

(1=low 5=high)

Proposed WORKFORCE Strategy	Positive impact on system/population health goals	Potential barriers	Possible solutions	Priority (1-5)	Feasibility (1-5)
Train staff in inter-disciplinary/team-based care (i.e., less physician-centric model) in which all members practice at the top of their license					
Expand numbers / role of NPs and/or PAs to provide primary care (assess, diagnose, and treat)					
Expand numbers / role of RNs (manage care of patients with chronic diseases; lead care management teams; coordinate care between primary care and other providers)					
Expand numbers / role LPNs to perform "enhanced" duties in lieu of Medical Assistants					
Train all team members on cultural competence, social determinants of health, population health, outcome metrics, etc.					
Expand the use of community health workers and deploy them in their respective communities					
Develop a state-sponsored medical and/or dental school to increase supply and access to services					

Modify regulations to permit NPs to serve as medical directors in nursing homes					
Integrate behavioral health and physical health through cross-training, co-location of services, and consultation and referrals					
Increase training/emphasis on nurse care managers and care coordination					
Increase capacity of practice managers and other primary care staff on business functions , including payment, scheduling, technology, data, etc					
Explore/expand opportunities for loan forgiveness and other recruitment and retention strategies to address health professional shortages.					