

Contact:

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- I. **Welcome/Introductions:** Theresa Berton – South Coast Global Medical Center, Edward Burns Jr. - HealthImpact - Kristin Christopherson, St. Francis Medical Center - Charlene Chu - Beverly Hospital, Susan Harrington – CLC, Trudy Johnson – California Hospital Medical Center, Shela Kaneshiro – Orange Coast Medical Center, Ellen Kuhnert – Orange County Global Medical Center, Nancy Lee – Beverly Hospital, Hilda Manzo-Luna – La Palma Intercommunity Hospital, Kimberly Long, ACNL, David Marshall – Cedars-Sinai Health System, Theresa Murphy – USC Verdugo Hills Hospital, Roz Nolan – Community Hospital of San Bernardino, Lori Paschall – Menifee Global Medical Center, Darlene Scaffidi – Pomona Valley Hospital, Lauren Spilsbury -Redlands Community Hospital, Bonita Veal – South Coast Global Medical Center, Mary Wright – Torrance Memorial Medical Center, Irene Zuanic – PIH Health Good Samaritan
Staff: Sheree Lowe - California Hospital Association, Teri Hollingsworth - Hospital Association of Southern California, Sherita Rogers - Hospital Association of Southern California, Megan Barajas – Hospital Association of Southern California, Lisa Mitchell – Hospital Association of Southern California

Shela Kaneshiro chaired the meeting. A recording can be found by clicking here:

https://calhospital.zoom.us/rec/share/t5Dj0Zzty-SvT4Lrr-zl07n_z4lx-EyKf7ehb5S8zdBVIWPhj6Nj-DkboTUI82HG.Euh5JgHvpzJBLV_V

II. **Budget/Legislative Update (See attached)**

The following bills are being closely monitored by CHA:

- Senate Bill (SB) 931 (Leyva, D-San Bernardino) – Oppose Unless Amended
SB 931 would authorize labor unions to bring claims to the Public Employment Relations Board against a public employer for allegations that they are deterring union membership. It would subject employers to civil penalties up to \$1,000 per violation per affected employees and up to \$100,000 in total.
- SB 1044 (Durazo, D-Los Angeles) – Oppose Through Coalition
During a state emergency, SB 1044 would prohibit employers from taking or threatening any adverse action against employees for not reporting to or leaving work and would prohibit employers from not allowing employees to access or use their phones during the emergency.
- SB 1127 (Atkins, D-San Diego) – Oppose Through Coalition
This bill would shorten the time frame – from 90 to 60 days after knowledge of an injury – for employers to reject a workers’ compensation claim.

Nursing Specific Bills – CHA is currently tracking 9 bills with a known impact on the nursing field. CHA is currently supporting:

- SB 979 – Health Emergencies – CHA is the bill sponsor
- SB 1212 – Temporary Service Employees – CHA is the bill sponsor
- SB1375 – Nursing: Nurse Practitioners – This bill is scheduled to be heard in Senate Business

III. Workforce Update

- CNA Apprenticeship Program – Currently, HASC is partnering with the South Bay Workforce Development Board to develop a certified nursing assistant apprenticeship program. The program combines paid on the job training with classroom instruction to help prepare students for career as a CNA. This apprenticeship will apply anywhere in California, not just our region. HASC is applying with the Department of Labor so the apprenticeship will apply nationwide.
- Requested feedback from LA County CNO's on the CNA work competencies list that provides the core competencies that the CNA must demonstrate. There were over 10 hospitals including health systems, asked to respond to the competencies, which will inform how we will develop this apprenticeship program.
- Students will benefit from having skills-based education that prepares them for a well-paying job and employers will benefit as well. Apprenticeship programs helps to recruit, build, and retain a highly skilled and culturally competent workforce. Employers have flexible training options; the apprentice is required to complete up to 2,000 hours of on-the-job learning to ensure that they have competency. However, the employers do have flexibility and power allowing them to determine if the certified nursing assistant has the skill level needed within a minimum term of six months, which reduces the number of trainings to complete within the maximum of 18 months. The program allows for employers to accept credit for academic learning that the CNA has done prior to coming into the apprenticeship program.
- South Bay is partnering with West LA College to provide hybrid classroom training with CNA program lectures online and labs in person. The training can be done from any school if the topics that are required are covered.
- Employers complete and sign an EAA or acceptance agreement to start the application process. (Only one employer is needed to get this application approved.) South Bay will submit EAA to DOL for approval.
- HASC recently signed a letter to support the South Bay grant application to the California Department of Industrial Relations and State Apprenticeship Expansion Equity and Innovation grant. If grant is approved, \$3,000 will be available for each hospital apprenticeship enrollment. There will be enough funding for over 500 people statewide.

Ambulatory Specialty Apprenticeship Program (see attached)

- Launching first cohort May 2022 – 20 new nurses
- Funds received for Workforce Accelerator Fund 9.0
- 20 organizations partnered within LA County – ambulatory care setting
- Second cohort to begin in Fall 2022

IV. CLC Update (See attached)

V. ACNL Update (See attached)

VI. Roundtable

- Torrance Memorial is on a DEI journey for a couple of years called Caring Justice Committee that consists of physician leaders, bedside staff, and administration. Physician-related issues go to medical executives, operational issues more specific to working at the hospital go through the executive management team. Health inequities have been amongst women that are receiving mammograms. The data has been received and now we are making sure that we are addressing it.
- Cedars Sinai DEI committee has been set up. The executive diversity inclusion committee also is in the strategic direction setting at the organizational level and is assisting Dr. Burnes-Bolton to develop the health equity dashboard, which specifically what we call nursing sensitive outcomes and applies gender, age and, race lens to those.
- Pomona Valley health equity diversity inclusion consists of physicians and frontline staff and is trying to tie health equity to our community benefit plan. We are looking around education and in 2021 took on initiative around translation services, which front line staff identified as a major area of weakness.
- St. Francis Medical Center sent a memo out to the nursing leadership from all the regional chief nursing officers that we want their voices to be heard. We want to know what's making your life difficult and if you have a safe place, and reiterated the ISMP2022 standards for medication practices in hopes of maintaining the just culture and not being afraid to report. We are here to support you, and patient safety.
- PIH Good Samaritan Hospital – Have any of you started to implement LVNs to your skill mix and how is it going?
 - o Orange County Global – Yes, we started late fall of 2021. We hired 2 LVN's to use as a proof of concept to see how it would work. There was a lot of education that had to be done with the charge nurses and the staff about LVNs, their scope of practice and what the differences are. There was success with these two individuals in the ER to educate and discharge lower acuity patients, providing the discharge education and working with the RN to ensure that the throughput of the chair patients is happening timely and

quickly. Success with using LVNs to staff our discharged lounge. LVNs are assigned to nursing administration, not to a specific unit, and, that way we are able to deploy them wherever we need them. Also, sponsoring them to complete their RN degrees.

- Redlands Community – We converted, we have 50% LVN staff and encouraged them to go back to school.
- Prime Healthcare – Viewed our post-acute and behavioral health departments started there with implementing LVNs with the goal of having 30 to 35% of their nursing workforce as LVNs. We then started introducing them into MED surge, telemetry, OB, and the ER. Their availability is much higher than it is for the RN.
- Is anyone experiencing shortages or difficulty in finding qualified LVNs?
 - We've had a variety of candidates and we learned that we need them in the new Grad training. The training has helped them become more effective.
 - No union pushback yet.
 - Misperception of magnet and that you cannot use LVNs which is incorrect.
 - Pomona Valley is using LVN's in our critical care units as work clerk monitor techs.
- Is anybody having issues with and filling vacancies for manager positions, not necessarily director, but manager positions who would be overseeing 100 staff?
 - Yes
 - How do we talk about wellness, but our leaders work 15 to 16-hour days, seven days a week, are always available and never get breaks? We currently do not have a solution, but we are talking about it.
 - Torrance – We recognize how managers are being stretched. We are considering a program on how we could get our managers and our leadership thinking that telecommuting might work.
 - Introducing alternative work schedules.