Workforce Shortages in the Allied Health Professions: Barrier to Health Care Access in Texas

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**What Are the Allied Health Professions?**

<table>
<thead>
<tr>
<th>Clinical Laboratory Scientist (Medical Technologist)</th>
<th>Speech-Language Pathologist</th>
</tr>
</thead>
<tbody>
<tr>
<td>Radiologic Technologist</td>
<td>Audiologist</td>
</tr>
<tr>
<td>EMT / Paramedic</td>
<td>Occupational Therapist</td>
</tr>
<tr>
<td>Physical Therapist</td>
<td>Dietitian / Nutritionist</td>
</tr>
<tr>
<td>Dental Hygienist</td>
<td>Cytogenetic Technologist</td>
</tr>
<tr>
<td>Respiratory Therapist</td>
<td>Dental Laboratory Technologist</td>
</tr>
<tr>
<td>Medical Records Technologist</td>
<td>Respiratory Therapist</td>
</tr>
<tr>
<td>Medical Assistant</td>
<td>Physician Assistant</td>
</tr>
<tr>
<td></td>
<td>etc. . .</td>
</tr>
</tbody>
</table>

Over 200 distinct disciplines that provide **direct care** to patients or **essential services** to patients and other care providers.
• Allied health professionals are partners in most aspects of health care: preventing disease, managing chronic disease, diagnosing diseases and infections, providing direct patient care, etc.

• Allied health professionals are trained in a variety of educational settings: community colleges, proprietary schools, four-year colleges, universities, and academic health centers.

• Allied health professionals constitute 60-65% of the health care workforce.

• 8-10 allied health professionals are required for every physician.

• Half of the fastest growing occupations projected through 2016 are in the allied health professions.
• To maintain current levels of care, the collective fields of allied health must increase the number of practitioners by 33.8% in the U.S. by the year 2016.

• A shortage of at least 1.6 million to 2.5 million allied health workers in the U.S. is predicted by 2020.

• Allied health professionals are a key component in increasing and improving access to health care in Texas.

• Workforce shortages in allied health professions in Texas are as severe as in nursing, or worse.

• Health care access problems in Texas cannot be solved without addressing allied health workforce shortages.
### Growth of Health Professions Workforce in Texas, 2004-2014

<table>
<thead>
<tr>
<th></th>
<th></th>
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</tr>
</thead>
<tbody>
<tr>
<td>Physical Therapist</td>
<td>4,050</td>
<td>39%</td>
</tr>
<tr>
<td>Respiratory Therapist</td>
<td>2,800</td>
<td>39%</td>
</tr>
<tr>
<td>Dental Hygienist</td>
<td>3,550</td>
<td>38%</td>
</tr>
<tr>
<td>Registered Nurse</td>
<td>59,600</td>
<td>37%</td>
</tr>
<tr>
<td>Occupational Therapist</td>
<td>2,350</td>
<td>36%</td>
</tr>
<tr>
<td>Speech Language Pathologist</td>
<td>3,100</td>
<td>30%</td>
</tr>
<tr>
<td>Physician</td>
<td>2,650</td>
<td>29%</td>
</tr>
<tr>
<td>EMT/Paramedic</td>
<td>3,350</td>
<td>28%</td>
</tr>
<tr>
<td>Clinical Laboratory Scientist</td>
<td>3,200</td>
<td>25%</td>
</tr>
<tr>
<td>Dentist</td>
<td>1,100</td>
<td>16%</td>
</tr>
</tbody>
</table>

## Number of Professionals Per 100,000 Population in Texas 2007

<table>
<thead>
<tr>
<th>Profession</th>
<th>Metro Non-Border</th>
<th>Nonmetro Non-Border</th>
<th>Metro Border</th>
<th>Nonmetro Border</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dental Hygienist</td>
<td>44</td>
<td>31</td>
<td>19</td>
<td>10</td>
</tr>
<tr>
<td>Dentist</td>
<td>42</td>
<td>26</td>
<td>18</td>
<td>12</td>
</tr>
<tr>
<td>Primary Care Physician</td>
<td>72</td>
<td>55</td>
<td>51</td>
<td>36</td>
</tr>
<tr>
<td>Nurse Practitioner</td>
<td>25</td>
<td>16</td>
<td>17</td>
<td>8</td>
</tr>
<tr>
<td>Occupational Therapist</td>
<td>27</td>
<td>13</td>
<td>21</td>
<td>7</td>
</tr>
<tr>
<td>Physical Therapist</td>
<td>45</td>
<td>26</td>
<td>25</td>
<td>13</td>
</tr>
<tr>
<td>Physician Assistant</td>
<td>19</td>
<td>13</td>
<td>15</td>
<td>16</td>
</tr>
<tr>
<td>Psychologist</td>
<td>29</td>
<td>12</td>
<td>9</td>
<td>5</td>
</tr>
<tr>
<td>Speech-Language Pathologist</td>
<td>39</td>
<td>22</td>
<td>36</td>
<td>16</td>
</tr>
</tbody>
</table>

Supply Trends Among Licensed Health Professions, Texas.  http://www.dshs.state.tx.us/CHS/hprc
## Job Openings vs. Supply for Selected Professions in Texas 2006-2016

<table>
<thead>
<tr>
<th>Profession</th>
<th># Annual Openings¹</th>
<th># Supplied²</th>
<th>#/Percent Unfilled Positions¹</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical Laboratory Scientist</td>
<td>515</td>
<td>246</td>
<td>269 / 52%</td>
</tr>
<tr>
<td>Dental Hygienist</td>
<td>530</td>
<td>322</td>
<td>208 / 39%</td>
</tr>
<tr>
<td>EMT/Paramedic</td>
<td>480</td>
<td>276</td>
<td>204 / 43%</td>
</tr>
<tr>
<td>Occupational Therapist</td>
<td>330</td>
<td>131</td>
<td>199 / 60%</td>
</tr>
<tr>
<td>Physical Therapist</td>
<td>530</td>
<td>155</td>
<td>375 / 71%</td>
</tr>
<tr>
<td>Physician Assistant</td>
<td>225</td>
<td>209</td>
<td>16 / &lt;1%</td>
</tr>
<tr>
<td>Respiratory Therapist</td>
<td>390</td>
<td>363</td>
<td>27 / 7%</td>
</tr>
<tr>
<td>Speech Language Pathologist</td>
<td>510</td>
<td>171 (est)</td>
<td>339 / 66%</td>
</tr>
<tr>
<td>Registered Nurse</td>
<td>8,565</td>
<td>7,694</td>
<td>871 / 10%</td>
</tr>
</tbody>
</table>

Key Strategies for the Addressing Allied Health Workforce Shortages in Texas

• **Strategy 1:** Increase the supply of allied health professionals in Texas

• **Strategy 2:** In order to produce more allied health professionals, educational institutions must be able to:
  
  • admit more students
  
  • hire additional faculty
  
  • increase the number of educational programs
Obstacles to Strategies for Addressing Allied Health Workforce Shortages

Strategy 1: Increase the supply of allied health professionals in Texas

Obstacles

• Lack of awareness of the allied health professions

• Few pre-professional programs to prepare students for professional programs (e.g., JAMP)

• Stagnant or inadequate funding for educational programs at all levels

• Financial aid is limited, especially for post-baccalaureate entry-level programs (e.g., physical therapy, physician assistant, audiology, speech-language pathology, etc.)
Obstacles to Strategies for Addressing Allied Health Workforce Shortages

Strategy 2: In order to produce more allied health professionals, educational institutions must be able to: admit more students, hire additional faculty, increase the number of educational programs

Obstacles

• Lack of awareness of academic careers among health care professionals

• Heavy faculty workloads

• Sharp differences between salaries in academia and the industry
Obstacles to Strategies for Addressing Allied Health Workforce Shortages

Strategy 2: In order to produce more allied health professionals, educational institutions must be able to: admit more students, hire additional faculty, increase the number of educational programs

Obstacles (continued)

• Cost and time to earn an advanced degree to meet accreditation requirements

• Late point of entry for faculty careers
Recommendations for Addressing Allied Health Workforce Shortages

Strategy 1: Increase the supply of allied health professionals in Texas

Recommendations

• Encourage partnerships between high schools, community colleges, universities, and academic health centers to promote allied health professions (e.g., dual credit courses, pre-professional training, etc.)

• Increase financial aid for students in allied health education programs (grants, scholarships, work study, etc.)

• Extend student loan forgiveness programs to allied health professionals; expand loan forgiveness programs in medically-underserved areas
Recommendations for Addressing Allied Health Workforce Shortages

Strategy 2: In order to produce more allied health professionals, educational institutions must be able to: admit more students, hire additional faculty, increase the number of educational programs

Recommendations

• Extend student loan forgiveness programs to allied health faculty

• Offer tuition reimbursement program to children of allied health faculty similar to that offered nursing faculty

• Offer tuition assistance for allied health faculty who must earn an advanced degree
Recommendations for Addressing Access to Quality Health Care  
(Recommendations from the Professions)

**Recommendations**

• Require licensure for medical technologists and clinical laboratory scientists to practice in Texas (TACLS)

• Expand patients’ access to dental hygiene services to the underserved for triage, preventive care, and education, e.g., collaborative practice in Head Start centers, schools, rural areas, etc. (TDHA)

• Increase efficiency and effectiveness of dental care by allowing dental hygienists to administer local anesthesia (TDHA)
• Increase reimbursement and grants to improve emergency medical services in medically underserved, rural, and border communities (TAA)

• Fund emergency medical service training in underserved, rural, and border communities (TAA)

• Preserve the current practice act for respiratory therapy – no changes (TSRC)

• Allow patients full, direct access to physical therapists for diagnosis of movement disorders and therapy services (TPTA)
Recommendations for Addressing Access to Quality Health Care
(Recommendations from the Professions)

Recommendations (continued)

• Increase dual credit high school courses to include pre-health topics, e.g., anatomy and physiology, pharmacology, medical terminology, pathophysiology (TxHIMA)

• Add medical assistants to the Texas Medical Practice Act for physician’s authority to delegate (TSMA)

• Require certification for medical assistants to practice invasive procedures, e.g., injections (TSMA)
Texas Society of Allied Health Professions
Institutional Members

• Baylor College of Medicine
• El Centro College
• El Paso Community College
• Lamar State College – Orange
• Midwestern State University
• St. Philip’s College (San Antonio)
• Texas State University – San Marcos
• Texas Woman’s University
Texas Society of Allied Health Professions
Institutional Members (continued)

• Texas Tech University Health Science Center
• The University of Texas at Brownsville and Texas Southmost College
• The University of Texas at El Paso
• The University of Texas Health Science Center at San Antonio
• The University of Texas Medical Branch at Galveston
• The University of Texas – Pan American
• The University of Texas Southwestern Medical Center
Professional Associations Consulted for this Testimony

- American Health Information Management Association (AHIMA)
- Texas Academy of Physician Assistants (TAPA)
- Texas Ambulance Association (TAA)
- Texas Association for Clinical Laboratory Science (TACLS)
- Texas Dental Hygienists’ Association (TDHA)
- Texas Health Information Management Association (TxHIMA)
- Texas Occupational Therapy Association (TOTA)
- Texas Physical Therapy Association (TPTA)
- Texas Society for Respiratory Care (TSRC)
Professional Associations Consulted for this Testimony

- Texas Society of Medical Assistants (TMA)
- Texas Society of Radiologic Technologists (TSRT)
- Texas Speech-Language-Hearing Association (TSHA)
The Texas Society of Allied Health Professions is a professional organization dedicated to enhancing and promoting education, research, and clinical practice of allied health professionals within the state. TSAHP provides a vital forum in which allied health educators and practitioners can address and act on mutual concerns.

www.tsahp.org

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