IOWA HEALTHCARE WORKFORCE SUMMIT

May 14, 2025

Sponsored by the Iowa Department of Health and Human Services and Iowa Medical Society Foundation.

LETTER FROM HWS CO-CHAIRS

Dear Colleagues,

On behalf of the Iowa Healthcare Workforce Summit (HWS) Planning Committee, we extend our heartfelt gratitude to each of you for your invaluable contributions to the Iowa Healthcare Workforce Summit. Your dedication, insights, and collaboration were instrumental in making the event a success and provided essential feedback on how we can address the ongoing healthcare workforce shortage.

It's no secret that, put broadly, our current workforce challenges are attributable to low recruitment and high turnover rates in the healthcare professions. As the baby-boomer generation ages and moves toward a time of life that requires more health interventions, the demand for healthcare providers will only continue to rise. Along with it, the need for real and lasting Iowa based solutions to address these challenges. Which is why, the active participation from over 70 diverse stakeholders and key individuals at the summit on May 14, 2025, is so important and shows the deep commitment we all have to improving Iowa's healthcare workforce.

We are especially proud of the critical outcome achieved at the summit: consensus on key areas to focus our statewide efforts to address this complex and multifaceted challenge. Your willingness to engage in open dialogue, share innovative ideas, and find common ground has set the stage for impactful change and practical solutions that will benefit patients, providers, and communities across Iowa.

To the members of the planning committee: thank you for your countless hours of effort, dedication, and thoughtful planning. Your commitment to shaping an impactful and engaging summit was evident in every aspect of the event. We could not have achieved such a successful event without your work and steadfast dedication.

To all of the attendees: thank you for bringing your expertise, passion, and ideas to the summit. Your voices and perspectives were invaluable in creating an environment where innovative solutions and meaningful discussions could flourish. We were inspired by the energy and dedication you brought, and we deeply appreciate your ongoing commitment to improving healthcare access and quality for Iowans.

Together, we have taken significant steps toward addressing the healthcare workforce shortage in our state. The connections we have forged, the ideas we have shared, and the consensus we have reached represent a strong foundation for future progress. We look forward to continuing this important work with you and to building upon the momentum generated at the summit.

Respectfully,

Dr. Fadi Yacoub, MD, FASN
Co-Chair, Iowa Healthcare Workforce Summit Planning Committee

Dr. Tracy Larson, DNP, RN, NEA-BC
Co-Chair, Iowa Healthcare Workforce Summit Planning Committee

IOWA'S HEALTHCARE WORKFORCE LANDSCAPE

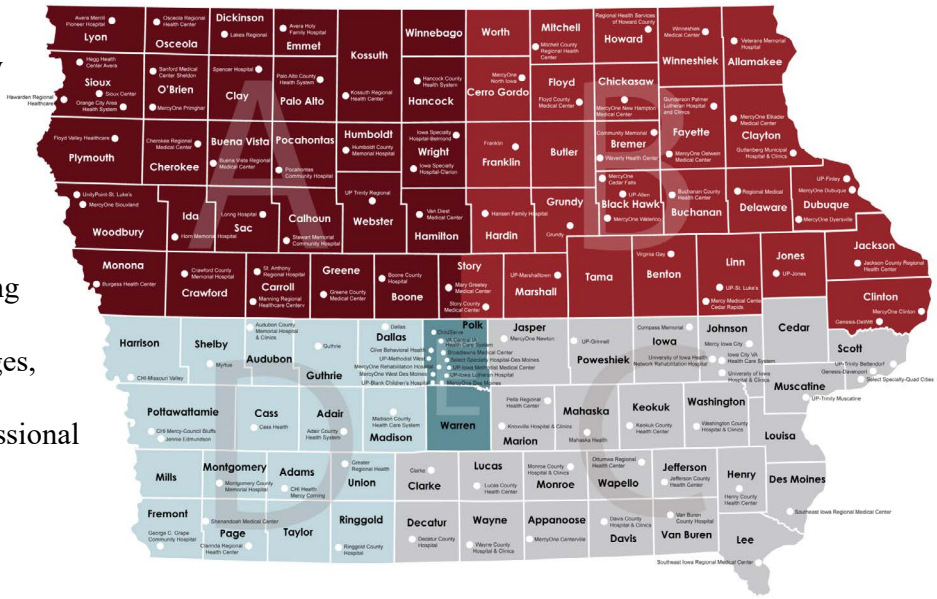
Iowa is facing a mounting healthcare workforce shortage that threatens the state's ability to provide quality care to its residents—especially in rural and underserved areas. The shortage spans nearly every level of the healthcare system, including physicians, pharmacists, nurses, dental providers, direct care workers, instructors, public health personnel, administrators, and more. While this is a nationwide issue, Iowa's rural geography, aging workforce, and systemic barriers make the shortages particularly severe within our state.

Several interrelated factors are driving Iowa's healthcare workforce shortage. Primary among them is the aging population—not only of patients but also of healthcare providers. Nearly a third of the state's physicians are at or nearing retirement age, and more than 37% of Iowa's nursing workforce is between the ages of 50 and 69. As these professionals leave the workforce, fewer young providers are stepping in to replace them. This is compounded by the limited number of training slots available in Iowa, resulting in many potential providers seeking training and eventual practice outside the state or choosing different professions altogether.

Burnout and job dissatisfaction also play a significant role. The COVID-19 pandemic accelerated stress and turnover across the healthcare sector, particularly among nurses, CNAs, and support staff. Long hours, emotional exhaustion, and inadequate staffing have led many to leave their positions prematurely, further deepening the crisis. Facilities in rural Iowa face additional challenges, due to their inability to offer competitive wages and professional development opportunities compared to urban centers.

This growing shortage jeopardizes not just the availability of care, but also the quality and accessibility. Without meaningful interventions, like expanding training opportunities and introducing students to healthcare workforce opportunities earlier in their learning careers, and improving work environments, Iowa's healthcare workforce will continue to struggle. Highlighting the need for focused action on local and statewide strategies to improve recruitment, education and training, retention, and sustainability across our healthcare system.

The Iowa Medical Society (IMS), in coordination with the Iowa Department of Health and Humans Services (IHHS), Iowa Hospital Association (IHA), the Iowa Pharmacy Association (IPA), and the Iowa Primary Care Association (Iowa PCA), lead the Iowa Healthcare Workforce Strategic Planning and Stakeholder Engagement Initiative. The goal of the project is to gather and use input from local communities and healthcare workforce stakeholders to identify actionable solutions that can advance Iowa's healthcare workforce. This summit was one such broader gathering that not only identified actionable solutions but prioritized them so that it can in turn, inform the Initiatives Strategic Action Plan and Task Force. More on this ongoing grant work can be found on the next page.



ABOUT THE IOWA RURAL HEALTHCARE WORKFORCE INITIATIVE

Background

The Iowa Rural Healthcare Workforce Initiative began as a collaborative leadership initiative in 2019 by the Iowa Medical Society, Iowa Hospital Association, Iowa Pharmacy Association, and Iowa Primary Care Association, in partnership with the Iowa Department of Health and Human Services. The goal is to create unified strategic action to improve the status and condition of the healthcare workforce across disciplines, settings, and service location.

Our Goals

- To seek out input from local communities about the healthcare workforce landscape - current status, challenges, assets, and general experiences.
- Collaborate with stakeholders and champions in the identification of actionable solutions to address and improve healthcare workforce by building off and amplifying existing resources.
- Create a strategic action plan and report which captures and outlines actions and tactics to be collaboratively advocated to advance the healthcare workforce in Iowa.

The Result

A Statewide Strategy: Four Common, Consistent Goals

Goal 1: RECRUITMENT	Goal 2: EDUCATION & TRAINING
• Grassroots and Pipeline Recruitment • Seek and Welcome Diverse Demographics • Payment and Loan Reimbursement • Market Healthcare Professions and Rural Communities	• Expand Education Opportunities and Access • Enhance and Evolve Residency and Training Programs • Ease Regulatory Barriers
Goal 3: RETENTION	**Goal 4: SUSTAINABILITY**
• Better Payment and Incentive Packages • Better Practice Environments	• Partnership and Collaboration • Community Development and Vitality

The Actions

- Focused statewide Task Force convening 3-4 times annually to collaborate and amplify existing resources and efforts
- Inclusive regional Town Hall meetings across the state
- Tailored Workgroups that are goal-oriented and focused with boots-on-the-ground involvement
- Annual Workforce Stakeholder Survey to gauge status around the state
- A statewide website, Iowa Rural Healthcare Workforce Connection, for communications sharing
- Recorded webinars highlighting organization successes throughout the state

Learn more about this initiative by scanning the QR Code

IOWA HEALTHCARE WORKFORCE SUMMIT

Overview of the Day

The Iowa Healthcare Workforce Summit comprised of over 70 participants from various areas of the healthcare system including: healthcare professionals and administrators, community members, community organizations, direct care workers, recruiters, nurses, pharmacists, and physicians. The event began with a warm welcome and introductions that set the stage for a collaborative day of discussion and problem-solving. We were honored to have Dr. Patrik Johansson from Washington State University as our keynote speaker. Dr. Johansson delivered a compelling address on rural healthcare shortages, emphasizing the importance of community-based solutions and inclusive research efforts to improve access and outcomes.

The morning continued with a panel discussion moderated by Dr. Alison Lynch, President of the Iowa Medical Society. Panelists from across the healthcare and education sectors shared their insights on addressing the workforce shortage and improving recruitment and retention efforts. Their perspectives sparked meaningful dialogue and provided a comprehensive view of the challenges and opportunities we face across the system.

Following a brief break, attendees participated in three workgroup sessions focused on Education and Training, Recruitment, and Retention. Each session provided an opportunity to dig deeper into these critical areas, with participants sharing experiences and brainstorming innovative solutions. The day concluded with a voting and consensus-building session, where participants identified three statewide themes and countless ideas to shape Iowa's healthcare workforce efforts moving forward.

Throughout the day, the energy and commitment of everyone involved were truly inspiring. The summit was a resounding success because of the passion and expertise each of you brought to the table.

IOWA HEALTHCARE WORKFORCE SUMMIT: RANKINGS

Workgroup Session One: Education & Training

Iowa Healthcare Workforce Summit participants engaged in a discussion focused on middle and high-school students, college students, graduate students, apprentices, and trainees reflecting on the main reason(s) the focus group leaves the state of Iowa.

Key Considerations

- How will the target groups of high school graduates, college and graduate students, apprentices, and trainees get through financially?
- How can we adapt or lessen regulatory barriers?
- How could our state be innovative on utilization of artificial intelligence, telehealth, and other emerging technology?
- How can we better highlight or market the positives of living in Iowa?

Based on the group discussions, the following key themes were drafted for consideration and ranked:

1. Support early (middle and high school) exposure to healthcare careers
2. Statewide collaborations for the sharing of successful, evidence-based education programs
3. Improve community trust and representation
4. Ensure access to essential services for students of all generations (transportation, housing, food)
5. Promote Iowa through strategic marketing and community partnerships
6. Increase credential and credit flexibility and mobility
7. Develop strategies to bridge generational differences in expectations and workplace culture

Workgroup Session Two: Recruitment

Iowa Healthcare Workforce Summit participants engaged in discussion focused on newly-graduated healthcare personnel looking for their first job and the leading causes for this group to leave the state.

Key Considerations

- What are some reasons you feel that healthcare professionals do not come to Iowa to practice?
- What are some existing things about practicing/ working in Iowa that we could change?
- How are organizations posting their job opportunities? How are professionals searching for jobs?

Based on the group discussions, the following key themes were drafted for consideration and ranked:

1. Improve work environments (support employee autonomy, reduce admin burdens)
2. Competitive employment agreements (pay, benefits, loan assistance/ repayment)
3. Human Centered Recruitment
4. Build belonging through healthcare community engagement programs
5. Streamline licensing and credentialing to allow providers to practice at the top of their scope
6. Mechanism for tracking and sharing health career openings
7. Virtual Support for Rural Providers (telehealth, remote monitoring, etc.)
8. Modernize healthcare messaging in Iowa to be mission-purpose focused & authentic
9. Employer toolkits sharing best recruitment practices

Workgroup Session Three: Retention

Iowa Healthcare Workforce Summit participants engaged in discussion focused on currently practicing and established healthcare workforce personnel to discuss the primary reasons that professionals leave and stay in their workplace in Iowa.

Key Considerations

- Licensure requirements
- Socioeconomic factors
- Workplace environment and burnout
- Work-life balance and family

Based on the group discussions, the following key themes were drafted for consideration and ranked:

1. Redesign work structures to address burnout systematically
2. Work with employers to improve culture (empathy and support)
3. Engage later stage professionals as mentors
4. Decrease administrative burdens
5. Flexible support systems for staff
6. Improved wages
7. Modify licensure requirements: improve process and transferability
8. Implement AI and technology advancements

KEY FINDINGS

Based on the workgroup session voting, the following were included in the final round of voting due to rank:

EDUCATION & TRAINING

- Support early (middle and high school) exposure to healthcare careers
- Statewide collaborations for the sharing of successful, evidence-based pipeline education programs
- Improve community trust and representation

RECRUITMENT

- Improve work environments (support employee autonomy, reduce admin burdens)
- Competitive employment agreements (pay, benefits, loan assistance/repayment)
- Human Centered Recruitment

RETENTION

- Redesign work structures to address burnout
- Work with employers to improve culture (empathy and support)
- Engage later stage professionals as mentors

Participants voted on the top three overarching themes they felt would move the needle to improve the healthcare workforce shortage in our state.

The final results included:

1 **Support Early (middle and high school) exposure to healthcare careers**

2 **Improve work environments (support employee autonomy, reduce admin burdens)**

3 **Redesign work structures to address burnout**

NEXT STEPS

Healthcare Workforce Taskforce Review of Top Three Shortage Solutions

Taskforce members will come together to review the report and results of the Healthcare Workforce Summit. They will devise tactical next steps for identifying where the three key themes exist within the current statewide strategic plan, key organizations to take part in each theme, and desired outcomes to measure our efforts.

1

Support Early (middle and high school) Exposure to Healthcare Careers with Hands-On Opportunities

- Fit with Strategic Plan: Grassroots and Pipeline Recruitment
- Key Stakeholders: Schools, colleges, healthcare employers, workforce boards, etc.
- Starting Point: Identify existing programs and promote opportunities.

2

Improve Work Environments (support employee autonomy, reduce admin burdens)

- Fit with Strategic Plan: Supports employee well-being and retention.
- Key Stakeholders: Employees, HR, leadership, IT partners.
- Starting Point: Assess autonomy and admin burden issues. Identify burnout drivers and assess autonomy and admin burden issues.

3

Redesign Work Structures to Address Burnout Systematically

- Fit with Strategic Plan: Supports staff well-being and operational sustainability.
- Key Stakeholders: Clinical leaders, wellness teams, staff, policy advisors.
- Starting Point: Identify burnout drivers and pilot new care models.

THANK YOU TO OUR PARTICIPANTS

Beth Albright, RDH
Webster County Public Health
Dental Hygienist

Jeremy Alexander, MBA
Great River Health System
Chief Financial Officer

Jackie Barber, EdD, MSN, RN, CNS, CNL
Morningside College
Dean of Nylen School of Nursing and Health Sciences

Sara Bath, MS
Iowa Workforce Development
Executive Officer III

Thomas Benzoni, DO
UnityPoint Health
Emergency Medicine Physician

Kim Bergen-Jackson, PhD, RN-GERO, FAAN
University of Iowa college of Nursing
Associate Professor

Rachael Black
Iowa HHS
Workforce Program Planner

Jennifer Brockman, MHA, BSN, RN, CPPS
Compass Healthcare Collaborative
Chief Clinical Projects Officer

Heather Brooks, MPA
National Able Network
Director of Title I Programs

Jennie Brown, MA, PHR, CPRP
Medical Associates
Human Resource Officer

Lidia Bryant, SHRM-CP
Jefferson County Health Center
Human Resources Director

Martha Carvour, MD, PhD
University of Iowa
Internal Medicine Physician

David-Paul Cavazos, MBA
Grinnell Regional Medical Center
Chief Executive Officer

Steve Churchill, MNA
Iowa Medical Society
Chief Executive Officer

Tanya Comer, MSN-Edu, ARNP, AGPCNP-BC
Health Tech Associates
Chief Executive Officer

David Connett, DO, FACOFP
Des Moines University
Dean of College of Medicine

Amber Cooke, RDH
Webster County Public Health
I-Smile Silver Coordinator

Nicole Cooney, BS
Wellmark BCBS
Strategic Initiatives Consultant - Health Improvement

Amanda Creen, LPN, IVT, BA
Aspire of Perry
Administrator

Dustyn Dickhaut, MA, BS
Des Moines Area Community College
Associate Dean, Health Sciences

Susan Dixon, MPA, MA
Iowa HHS
Public Service Manager

Julie Douglas, MS, BS
Adair County Health System
Chief Human Resource Officer

Angie Doyle Scar, MPH
Iowa HHS
Executive Officer II

Marygrace Elson, MD, MME, FACOG
University of Iowa Emeritus

Chris Evans, MHA, FACHE
Compass Healthcare Collaborative
Chief Operations Officer

Thomas Evans, MD, FAAFP
Compass Healthcare Collaborative
President and Chief Executive Officer

Linda Fandel, MA
Iowa Workforce Development
Work-Based Learning Liaison

Briana Gillette, BS
Iowa Primary Care Association
Workforce Consultant

Cindy Huwe, MD
MercyOne Family Medicine Residency
Interim Director

Patrick Johansson, MD, MPH
WSU Elson S. Floyd College of Medicine

John Jones, MD, MPH
UnityPoint Health St Luke's
Chief Medical Officer

Joseph Jones, PhD, MPA, BBA
Des Moines University
Chief of Staff

Shea Jorgensen, MD
Prairie Ridge Integrated Behavioral Health
Chief Medical Officer

David Kermode, DO
Broadlawns Medical Center
General Surgeon Physician

Michael Kitchell, MD
McFarland Clinic
Neurology Physician

Robert Kruse, MD, MPH
Iowa HHS
State Medical Director

Jill Lange, MPH
Iowa HHS
Bureau Chief

THANK YOU TO OUR PARTICIPANTS

Tracy Larson, DNP, RN, NEA-BC
MercyOne
Vice President of Patient Care and Chief Nursing Officer

Maren Lenhart, MPH
Delta Dental Foundation
Community Impact Analyst

Abby Less, MPH
Iowa HHS
Workforce Program Planner and Researcher

Jackie Luecht
MercyOne
Vice President and Chief Human Resource Officer

Jomarie Lund, ADN, CNA
Northeast Iowa Community College
CNA Coordinator

Alison Lynch, MD, MS, FAPA, FASAM
University of Iowa
Program Director and Clinical Professor

Fran Mancl, CNA
Iowa CareGivers
Consultant

Cecilia Martinez, BS
One Iowa
Program Coordinator

Margot Mccomas, RN, BSN
Iowa HHS
Chief Bureau of Emergency Medical and Trauma Services

Avery McCoy
Iowa HHS
Executive Officer to State Medical Director

Jeneane McDonald, DrPH, MPH
Iowa HHS
Public Health Workforce Director

Lisa Mehle, SHRM-CP
The Iowa Clinic
Director of Human Resources

Lezlie Mestdagh, BA
Iowa Heart Foundation/Iowa ACC
Executive Director

Jason Misurac, MD, MS, FAAP
University of Iowa
Pediatric Nephrologist Physician

Keith Mueller, PhD
University of Iowa
Director of Rural Policy Research Institute

Jennifer Nutt, DNP, RN, CENP
Iowa Hospital Association
Vice President of Nursing and Clinical Services

Sara Opie, BA
Iowa Medical Society
Director of Communications

Noreen O'Shea, DO
Clive Free Clinic
Medical Director

Cindy Partlow, RDH
Webster County Health Department
Oral Health Coordinator

Stefanie Pirkl, MPA, SPHR
University of Iowa
Senior Human Resources Director

Amy Rieck, SHRM-CP, PHR
Greater Regional Health
Chief Human Resource Officer

Emily Shields, MA
Community Colleges of Iowa
Executive Director

Michaela Shriver, SHRM-CP
Iowa Primary Care Association
Recruitment Specialist

Amy Shriver, MD, FAAP
Blank Children's Pediatric Clinic
General Pediatrician Physician

Kellie Staiert, MPA
Iowa Pharmacy Association
Director, Grants & Partnerships

Matt Stanley, DO, DLFAPA
Wellmark
Senior Medical Director Behavioral Health

Hailey Strudthoff, MHA
University of Iowa
Administrative Fellow

Shalome Tonelli, PhD, RN
University of Iowa
Certification Center Director

Peter Tonui, MD
The Iowa Clinic
Trauma Surgeon Physician

Christine Tucker, BA
Molina Healthcare of Iowa
Maternal Health Program Manager

Ellen Twinam
University of Iowa
Senior Human Resources Director

Keith Vollstedt, MD, FACS
Siouxland Community Health Center
General Surgeon Physician

Mark Wilson, MD, MPH
University of Iowa
Associate Dean & Associate Hospital Director for GME

Fadi Yacoub, MD, FASN
Mercy Cedar Rapids
Internal Medicine and Nephrology Physician

Michael Yost, MS
Great River Health
Chief Human Resource Officer

Jessica Zuzga-Reed, DO, FAAP
MercyOne Siouxland Medical Center
Chief Medical Officer

THANK YOU TO OUR PARTNERS

IOWA MEDICAL SOCIETY

IOWA Health and Human Services

IOWA PHARMACY ASSOCIATION

IOWA HOSPITAL ASSOCIATION

Iowa PRIMARY CARE ASSOCIATION

For questions regarding this report please contact:
Ryan Roberts: rroberts@iowamedical.org and Kristina Seier: kseier@iowamedical.org