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**Committee on Energy and Commerce
Subcommittee on Health**

**“Supporting Tomorrow’s Health Providers: Examining Workforce Programs Under the Public Health Service Act”
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Chairman Dr. Burgess, Ranking Member Green, and distinguished Members of the Subcommittee: Thank you for the opportunity to appear before you today to discuss the workforce programs under the Public Health Service Act on behalf of the Eldercare Workforce Alliance, a group of 31 national organizations – representing consumers, family caregivers, and health care professionals, including direct care workers – joined together to address the immediate and future need for more expert health professionals to care for us all as we age.

I am also pleased to be joined by colleagues from across the country who work tirelessly to improve the health of our nation’s population. Today, I am here to discuss the Title VII Geriatrics Health Professions Programs, which are focused on enhancing the ability of America’s healthcare workforce to provide high-quality care for older adults. These Title VII funds support 44 Geriatrics Workforce Enhancement Programs (or “GWEPs” as I call them), which trained 18,451 emerging health workers (or “trainees”) in over 45 professions and disciplines in the 2015-2016 academic year.

1. Geriatrics Workforce Development

Collectively, the GWEPs are leveraging the skills of geriatrics health professionals already in short supply across different professions to educate other members of the workforce, family caregivers, and direct care workers. Many of our trainees have had little or no exposure to geriatrics principles.

I want to tell you a story about how the GWEP changes lives in my native Texas, where the current population of older adults is 5.9 million and growing. I am at The University of North Texas Health Science Center located in Fort Worth. Our GWEP is called the “Workforce Enhancement in Healthy Aging and Independent Living,” or “WE HAIL” program.

Since January 2016, we have offered rural counties free community programs focused on Alzheimer’s disease to 488 older adults and family caregivers. Caregiving for someone with Alzheimer’s disease is stressful and unpredictable. In our sessions, we focus on reducing stress and building problem-solving skills, with the goal of keeping loved ones at home for as long as possible. We have had a specific focus on training physical therapy students to teach older adults about falls prevention and 88 students have participated in our A Matter of Balance lay leader training. In turn, they have offered falls prevention workshops in 14 senior centers touching 270 older Americans. This is just one of the many ways that our program helps to reduce unnecessary Medicare and Medicaid spending.

Across health professional training, there is a paucity of content focused specifically on ensuring the health care workforce of tomorrow has the skills and competence to care for us all as we age, particularly as our healthcare needs become more unique with the rise of multiple chronic conditions. Our GWEP is filling that gap in Texas: we’ve trained some 1,968 students who will be our future doctors, nurses, social workers, pharmacists, dietitians, and physician assistants. We are also working with primary care practices and have trained six interprofessional teams with the goal of expanding person-centered primary care for older adults in emerging integrated delivery systems.

2. WE HAIL Program (HRSA GWEP Grantee)

In July of 2015, the Center of Geriatrics received \$2.55 million from the Health Resources and Services Administration (HRSA) to establish a Geriatric Workforce Enhancement Program (GWEP). UNTHSC is the only awardee in Texas and one of 44 academic medical centers in the nation to receive this funding.

UNTHSC's HRSA program is called the Workforce Enhancement in Healthy Aging and Independent Living, or WE HAIL Program, that is transforming geriatric care in North Texas by improving training for health care professionals and caregivers. Through WE HAIL, leaders in education, health care and aging services in North Texas collaborate to meet the health needs of our region's rapidly growing population of older adults.

WE HAIL is transforming geriatric education by developing interprofessional training. WE HAIL offers training opportunities that promote teamwork by engaging professionals across institutions and disciplines. WE HAIL partners with JPS Health Network, Texas Christian University, and United Way of Tarrant County's Area Agency on Aging. Geriatric training engages various groups across the lifespan of professional development, including:

Medical (Texas College of Osteopathic Medicine) and other health professional students (TCU College of Nursing students in nursing and social work, TCU Dietetics students, UNTHSC Pharmacy, Physical Therapy and PA Studies students);

Family Medicine residents (JPS Health Network and HCA Plaza Medical Center); and

Practicing health professionals, including physicians, physician assistants, nurses, pharmacists, physical therapists, social workers, dietitians.

WE HAIL is developing training that is community based and experiential. In its first year, WE HAIL has successfully established working relationships with our many grant partners to develop innovative learning opportunities. Interprofessional students complete A Matter of Balance Coach training to help in community fall prevention workshops. They develop and deliver health education at senior centers, and learn first-hand about programs and services at Meals on Wheels and the Alzheimer's Association. WE HAIL has developed modules for integrating Community Evidence-Based Programs, and Meals on Wheels home visits into Family Medicine Residency training and a new Geriatric Certificate Program. As

part of their training, medical students and Family Medicine Residents take a Virtual Dementia Tour to learn how to better care for patients and caregivers affected by Alzheimer's disease. The development of clinical decision tools on electronic medical records for use during Annual Wellness Visits help health professionals assess older patients' needs and connect them to community supports. Together, these developments support a collaborative approach to geriatric care.

WE HAIL is focused on the assessed needs of older adults and their caregivers. WE HAIL's team of faculty and content experts develops training around high priority areas that were identified by the United Way's community needs assessment of older adults. Training focuses on the management of chronic conditions falls prevention, safe medication use, low health literacy that affects the healthcare experience and outcomes, and on the care and support of older adults and families affected by Alzheimer's Disease.

WE HAIL is also supporting caregivers who are important to an older patient's healthcare team. WE HAIL expands training for caregivers through community services and programs available in a variety of settings to support clients, families and caregivers and improve their health and quality of life.

This includes evidence based family caregiver programs and podcasts, and the expansion of programs into rural and underserved areas.

WE HAIL is also developing Geriatric Transformational Champions by partnering with TCU Neeley School of Executive Management to provide A Geriatric Practice Leadership Institute (GPLI). In this first year, this institute has brought together teams representing 6 diverse organizations and healthcare disciplines across DFW and has a waiting list for the 2017 cohort.

Leadership training focuses on the knowledge, skills and attitudes needed to lead in patient-centered primary care for older adults and emerging integrated delivery systems.

In addition, WE HAIL has supported and benefited from relationships built with our grant partners.

We have developed a Health Resource Guide for Caregivers and Older Adults with United Way's Area Agency on Aging Model for Alzheimer's Services.

A Being Mortal documentary screening was provided in partnership with Community Hospice and the Coalition for Quality End-of-Life Care.

And *WE HAIL collaborates with other partners as a member of the Fort Worth Safe Communities Coalition* and AARP and the City of Fort Worth's Age-Friendly Plan.

3. Geriatrics Workforce Enhancement Program (GWEP) Numbers for Academic Year 2015-2016

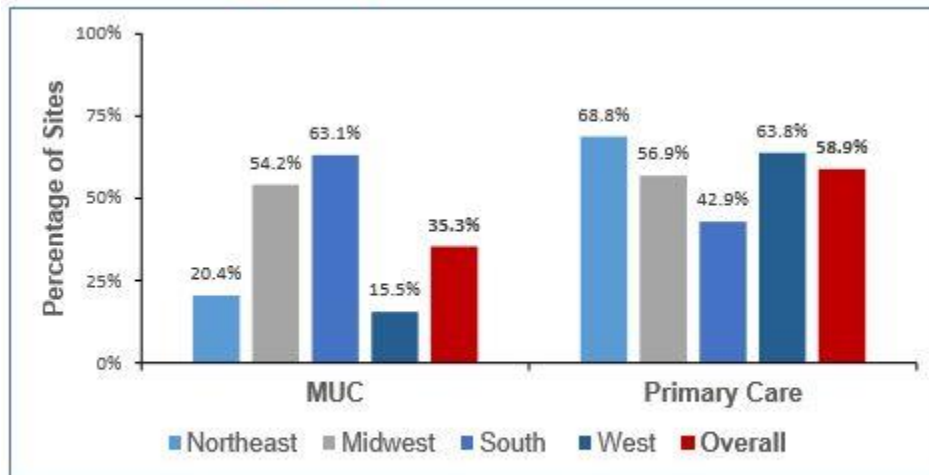
The Geriatrics Workforce Enhancement Program supports several endeavors to enhance geriatrics education and training across the health professions, with an emphasis on integrating geriatrics and primary care. Below is a descriptive summary from the Health Research and Services Administration (HRSA) of the characteristics and accomplishments of the grantees and individual trainees that received program support during Academic Year 2015-2016 ([click here for more information](#));

Program Characteristics

Program Region ²	Grantees	Number of Trainees	Trainee Characteristics				Graduates/ Program Completers
			Underrepresented Minority (URM)		Disadvantaged		
Northeast	12	9,258	928	10.0%	253	2.7%	3,263
Midwest	8	5,255	556	10.6%	718	13.7%	5,221
South	11	2,046	374	18.3%	767	37.5%	1,774
West	13	1,892	195	10.3%	320	16.9%	1,566
Overall	44	18,451	2,053	11.1%	2,058	11.2%	11,824

Note: Program regions are based on U.S. Census Bureau definition.

Clinical Training Settings



Note: A Medically Underserved Community (MUC) is a geographic location or population of individuals that is eligible for designation by a state and/or the federal government as a health professions shortage area, medically underserved area, and/or medically underserved population. Training settings are not mutually exclusive.

- Over 45 professions and disciplines were trained through GWEP including health professions students, residents, fellows, and practicing professionals. Nearly one in five GWEP trainees were medical students, a third of whom were from the Midwest region.
- Individuals trained included (but were not limited to) those enrolled in fellowships in: Geriatrics, Internal Medicine, Family Medicine, Obstetrics and Gynecology, Palliative Care, Physical Medicine and Rehabilitation, Psychiatry, Geriatric Psychiatry, and General Dentistry; certificates in Community Health Worker, Certified Nursing Assistant, and Pharmacy Aides; Nurse Practitioners specializing in acute care adult gerontology, adult gerontology, family, palliative care, nurse administration, nurse educators, and nursing informatics.
- Overall approximately 11 percent of trainees were from disadvantaged backgrounds or were under-represented minorities in the health professions, the majority from Midwest and West regions.

- GWEP partnered with 365 health care delivery sites (e.g., hospitals, long-term care facilities, and academic institutions) to provide trainees with clinical training experiences in geriatrics, overall nearly 60 percent were in primary care settings.
- Over 104,000 faculty and practicing professionals participated in nearly 1,200 unique continuing education courses offered by GWEP grantees.
- In particular, GWEP grantees had over a third of continuing education courses which were specifically focused on Alzheimer's disease and related dementia.
- Nearly 1,350 courses and training activities were developed, enhanced, and implemented during the academic year, providing training on emerging topics in geriatrics reaching more than 57,500 individuals, 22 percent of whom were either patients, families or lay caregivers.
- The majority of GWEP graduates received training in medically underserved communities (96 percent) and primary care settings (83 percent).
- Upon completion of their training, the majority of students who graduated (75 percent) intended to pursue further training or enter practice in medically underserved communities.

Conclusion

The health professions programs authorized under the Public Health Service Act and administered by the Health Resources and Services Administration provide the critical training opportunity in high-need disciplines and settings that improve access to care for all populations.

I am very grateful and encouraged by the hard work done by this committee on the reauthorization of these programs. I am especially grateful to Representative Jan Schakowsky for her leadership in

introducing the Geriatrics Workforce and Caregiver Enhancement Act, legislation that would increase funding for the only federal geriatrics training program, and re-establish the Geriatric Academic Career Awards (or “GACAs”), a previously funded program for developing clinician-educators, that ensures the geriatrics academic workforce is prepared to train the geriatrics workforce of today and tomorrow.

Mr. Chairman, Ranking Member Green, and distinguished members of the subcommittee, addressing the eldercare workforce crisis and the other vital health professions programs under the Public Health Service Act is an opportunity we cannot afford to ignore. We appreciate the hard work the committee has undergone to reauthorize all of the important health professions programs, and I look forward to your questions.