

# Governor's Council on Economic Expansion: 03/14/2022

Minutes prepared by: Rhonda Davis, Project Consulting Group (PCG)

Location: Virtual

## **Attendance**

- Jeffrey Ettinger, Co-Chair, Hormel Foundation
- Paul Williams, Co-Chair, Project for Pride in Living
- Scott Burns, Structural
- Brett C. Carter, Xcel Energy
- Joe Fowler, Minnesota Building and Construction Trades Council
- Jodi Hubler, Medical Alley Association
- Brenda Hilbrich, SEIU Healthcare Minnesota
- Neel Kashkari, Federal Reserve Bank of Minneapolis
- Marcus Owens, African American leadership Forum; Linking Leaders
- Tuleah Palmer, Blandin Foundation
- Joo Hee Pomplun, Alliance for Metropolitan Stability
- Nonoko Sato, Minnesota Council on Nonprofits
- Traci Tapani, Wyoming Machine
- Bharti Wahi, Department of Human Services
- Penny Wheeler, Allina Health (formerly)
- Steve Grove, Department of Employment and Economic Development
- Jodi Harpstead, Department of Human Services
- Roslyn Robertson, Department of Labor and Industry

# **Agenda**

2:00 PM Meeting convenes

2:05 – 3:00 PM Panel

- Ellie Garrett, Department of Human Services on "<u>Building Racial Equity into the Walls of Medicaid</u>," the first in a series of reports focusing on Minnesota's American-born Black community.
- Brigid Tuck and Rani Bhattacharyya, U of M Extension Service on "<u>Economic Contribution of American Indian Health Care Spending in Northwest Minnesota</u>."

 Commissioner Jodi Harpstead, Department of Human Services on the caring professions workforce and its implications for supporting health writ large, including behavioral health, as well as equity issues in the workforce and in the populations they serve.

3:00 – 3:20 PM

Large group discussion

3:20 - 3:50 PM

Subcommittee work on the roadmap

- Meeting schedule
- Engagement planning
- Writing time: "Why does this matter?"

4:00 PM

Meeting adjourns

## **Next Meeting**

Date: 03/28/2022 Time: 2:00 – 4:00 PM Location: Virtual

## **Meeting Notes**

## **Meeting convenes**

- Department of Human Services (DHS) Commissioner Harpstead confirmed the meeting is live and being recorded, and made the announcement that this meeting is fully virtual because an in-person meeting is not practical or prudent due to the health pandemic, pursuant with <u>Minnesota Statutes, section</u> 13D.021.
- Co-Chair Paul Williams welcomed the attendees and provided an overview of the agenda.
- Co-chair Jeff Ettinger shared that he is running in Minnesota's 1st Congressional District. He discussed remaining on the Council with the Governor's Office, and it was agreed that he will continue to work with the GCEE.
- Commissioner Harpstead shared the objective of the health equity subcommittee and introduced the speakers on the panel.

# Objective: Understand current barriers to health equity, supporting the caring professions, and the relationship between the economy and social determinants of health

- Ellie Garrett, DHS Population Health Team on Dr. Nate Chomilo's study just released called "Building Racial Equity into the Walls" of Medicaid – or BREW Report, the first-in-a-series of reports focuses on Minnesota's American-born Black community.
  - Provided perspective from each of the BIPOC communities as related to health inequity.
  - Recognition of past trauma and injustice in health is a link between health disparities and being able to thrive.
  - o Comprehensive data was provided that supported the summary provided to the council.
  - o Calls to action were provided and made available to the council.

- Brigid Tuck and Rani Bhattacharyya on a report from the U of M Extension Service called "Economic Contribution of American Indian Health Care Spending in Northwest Minnesota."
  - o Provided the analysis of healthcare within the American Indian community.
  - Identified and shared data related to healthcare including
    - Disproportionately female
    - Lower hourly pay
    - Nursing, caregiving, and home health care jobs continue to be unfilled
- Commissioner Harpstead presented "The Caring Professions Workforce" and its implications for supporting "health writ large," including behavioral health, and the equity issues in the workforce as well as in the population of those they serve.
  - The caring professions workforce continues to be in high demand while the wages are 30% below the average Minnesota wage.
    - Employers are competing for workers which is evident by the 4.3% wage increase over the past year.
  - Caring professions are facing an equity issue related to both childcare workers and nursing assistants.
    - 21% of nursing assistants rely on SNAP food benefits, while 27% rely on healthcare subsidies.
  - Models such as the "Independence" package are the type of investment needed moving forward.

#### **Q&A Moderated by Ms. Palmer and Commissioner Harpstead**

- Given the ideas you shared here today, what's the one change or strategy you feel would best support economic expansion in the next five years?
  - Childcare is the workforce behind the workforce. A livable wage is linked to the need for healthcare and SNAP subsidies for childcare workers and nursing assistants. Childcare and healthcare workers are needed yet compensation lags.
- Describe how supporting the health care workforce impacts other sectors of the Minnesota economy?
  - Must acknowledge the caring profession intersection with race and healthcare, which results in low wages forcing workers to rely on public funding for food and healthcare and preventing the opportunity to thrive.
  - Must acknowledge and support the defeminization of healthcare as multiple sources of data continued to prove that women are the predominant workers, subsequently require public funding for food and healthcare.
- How do health outcomes (for individuals and communities) contribute to a thriving Minnesota economy?
  - Data was provided that reinforced the link between healthy workers and a healthy economy.
    - The data represents the facts:
      - Women are the predominant gender in both childcare and nursing assistant jobs
      - Workers in childcare and nursing assistants relay on subsidies for healthcare and SNAP
      - The wage prevents thriving, substantially impacting the number of job vacancies

- The livable wage was previously \$15.00 per hour and likely not be realistic.
- How specifically could the Council build this work into the road map?
  - Acknowledge the "Independence" package connected a solution to a problem and continue to support those types of packages.
  - Allocate funding to support business startup as seed money while enforcing accountability to expected outcome(s).
  - Acknowledge the need to solve for the barriers that exist preventing individuals from completing complicated yet required paperwork especially impacting the BIPOC community.
  - Council should consider how they build relationships between business, government and community to coordinate payment for certification and invest in workers by crediting the cost for certification.
  - The required quality of care for the aging population in Minnesota over next 3-5 years is urgent and one option is to attract younger workers into the field.
    - What can we do to reinvigorate interest?
    - Manufacturing workers earn approximately \$22 per hour. Healthcare jobs are as meaningful and valuable to a healthy economy.

### **GCEE Discussion**

- Livable wage issue is critical, and the council should continue to focus on adjustments based on cost of living including housing.
- The disparate data, gender numbers, and BIPOC data was compelling. The cost of full-time daycare and its impact on workers as they review the cost of childcare, may lead to the conclusion that it may not be worth both adults staying in the workforce.
- The market ought to solve the childcare problem, yet a larger effort may need to occur. The U.S. is one of the most inefficient economies in the world solving childcare, healthcare and the labor problem.
- Question posed: what can we do to solve the problem and what are the recommendations? The aim is to attract workers to be part of the economy.
- The council discussed linking the education to find the resource, then create pipelines into different positions in healthcare. Include the local community colleges, determine where investment is needed to help build and develop talent.
- CPL does a great job, while noting the data indicates where the needs are. There are 40% openings in healthcare jobs.
- Services for people with disabilities may have a high school education requirement. Perhaps the
  employer pays for next career opportunity for the worker. Employers paying for the education of its
  employees is occurring.

#### **Subcommittee work time**

- Remaining 30 minutes would be spent in respective subcommittee discussing planning for upcoming meetings and engagement opportunities and working through sections of the roadmap.
- The next GCEE session will occur on March 28, 2022.