employers, initiatives and legislation that address barriers

Major Finding: Barriers in Every Sector Prevent a Return to Practice

- Individuals licensed to practice in foreign countries are not able to achieve licensing in Maine
- Most are unable to work on licensing issues because they must secure basic needs
- Colleges, universities are not offering meaningful advanced standing
- Many who are required to start their education over cannot qualify for financial support due to their status as asylum seekers or they already have a college degree
- English proficiency
- Many receive inaccurate information about the process
- Employer assistance programs often do not fit their circumstances
- Many individual's immigration status prohibit participation in workforce programs
- Mid-level healthcare positions, utilizing professionals' skills, do not exist in Maine

Recommendations

Based on our findings, we have proposed modifications in each sector that, if enacted, would assist many health professionals to practice at or near their scope of practice again.

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Must offer substantial advanced standing, more options for transcript evaluators, financial aid, credit for courses

Employers

Modify tuition plans, high level jobs utilizing skill levels, provide internships, and other career advancement support

Licensing

Offer more choices in credential evaluators, provide links to support and information for applicants

State Programs and Policy

5 DOL, DHHS, FAME modify criteria in workforce programs through legislation, rule and policy change

NMRC

Expanded healthcare division with high-level English classes and support to address provider workforce shortage

Recommendations within Labor and Housing Committee Jurisdiction

DOL: Establish a working group to review existing and potential programs to assist foreign-credentialed health professionals return to practice and address healthcare sector workforce shortages

- Allow asylum seekers to participate in workforce training programs, such as CSSP, Quality Centers, and others, prior to receiving their work permits.
- Cover the costs of advisors to foreign trained health professionals
- Develop incumbent worker programs to accelerate the expansion of highly skilled health professionals in the workforce
- Adapt workforce funds to support costs related to licensing such as application fees, tests, prep courses, etc. (longer term) may be for advanced degree. Explore apprenticeship programs for skilled healthcare positions

Recommendations Continued

Consider legislation that will address these issues including

- LD 149 An Act to Facilitate Licensure for Credentialed Individuals from Other Jurisdictions. This comprehensive Legislation from DPFR is based on the OPOR Working Group 2020 Report to IDEA.
- LD 11 An Act To Clarify the Laws Regarding Reciprocity for Licensure of Professional Engineers

Support an expanded capacity at NMRC to put more high-skilled healthcare providers to work on a *statewide* level.

Portland Adult Education: A Coordinated Healthcare Sector Focused Program

To better serve both new Mainer health professionals and health employers

VISION: PAE will provide the guidance, support, training, and opportunities necessary to help any immigrant or refugee who has previously been a healthcare professional, or who wants a career in the healthcare field, to reach their fullest potential. With expanded funding for our <u>healthcare</u> <u>workforce programming</u>, we can immediately address this issue on a larger scale.

Work with stakeholders on the implementation of the recommendations of this report, advocate to meet the needs of specific individuals as they move forward on their career paths and offer technical assistance and support to other service providers and individuals statewide.

Work closely with OPOR staff and boards to address any barriers and facilitate licensing for foreign trained health professionals.

Conclusions

In examining the barriers to licensing for new Mainer health professionals, it is clear that not only are the barriers so significant that very few doctors, nurses, pharmacists, and others are working at their skill level, but reducing these barriers, could have a significant impact to alleviate these critical workforce issues.

*Help foreign trained healthcare workers reach their highest potential

*Address the state's goal of a diversified and culturally competent workforce

*Meet the needs of health employers and address the state's health workforce shortage

*Attract potential skilled healthcare workers to Maine

Next Steps

Create a DOL Working Group to explore existing and potential programs

Expand capacity at NMRC

Support LD 149 – An Act to Facilitate Licensure for Credentialed Individuals from Other Jurisdictions and other Legislation that will address these issues

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For copies of the report go to: <u>Foreign Trained Health Professional Licensing</u> <u>Pilot Project</u>

