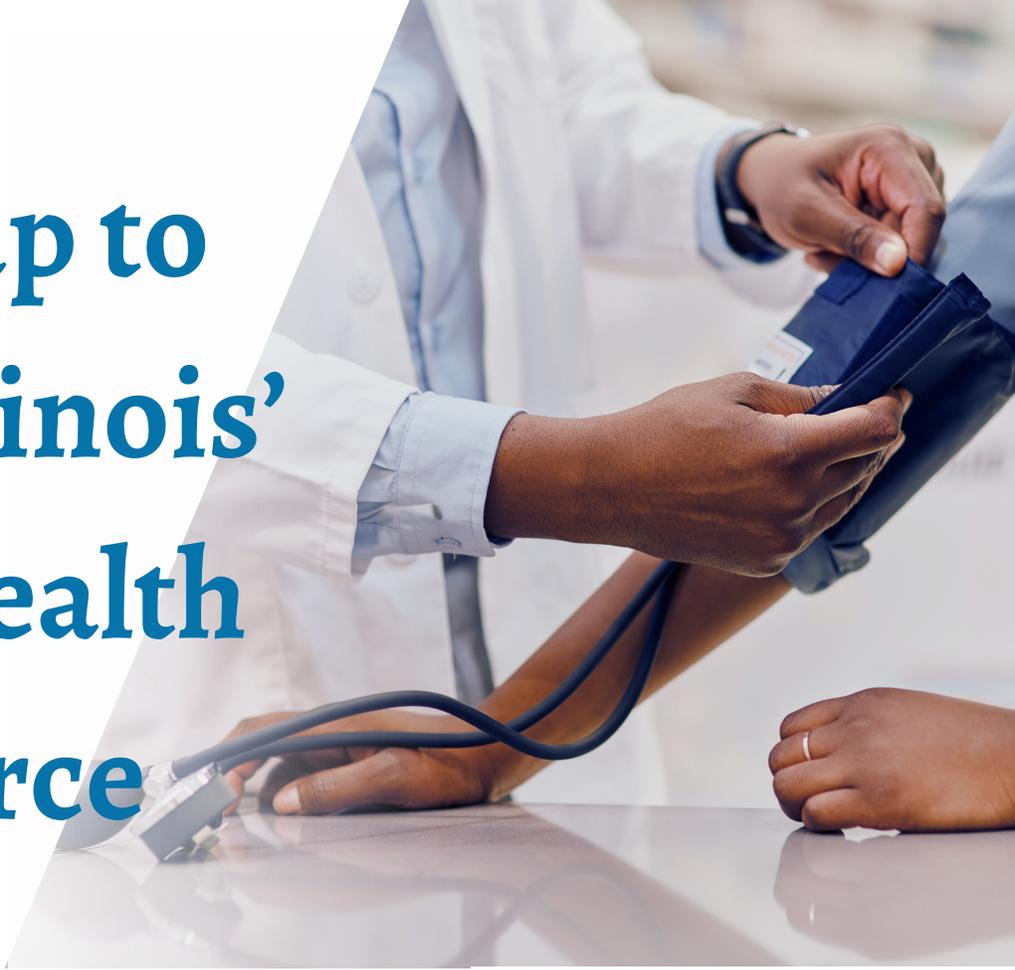


# Roadmap to Grow Illinois' Rural Health Workforce



Senator Dick Durbin

Illinois Health & Hospital Association • Illinois Primary Health Care Association  
• American Nursing Association—Illinois • Illinois Critical Access Hospital  
Network • Illinois Association of Colleges of Nursing • Illinois State Medical  
Society • Illinois State Dental Society • Southern Illinois University School of  
Medicine • National Center for Rural Health Professions, University of Illinois  
College of Medicine Rockford • Illinois Community College Trustees Association  
• Deans and Directors of Illinois Community Colleges Nursing Programs

# Roadmap to Grow Illinois' Rural Health Workforce

Approximately one-and-a-half million people live in rural counties across Illinois, who often wait longer periods of time or must travel further distances to see medical specialists and other health providers. Due to a number of factors, rural residents often face worse health outcomes compared to neighbors in urban and suburban areas. One of the most important ways to close this gap and ensure access to quality health services in rural Illinois is by addressing the shortage of health care professionals.

Rural counties in Illinois have half the percentage of physicians as urban counties. In addition, every non-metropolitan county in Illinois faces a shortage of mental health providers. More than 2.8 million people in Illinois live in an area with too few dentists. In 2020, it was estimated that Illinois will have a shortage of 15,000 registered nurses by 2025—with half of nurses in Illinois age 55 and older, and one-quarter planning to retire soon. COVID-19 has only exacerbated these workforce strains and retirements.

Too few nurses are entering the field each year, partially due to the shortage of nurse educators and clinical training opportunities—in 2021, 92,000 qualified applicants were denied enrollment in nursing schools nationwide. Another barrier is the high debt undertaken by students to pursue medical education, which can average more than \$200,000 for physicians and often steers graduates toward higher-paying urban/suburban areas or more financially rewarding specialties. Addressing these workforce challenges—with an emphasis on under-represented populations and communities of color—can improve health outcomes and strengthen the economic vitality of rural communities.

## Collective Agenda

Senator Durbin, together with leading rural health care partners across Illinois, plans to prioritize the following actions and focus areas over the next four years to address shortages of health professionals in rural areas—from doctors and nurses, to behavioral and other allied health professionals.



Many of these initiatives are funded through the federal Health Resources and Services Administration (HRSA). To facilitate this agenda, Senator Durbin's office will convene regular meetings with hospitals, health centers, medical schools, nursing schools, community colleges, and other rural health partners to disseminate federal funding opportunities, share best practices, and coordinate projects. Together, we will align efforts to advance this shared platform for rural health care workforce development:

## **Pipeline Programs**

- Expand support for HRSA's Area Health Education Centers (AHEC) program run by the University of Illinois College of Medicine-Rockford to bolster its shadowing, mentorship, and educational opportunities for careers in health care to students.
  - Increase the number of hospitals/health centers partnering with schools to offer AHEC programming or other rural immersion experiences to students.
- Showcase health career opportunities to middle and high-school students through new in-person, technology-based, and other awareness-building engagements.
- Promote dual-credit options with community colleges for students to begin workforce training while in high school.
- Explore new training partnerships between community colleges and hospitals/health centers, including medical assistant, lab technician, and other allied health positions.

## **Clinical Education**

- Increase the number of nurse faculty who can educate nursing students, including through improved incentives that address the tuition costs of pursuing graduate/doctorate-level education, and the pay differential between clinical and academic nursing.
  - Explore career advancement programs in which health care facilities provide tuition support for practicing nurses to become educators.
  - Examine innovative strategies to support nurses interested in seeking dual/part-time roles in clinical and academic settings.
- Expand the capacity of health professions schools to enroll more students through capital investments, including equipment for simulation trainings.

- Explore new support strategies for hospitals/health centers offering a high volume of preceptor/clinical trainings for nursing students.
  - Evaluate opportunities to augment capacity through additional setting types
- Increase the number of Medicare-funded graduate medical education (GME) residency slots at Illinois health care sites.

## Rural Recruitment

- Increase the number of medical residency programs operating in rural areas.
  - Prioritize the expansion of HRSA’s Rural Training Track pathway sites, including through technical assistance and mentorship efforts.
  - Prioritize the awarding of new Teaching Health Centers GME program sites.
- Support funding for the National Health Service Corps and Nurse Corps scholarship and loan repayment programs, which help entice more students into pursuing health care education and steer providers into practicing in rural areas.
  - Engage HRSA to address eligibility and prioritization challenges facing certain rural health facilities.
- Increase awareness and outreach efforts through HRSA programs to existing health professions students.

