

Southern Oregon Medical Workforce Center

Assessment Report

Oregon Solutions | May 2020

Assessment Team

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Acknowledgements

Oregon Solutions greatly appreciates all those who generously gave their time to inform this assessment and report. We also want to thank Jamie Damon, mediator/facilitator with Oregon State University's Institute for Natural Resources; Peter Harkema, director of Oregon Consensus; and Cat McGinnis, developmental editor at the National Policy Consensus Center, for their help in preparing this report.

About Oregon Solutions

Oregon Solutions came into being with the passage of the Oregon Sustainability Act in 2001. It is the state of Oregon's designated program to help communities address challenging community-based problems and opportunities through collaborative approaches. We do this by creating a neutral forum where businesses, governments, nonprofits, community-based organizations, sovereigns, and other stakeholders can come together to align resources and pool efforts to achieve desired results using collaboration.

Oregon Solutions' engagement starts with an *assessment*. When invited, Oregon Solutions begins an assessment to explore whether and how a collaborative approach might be structured to address a particular community issue. The assessment is composed of a series of one-on-one or small group interviews. If an assessment finds there is a project that can benefit from an Oregon Solutions engagement, Oregon Solutions will go to the governor for consideration of a designation as an Oregon Solutions project.

Oregon Solutions is housed at the National Policy Consensus Center in the Mark O. Hatfield School of Government at Portland State University.

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1. INTRODUCTION

1.1. Overview

In 2019, the Oregon Legislature approved \$10 million in state lottery bonds¹ for the future construction of a medical training facility in Roseburg, referred to in this report as the Southern Oregon Medical Workforce Center. The legislature went further and said the bonds could not be issued until the partners working on the project had "successfully completed [an] Oregon Solutions process."²

This Oregon Solutions assessment report is the first step in an Oregon Solutions process. The purpose of the assessment is to help determine how a collaborative approach might be structured to bring together and facilitate a project team whose goal would be to work collaboratively toward the development of the Southern Oregon Medical Workforce Center.

1.2. Methods

Oregon Solutions conducted this assessment with community members of varying perspectives in fall 2019 and winter 2020. The interviews were intended to provide both a general sense of the needs, interests, and existing level of commitment to advance this kind of effort, as well as to begin to explore whether and how a collaborative approach might be structured to achieve the desired outcomes.

Oregon Solutions staff interviewed elected officials, community leaders, local and state agency directors, policy advisors, and key stakeholders with an interest in this issue. We hoped to 1) learn about the issues and the parties' interests in developing the Southern Oregon Medical Workforce Center; 2) identify resources needed and available for the project; and 3) determine how to design a process that a collaborative group could work on together in order to address the issue at hand. Interviews were held in person or by phone. Before each interview, individuals were briefed about the purpose of the assessment. All interviews were voluntary and lasted approximately one hour. Interviewees were informed that a final report would aggregate responses into key issues without individual attribution.

The team was not able to interview everyone with an interest in developing a medical training facility in Roseburg. Even so, every effort was made to ensure that diverse perspectives were heard. As part of any process development, we are open to considering additional interviews if we determine it is merited to round out this process. A list of those we interviewed can be found in appendix A.

1.3. Intent of Report

This report provides a summary reflection of what we heard from interviewees at a single point in time. It includes recommendations we heard for how an Oregon Solutions process might be

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Available online at https://olis.leg.state.or.us/liz/2019R1/Downloads/MeasureDocument/HB5030

² Same as above

structured and what issues related to the Southern Oregon Medical Workforce Center an Oregon Solutions project team could work on together.

The assessment interviews for this project took place before COVID-19 impacted Oregon communities. The Oregon Solutions project team will take into account guidelines related to the pandemic as the project moves forward in subsequent phases.

1.4. Report Organization

This report is structured in three major sections. It begins with a summary of the background of the project, a summary of the key issues we heard from interviewees during the assessment interviews, and process recommendations that could be helpful in addressing these issues moving forward. This report also includes an appendix of the assessment questions, a list of the assessment interviewees, and materials relevant to the history and background of the project.

2. BACKGROUND

2.1. National and Regional Rural Trends: Demographics, Economic Development, and Healthcare Needs

2.1.1. Changing Economy

The interest to develop a medical training facility in Roseburg has been growing for many years. It is part of an effort to diversify the region's resource-based economy to include medical education and a grow-our-own medical workforce. This effort is taking place against a backdrop of several efforts at rural economic transformation. Douglas County has historically been dependent on forestry and wood products to support its economy. But over the decades, this region's economy has been impacted by large forces, including protections for endangered species and critical habitat,³ a slow-down in the demand for wood products in the wake of the 2008–2009 Great Recession,⁴ and increased productivity of modern lumber mills that require fewer workers than in previous decades.⁵

Southern Oregon, like other rural areas, has good cause to attempt an economic diversification. The Oregon Employment Department notes that worldwide, "urbanization and growth of city centers ... [has concentrated] ... economic and political power in metropolitan areas... advantag[ing]

https://www.fws.gov/oregonfwo/Species/Data/NorthernSpottedOwl/Documents/DraftEconAnalysis.5.29.12.3.pdf

³ Available online at

⁴ Available online at https://www.ncsl.org/blog/2019/08/07/rural-economies-left-behind-or-poised-for-resurgence.aspx

Available online at https://www.qualityinfo.org/documents/10182/13336/The+Employment+Landscape+of+Rural+Oregon?version=1
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metropolitan areas ... [due to their] ... large and diverse economic base ..."⁶ The National Conference of State Legislatures reports that this has led to rural areas having "less internet access, fewer educational institutions, [and] more hospital [closures]," which leads to them experiencing less economic growth."⁷ Douglas County has experienced a rebound since the Great Recession, but "trends in [the wood products] industry show that even before the recession, employment [was] in steady decline ... [and] the region's unemployment rate was consistently higher than the state and US rates between 2005 and 2015."⁸

2.1.2. Aging Population

At the same time that Douglas County's economy has shifted, so have its demographics. Between 2000 and 2017, Douglas County's population grew around half a percent per year, mainly due to net migration (in-migrants minus out-migrants) rather than natural increases in a population (births minus deaths). Like much of rural Oregon and rural America, its population is aging with the median age rising from 41.2 years in 2000 to 46.1 years by 2010. Portland State University's Population Research Center forecasts that the trend of a growing aging population will continue into 2030.9 Southern Oregon reflects both state¹0 and national trends for rural communities and an aging workforce, particularly in education and health services.¹¹ While the aging workforce means more openings in health services, the aging population, overall, also means increased demands and need for health services.¹²

As the region grapples with these interconnected issues, it is important to highlight that southern Oregon communities are currently implementing a range of successful solutions related to both health and health career promotion. Southern Oregon has one of Oregon's four Blue Zones, a community-led improvement initiative designed to make healthy choices easier through permanent changes to a city's environment, policy, and social networks.¹³ The Umpqua Valley Blue Zone region is outperforming the rest of Oregon in three health risks: 22 percent less risk in poor nutrition, 8 percent less risk in exercise, and 24 percent less risk in life evaluation.¹⁴ The Umpqua Healthcare

https://www.qualityinfo.org/documents/10182/13336/The+Employment+Landscape+of+Rural+Oregon?version=1.2

https://www.qualityinfo.org/documents/10182/13336/The+Employment+Landscape+of+Rural+Oregon?version=1.2

⁶ Available online at

⁷ Available online at https://www.ncsl.org/research/agriculture-and-rural-development/challenges-facing-rural-communities.aspx

⁸Available online at https://www.oregon4biz.com/Oregon-Business/Regions/reports/CCD16.pdf

⁹ Available online at https://www.pdx.edu/prc/sites/www.pdx.edu.prc/files/Douglas Report Final.pdf

¹⁰ Available online at

^{2 11} Available online at https://www.qualityinfo.org/-/oregon-s-aging-workforce-by-industry-and-county-2018

¹²Available online at https://www.ncsl.org/research/health/closing-the-gaps-in-the-rural-primary-care-workfor.aspx

¹³Available online at https://oregon.bluezonesproject.com/

¹⁴ Available online at https://www.nrtoday.com/news/health/blue-zones-project-umpqua-having-an-impact-in-douglas-county/article e563e5ee-e95d-56f9-ba1a-9881ba5abc53.html

Careers Pathway program in the Douglas Educational Service District has also drawn participation from hundreds of students in the region in the first two years of its launch (see Section 2.3).

These are just a few examples of the variety of recent collaborative efforts in the region to address some of the interconnected challenges related to health, health services workforce, economic development, and education.

2.2. Shortages of Healthcare Professionals in Southern Oregon

One of the challenges in accessing healthcare in southern Oregon is a shortage, or in some cases a maldistribution, of healthcare professionals. This follows a national trend where the "lack of providers in rural areas forces residents to travel farther to obtain needed services." Rural areas have "far fewer providers than urban areas" for both dental and mental health services. The challenges of recruiting and retaining a rural healthcare workforce are not unique. A 2017 report from the Bipartisan Policy Center found that shortages "are related to … limited employment opportunities for providers' spouses, geographic and professional isolation, and insufficient housing choices all depress interest in rural health practice, particularly for providers with families." ¹⁶

Today, while Oregon may have enough healthcare providers in key categories, Douglas County has a shortage of primary care and mental health providers, and portions of the county have a shortage of dental care providers. A set of maps showing the designated Health Professional Shortage Areas (HPSA) in Oregon by county can be found in appendix C.

A 2018 Legislative Report from the Rural Medical Training Facilities Workgroup further documented allied and behavioral health workforce shortages and needs in Oregon, Roseburg, and Douglas County.¹⁷ Based on analysis and findings from the Oregon Center for Nursing, the workgroup reported the following:

- Current and projected supply of a variety of healthcare workers is inadequate to provide critical access to care in rural Oregon.
- A maldistribution of healthcare workers favors metro areas and leaves a shortage in rural areas.
- Oregon's current educational capacity and opportunities to earn advanced degrees needed in various fields won't meet the need for healthcare workers across the state.

 $^{^{15}}$ Available online at $\underline{\text{https://www.hrsa.gov/sites/default/files/hrsa/health-equity/2017-HRSA-health-equity-report.pdf}$

¹⁶ Available online at https://bipartisanpolicy.org/wp-content/uploads/2018/01/BPC-Health-Reinventing-Rural-Health-Care-1.pdf

¹⁷ Available online at https://www.oregonlegislature.gov/citizen engagement/Reports/ODVA2018-RuralMedicalTrainingWorkgroupLegislativeReport-15Sept.pdf

The Oregon Center for Nursing also reported in 2019 that while "the US Department of Health and Human Services projects a small surplus of nurses in Oregon by 2030 (US Department of Health and Human Services, 2017), there is growing evidence that geographic shortages (Bushy & Leipert, 2005; Oregon Office of Rural Health, 2016) and shortages in specific healthcare settings, such as long term care and nursing education, may be occurring (Oregon Center for Nursing, 2017c; 2018b). Compounding the problem of maldistribution, the nursing workforce faces several other challenges, including the aging of the population, increased retirements among the nation's registered nurses, a projected shortage of physicians, and the ongoing debate about healthcare reform (Buerhaus, Skinner, Auerbach, & Staiger, 2017)."18

In conclusion, the Oregon Center for Nursing's report describes that the statewide shortage of nursing, allied, health and mental health professionals is a result of maldistribution favoring metro areas. As the report puts it, "the factors leading to the observed maldistribution are complex and it is the result of many different factors and influences unique to each local community." But for many in southern Oregon, the experience is simply a shortage of healthcare professionals and reflects a genuine need.

2.3. Efforts to Grow Southern Oregon Healthcare Sector

The greater Douglas County region has taken a grow-our-own approach to a variety of workforce development, economic development, and education programs.²⁰ Several entities throughout the region have been working on different efforts to meet the healthcare sector needs of the region:

- **Umpqua Healthcare Careers Pathway.**²¹ In 2017, the Douglas Educational Services District was awarded a \$432,000 grant to develop a program in each of the thirteen Douglas County high schools. The program, Umpqua Healthcare Careers Pathway, is one of the education service district's career and technical education (CTE) career clusters. Students take coursework that allows them to obtain college credit as well as a Healthcare Pathways Certificate from Umpqua Community College. The certificate allows the student to go directly to work in several fields, and/or the student will have qualifying prerequisites in several other fields. In its first year, around 400 students across the educational service district enrolled in courses through the pathway.
- Area Health Education Center of Southwest Oregon. The Area Health Education Center
 of Southwest Oregon (AHECSW) serves Coos, Curry, Douglas, Jackson, Josephine, and Lane
 Counties, and is one of five regional centers in the state under the Oregon AHEC Program
 Office at Oregon Health and Sciences University (OHSU). The AHECSW helps develop health

¹⁸ Available online at https://oregoncenterfornursing.org/wp-content/uploads/2019/06/ShortageOrMaldistribution Report2019.pdf

¹⁹Available online at https://oregoncenterfornursing.org/wp-content/uploads/2019/06/ShortageOrMaldistribution Report2019.pdf

²⁰ Available online at https://industryconnect.acteonline.org/2018/05/state-career-and-technical-education-policies-hard-at-work-a-series-of-success-stories-.html

²¹Available online at https://douglasesd.k12.or.us/article/cte-grant-opens-doors-health-careers

career pathways for students and works in collaboration with OHSU to place medical students in rural areas. Students are then mentored by local physicians. During these rotations, the students are completely immersed into the rural medical lifestyle.

- **OHSU's Campus for Rural Health—South Coast.** While OHSU's Campus for Rural Health in Coos Bay is outside Douglas County, it does provide one path in the southern Oregon region for students to pursue careers in rural healthcare. The program supports the development of a rural health care workforce in Oregon by training learners in a rural context of care.
- Umpqua Community College (UCC) Health Sciences and Human Services. UCC, the regional community college, offers certificate or degree programs in nursing, nursing assistant, dental assistant, addiction studies, addiction treatment, and human services, and helps prepare students for entry level positions or further study in a variety of allied and behavioral health programs. UCC is a member of the Oregon Consortium for Nursing Education (OCNE), which offers a curriculum jointly developed with nursing faculty from institutions around the state. In addition, UCC graduates with an associate of applied science degree in nursing have the option to continue directly to OHSU senior level coursework required for the bachelor of science degree through the Portland campus or online/distance delivery.²²
- **Oregonians for Rural Health.**²³ Oregonians for Rural Health is a coalition founded in January 2016 of community leaders, healthcare providers, economic development groups, educators, and others dedicated to promoting the health and vitality of our rural communities. Coalition partners have been working over the past few years to develop a proposal for a healthcare educational facility. In addition to providing advanced degrees in healthcare professions, partners also envisioned a regional educational facility that will provide jobs, new economic activity, and essential long-term economic stability.
- Rural Medical Training Facilities Workgroup. The Rural Medical Training Facilities Workgroup was established by the Oregon State Legislature in 2017 to "investigate issues related to alleviating shortages of skilled and experienced nurses, medical technicians, allied health professionals, and behavioral health (mental health) professionals, particularly in the city of Roseburg and in Douglas County." The workgroup, which included state agencies, institutions of higher education, local government, and local healthcare providers, met over an eleven-month period and determined that "significant current and projected workforce shortages exist in multiple allied health and behavioral health fields in Roseburg/Douglas County, throughout rural Oregon, and statewide." The workgroup also

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²² Available online at http://www.ocne.org/

²³ Available online at https://olis.leg.state.or.us/liz/201511/Downloads/CommitteeMeetingDocument/90679

reviewed a variety of solutions to the issue and then presented a list of those potential solutions to the legislature, including the creation of a regional non-physician medical college.²⁴

2.4. Development of Southern Oregon Regional Medical Workforce Center

In fall 2017, Oregonians for Rural Health,²⁵ the Roseburg collaboration developed to promote the concept of a medical workforce center, began conversations with George Fox University to develop educational programs for a potential regional medical training facility in Roseburg. Oregonians for Rural Health signed a memorandum of understanding with George Fox University to determine the scope, degree programs, and location for a facility that would offer advanced degrees in a variety of healthcare areas. As proposed, prospective fields of study in the allied and behavioral health fields include nursing, mental health, physical therapy, radiologic technology, and medical/clinical laboratory technology. George Fox University currently offers a bachelor of science degree in nursing (BSN) degree, a doctorate in physical therapy, an RN-to-BSN degree-completion program, and is developing a physician assistant program to begin offering in January 2021.

The goals in developing these programs and an educational facility are as follows:

- Provide a reliable, local pipeline of skilled allied healthcare and mental health professionals in multiple high-demand medical fields.
- Connect individuals to living-wage jobs through locally-delivered degree programs.
- Support economic growth and stability across the region.²⁶

In the 2019 legislative session, the legislature approved \$10 million in state lottery bonds for the Southern Oregon Medical Workforce Center in Roseburg and requested the engagement of Oregon Solutions. A number of entities, including Mercy Medical, the Roseburg Veterans Administration Hospital, UCC, and George Fox University, formed the Umpqua Valley Development Corporation in fall 2019 to continue to develop the concept. That group has begun to review potential sites for a prospective school and continues to work with George Fox University to develop the educational offerings.

A full timeline of the development of the Southern Oregon Medical Workforce Center, as provided to the Roseburg City Council at their February 10, 2020, council meeting, is included in attachment D.²⁷

 $\frac{https://www.oregon.gov/odva/Connect/Documents/FinancialReports/Rural\%20Medical\%20Training\%20Workgroup\%20Legislative\%20Report\%2015\%20Sept\%202018.pdf$

https://olis.leg.state.or.us/liz/2015I1/Downloads/CommitteeMeetingDocument/90679

²⁴ Available online at

²⁵More information is available at

²⁶ More information is available at https://www.georgefox.edu/roseburg/index.html

²⁷ Available online at http://www.cityofroseburg.org/storage/app/media/Council/Council%20Agendas/02-10-2020%20City%20Council%20Agenda%20Packet.pdf

3. FINDINGS

3.1. Introduction

The following section details the key themes and findings from our assessment interviews. During these interviews, the assessment team asked key stakeholders and community leaders their perspectives on a variety of topics. (The interview questions can be found in appendix B.) Questions focused on what interviewees saw as the major topics related to the Southern Oregon Medical Workforce Center that need to be addressed for the project to succeed, how to overcome perceived challenges, and what goals the collaborative team working on this project should have.

3.2. Key Themes

Assessment interviews revealed the following themes:

- There is strong community support for the Southern Oregon Medical Workforce Center. The majority of interviewees from the region expressed support for the idea of a medical training facility in Douglas County. These interviewees repeatedly revealed that there is drive, commitment, and leadership in the community for building a medical training center for local workforce development in southern Oregon. Local leaders have dedicated significant time and energy to bring the project to where it is today and to secure funding from a variety of sources, including the recent \$10 million award from the Oregon State Legislature. There is significant concern that their workforce needs are not being met, nor even considered, by education programs in urban areas. Many community members feel strongly that the Southern Oregon Medical Workforce Center will bring significant benefit to the region, including improving the retention of healthcare professions and positively impacting the region's economy. They point to the reports (identified in the background section of this document) that confirm this.
- There is also a commitment to cross-sector involvement. All of the interviewees, from local community partners to statewide leaders, expressed a willingness to work collaboratively with the regional community in developing the Southern Oregon Medical Workforce Center. Many important partners and sectors are already represented in the nonprofit organization established to oversee the development of the center. There is also strong interest from additional partners and sectors in contributing to this effort and in being a part of the collaborative working table.
- There are concerns about governance, communication, and transparency. We consistently heard that there is a need for increased communication and transparency about the project. Several interviewees revealed that not all partners and stakeholders have the same information about the project. They expressed concern that not all important cross-sector partners are engaged or informed about plans. Some interviewees also stressed the need for strong coordination with the regional educational partner, UCC. Although the development of the nonprofit Umpqua Valley Development Corporation has been a step toward development of a governance structure and community forum for the

Southern Oregon Medical Workforce Center, interviewees still expressed concern about a lack of clarity regarding decision-making processes and structures.

- There are questions about capacity and phasing. Interviews suggested there is limited understanding among partners and stakeholders about what programs will be offered at the Southern Oregon Medical Workforce Center, or whether or not programs will be phased in over time (e.g., programs ramped up in size or new programs added over time). Many interviewees expressed deep concern about the current capacity for clinical rotations and field placements or community capacity to house students and faculty, and partners have not yet made firm commitments about the number they have to offer.
- Interviewees expressed two different priorities. Some interviewees were chiefly concerned with *educational quality* and offerings and *academic outcomes* of students, while others were chiefly interested in *economic redevelopment* and *workforce opportunities* for the area. While some interviewees prioritized academics and education and others prioritized workforce and economy, the assessment team did not find these values to necessarily be in opposition with one another. Instead, the team found the values have not yet been fully integrated.

3.3. Key Decision Points and Issues to Address

After many years of development of the concept, the Southern Oregon Medical Workforce Center is now moving into a planning and implementation phase. Interviewees identified significant decision points and critical issues to address. Further efforts are needed to finalize a sustainable business plan and address emerging implementation challenges.

Interviewees identified the following key issues for the successful development and implementation of the Southern Oregon Medical Workforce Center:

- **Program selection and clarification of program needs and requirements.** Interviewees shared that there is limited understanding among partners and stakeholders about what programs will be offered at the Southern Oregon Medical Workforce Center. It is our understanding that George Fox University does not need new approvals from the Higher Education Coordinating Commission if they teach at the center what they already teach at the university. However, there is a lack of clarity about what approvals or certifications might be required for any new program offerings.
- **Number of students and faculty.** There is a lack of clarity about how many students should be enrolled initially, and then how many should or could be enrolled over time. Some interviewees expressed concerns about the feasibility of trying to enroll too many students too quickly from an implementation standpoint, as well as developing realistic projections for student enrollment over the long term.

- Aligning the center with existing medical workforce education in the state. Some interviewees raised concerns about how the Southern Oregon Medical Workforce Center's workforce training programs will fit with the overall need and demand for medical workforce training in the state. There is also concern about a lack of coordination with existing or planned expansion of programs in the university and community college systems. A few interviewees expressed concern that providing this training in a rural area has not been demonstrated to improve the likelihood that graduating students will remain in the area. Some interviewees noted the challenge of balancing the two goals of fostering economic development for the region and developing a financially viable and sustainable medical workforce training center.
- **Faculty recruitment and retention plan.** The vast majority of interviewees agreed that faculty recruitment and retention will be a challenge for the region. Although there is discussion about offering higher wages as a recruitment tool, interviewees are concerned that this could potentially cause conflicts with other education institutions, or that it will be insufficient incentive to draw faculty from urban areas. There is also uncertainty about whether or not higher faculty salaries would be financially sustainable.
- Capacity for clinical and field placements. Interviewees also expressed concerns about
 the region's ability to develop a sufficient number of clinical or field placements for
 students, a requirement for many of the programs under consideration by the Southern
 Oregon Medical Workforce Center. Interviewees said that, in a rural region, there may be a
 limited number of partners who could offer a placement that would meet minimum
 requirements.
- Plan to mitigate regional infrastructure challenges. Many interviewees said the region has infrastructure challenges that will impact faculty and student recruitment and retention, particularly very limited stock of housing for faculty and students and limited public transportation. We heard from interviewees that partners and stakeholders do not have a clear understanding of whether or not these issues truly exist, or if they need to develop concrete plans to mitigate these types of issues.
- **Site selection.** Many of the interviewees expressed uncertainty and concern about site selection for the Southern Oregon Medical Workforce Center. There was not a shared understanding among partners about whether or not a new building is necessary, as well as whether or not it will be financially viable over the long-term. Many interviewees suggested exploring existing space in the community. There also appears to be uncertainty about how the \$10 million in lottery bonds must (or must not) be used.
- **Communication and partner engagement plan.** Lastly, interviewees identified a need for improved engagement and increased flow of communication about project planning and development. Interviewees stated it is very important to the success of the Southern Oregon Medical Workforce Center that all important cross-sector partners be engaged and

informed about plans and related issues, and that all partners work collaboratively and collectively to address the issues that have been identified.

4. RECOMMENDATIONS

Oregon Solutions proposes the following steps to support a project team as they move into the next phase of the Southern Oregon Medical Workforce Center's planning and development. These steps are intended to address the identified challenges and support the successful development and implementation of the center:

Develop shared understanding—increase project transparency, communication, and collaboration. Over the years, community leaders have worked hard to reach out and engage a wide array of cross-sector stakeholders in order to build support for the concept of the Southern Oregon Medical Workforce Center. Now that the project is moving into a planning and implementation phase, we found there is an interest in establishing a broader collaborative table that advances transparency, communication, and cross-sector engagement.

Working collaboratively with cross-sector partners will be critical to developing plans to successfully mitigate challenges, as well as to better balance the goal of economic development and the needs and requirements of the higher education system. During formation of a broader collaborative project team, statewide partners should also be consulted in the planning and should recognize and respect the local community's goals, needs, and rural perspective. From this, the project team will gain clarity about the project's status and existing gaps and needs. The project team will also glean a better understanding for how lottery bond dollars can be used, as well as a better understanding about decisions needed to realize a future center.

- Clarify governance. As the Southern Oregon Medical Workforce Center is entering a new developmental project stage—moving from conceptual design into implementation planning—additional partners, some of whom come from outside the region, will need to be engaged. Governance for this project should be clarified and expanded to allow for cross-sector partners to work effectively together and enable the project to benefit from their collective wisdom and varied perspectives. Statewide partners must be willing to understand and support the local community's vision as well as regional needs, perspectives, and past work.
- **Develop a roadmap.** Once there is a shared understanding of issues, and governance and structure, the next phase will be to identify what work needs to happen in what time frame, as well as who the accountable people and organizations are for completing those tasks. This roadmap should include identification of programs that could be included in the Southern Oregon Medical Workforce Center and the program requirements and needs.

• **Finalize a business plan.** In order to succeed in developing the center, there must be a robust, sustainable business plan that addresses financial and program viability and feasible implementation timelines. Timelines include phasing and ramp-up of programs, accreditation and certification requirements, and an objective assessment of facility needs in the short- and long-term. As the educational partner, George Fox University should play a lead role in developing this business plan, with input from all partners and key stakeholders.

Moreover, addressing infrastructure challenges in the region should be part of the plan. Interviewees identified a number of regional infrastructure challenges that could impact potential faculty and students, including the limited stock of affordable and available housing, limited transportation, and an insufficient number of clinical and practicum placements (across all programs) to support large numbers of students.

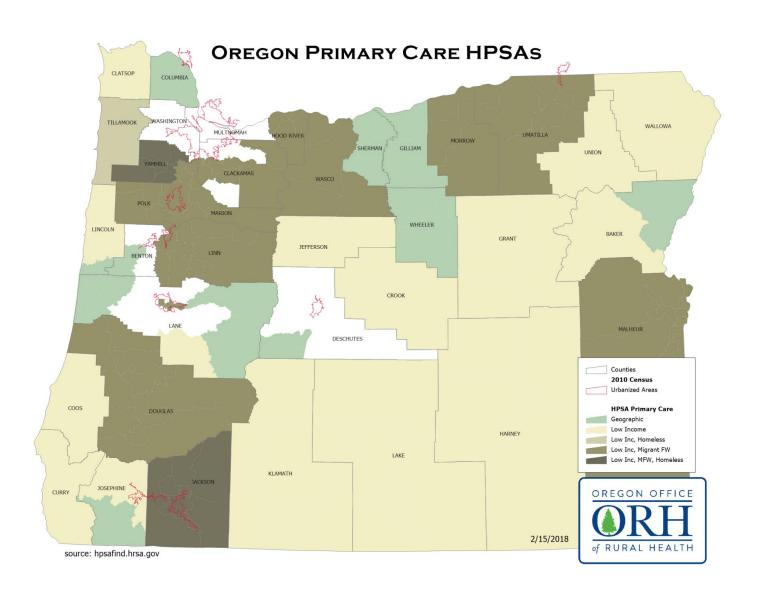
APPENDIX A: INTERVIEWEES

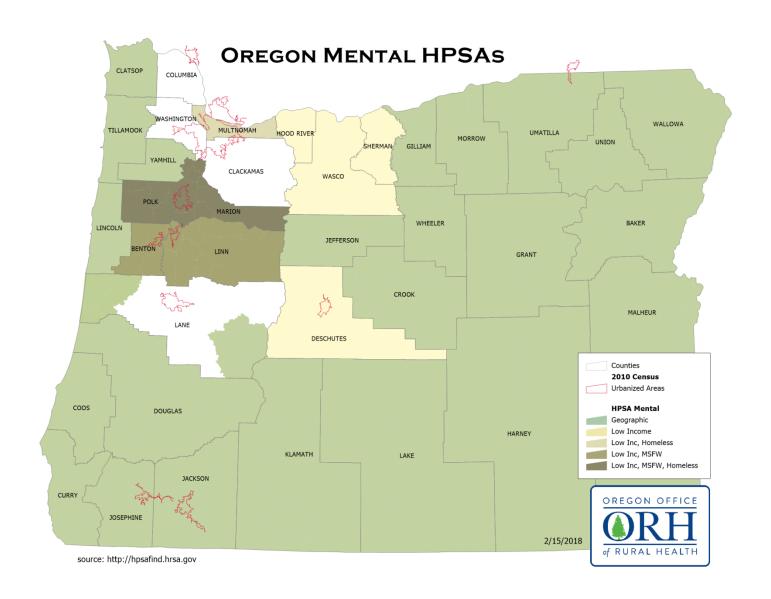
Organization / Agency	Name
Mercy Medical Center	Kelly Morgan / Deb Boswell / Deb Lightcap
George Fox University	Linda Samek / Pam Fifer / Vicki Piersall
Roseburg VA Healthcare System	Lisa Yopp
Umpqua Community College	Debra Thatcher / Steve Loosley / April Myler
City of Roseburg	Nikki Messenger
Oregon Higher Education Coordinating Commission	Ben Cannon
Oregon State Board of Nursing	Ruby Jason
Oregon Center for Nursing	Jana Bitton
Umpqua Health	Brent Eichman
Oregon Association of Hospitals and Health Systems	Katie Harris
Oregon State Legislator	Senator Dallas Heard
Umpqua Economic Development Partnership	Wayne Patterson
Douglas County	Commissioner Tim Freeman / Commissioner Chris Boice
Oregon State Legislator	Representative Gary Leif
Oregon Health & Sciences University	Susan Bakewell-Sachs / Elena Andresen / Ellie Boggs / Mark O'Halloran
Aviva Health	KC Bolton
ADAPT	Greg Brigham
PacWest	Ryan Tribett / Phil Scheuers
ECONorthwest	Adam Domanski
Douglas Education Service District	Michael Lasher
Umpqua Community Action Network (UCAN)	Maureen Short

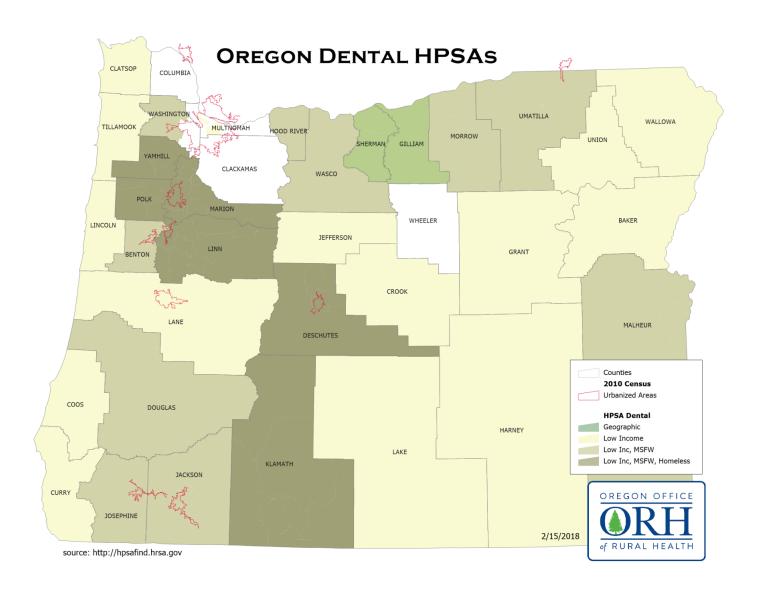
APPENDIX B: ASSESSMENT INTERVIEW QUESTIONS

- Have you been involved in the effort to establish a medical school as described in Douglas County? What interests do you or your organization have in the project?
- From your sphere of work / base of knowledge, what are major topics that need to be addressed related to the center?
- What do you think this project needs in order to be successful? Who / what might be able to meet those needs?
- What are the challenges or barriers to addressing these topics? Do you have suggestions for how they might be overcome?
- What are the authorities or approvals that you know of that need to occur for this project to succeed?
- What do you think the goals of a collaborative project team in relation to this project might be?
- Would you/your organization be willing to participate in a collaborative working table on this project? Are there resources that you could bring to support such an effort?
- Who else would you recommend be interviewed for this assessment? For example, are there potential parties or sectors we might not have thought of? How willing do you think they would be to engage as part of a collaborative working table on this?
- Who lends the authority and ability to be a convener and engage diverse partners to accomplish this project?
- Do you have any questions for us? Is there anything else you want to address that wasn't addressed already?

APPENDIX C: HEALTH PROFESSIONAL SHORTAGE AREA (HPSA) MAPS FOR OREGON







APPENDIX D: ROSEBURG CITY COUNCIL AGENDA— FEBRUARY 10, 2020, AND SOUTHERN OREGON MEDICAL WORKFORCE CENTER TIMELINE (next page)