

# ADULT & DISLOCATED WORKER PROGRAM COMMITTEE

## AGENDA

Wednesday, February 8, 2012

9:30 AM

### *workforce* CONNECTIONS

Conference Room

7251 W. Lake Mead Blvd., Suite 200

Las Vegas, NV 89128

This meeting has been properly noticed and posted in the following locations:

City of North Las Vegas, 2200 Civic Center Dr., North Las Vegas, NV  
City of Las Vegas, City Clerk's Office, 400 Stewart Avenue, Las Vegas, NV  
Clark County, County Clerk's Office 500 S. Grand Central Parkway, Las Vegas, NV  
Esmeralda County Courthouse, 233 Crook Street, Goldfield, NV  
Henderson City Hall, 240 Water Street, Henderson, NV  
City Hall, Boulder City, 401 California Ave., Boulder City, NV  
*workforce* CONNECTIONS, 7251 W. Lake Mead Blvd., Las Vegas, NV  
Nevada JobConnect, 3405 S. Maryland Pkwy., Las Vegas, NV  
Lincoln County 181 Main Street Courthouse, Pioche, NV  
Nye County School District, 484 S. West St., Pahrump, NV  
Pahrump Chamber of Commerce, 1302 S. Highway 160, Pahrump, NV

**This Agenda is also available on the *workforce* CONNECTIONS internet website at [www.nvworkforceCONNECTIONS.org](http://www.nvworkforceCONNECTIONS.org).**

### COMMENTARY BY THE GENERAL PUBLIC

This Board complies with Nevada's Open Meeting Law, by taking Public Comment at the beginning of the meeting immediately after the Board approves the Agenda and before any other action is taken and again before the adjournment of the meeting." The Board also has discretion to take Public Comment after any item on the agenda, after the item has been discussed by the Board, but before the Board takes action on the item.

***Each person participating in Public Comment will be limited to three minutes of comment.*** If any member of the Board wishes to extend the length of a comment, then the Board member may do so through a majority vote of the Board.

The Board chair has the right to end any Public Comment which: (1) is not related to any matter within the authority of the Board; or (2) is willfully disruptive of the meeting by being irrelevant, repetitious, slanderous, offensive, inflammatory, irrational, making personal attacks, or interfering with the rights of other speakers. ***Members of the public: please comply with the requests of the Board chair and do not be disruptive, otherwise you may be removed.***

Auxiliary aids and services are available upon request to individuals with disabilities by notifying Dianne Tracy, in writing at 7251 W. Lake Mead, #200, Las Vegas, NV 89128; or by calling (702) 638-8750; or by fax (702) 638-8774. The TTY/TDD access number is (800) 326-6868 / Nevada Relay 711. A sign language interpreter may also be made available with twenty-four (24) hour advance notice. An Equal Opportunity Employer/Program.

**NOTE: MATTERS IN THIS AGENDA MAY BE TAKEN OUT OF ORDER.**

Adult & Dislocated Worker Program Committee members: Valerie Murzl, Chair; Daniel Rose, Vice-Chair; Hannah Brown; Charles Perry and Maggie Arias-Petrel.

*All items listed on this Agenda are for action by the Adult and Dislocated Worker Program Committee unless otherwise noted. Action may consist of any of the following: approve, deny, condition, hold or table. Public Hearings may be declared open by the Chairperson, as required for any of the items on this Agenda designated for discussion or possible action or to provide direction and recommendations to workforce CONNECTIONS.*

**AGENDA**

1. Call to order, confirmation of posting and roll call.
2. **ACTION:** Approve the agenda with inclusions of any emergency items and deletion of any items.
3. **FIRST PUBLIC COMMENT SESSION:** Members of the public may now comment on any matter posted on this Agenda, which is before this Committee for consideration and action today. Please clearly state and spell your name and state your address for the record. Each public comment will be limited to three (3) minutes.
4. **ACTION:** Approve the Adult & Dislocated Worker Committee meeting minutes of January 11, 2012.....1
5. **ACTION:** Nominations and Elections for Chair and Vice-Chair of ADW Committee among the committee members.
6. **ACTION:** Approve staff's recommendation to publish a Request for Re-Entry Proposals for Adult and Youth Services in an amount not to exceed a total of \$1,000,000.....4
7. **ACTION:** Approve staff's recommendation to award additional funding to the following Funded Partners who have met or exceeded established placement goals: .....5

**FIRST QUARTER:**

- 1.Foundation for an Independent Tomorrow (FIT).....\$216,000.00
- 2.Latin Chamber Community Commerce Foundation.....\$100,000.00
- 3.Goodwill .....\$77,696.00
- 4.NYE CC .....\$52,548.00

**SECOND QUARTER:**

- 1.Nevada Partners, Inc. (NPI).....\$50,952.58
- 2.GNJ Family Life Center (GNJ).....\$90,690.00

8. **INFORMATION:** Regional Sector Update – Reports will be given regarding updates in Healthcare, Green Economy.....9
9. **INFORMATION:** ADW/Emerging Markets Update.....31
10. **INFORMATION:** RFP 101 Workshop. Information on upcoming workshop to educate interested parties in the process of responding to a Request for Proposals released by *workforce CONNECTIONS*.....47

**11. SECOND PUBLIC COMMENT SESSION:** Members of the public may now comment on any matter or topic, which is relevant to or within the authority or jurisdiction of the Board. You may comment now even if you commented earlier, however, please do not simply repeat the same comment you previously made. Please clearly state and spell your name and state address for the record. Each comment will be limited to three (3) minutes.

**12. Adjournment**

**ADULT & DISLOCATED WORKER COMMITTEE**

**January 11, 2012**

**9:30 AM**

*workforce* **CONNECTIONS**

Conference Room

7251 W. Lake Mead Blvd., Suite 200

Las Vegas, NV 89128

**Members Present**

Valerie Murzl - Chair  
Hannah Brown  
Maggie Arias-Petrel

**Members Absent**

Dan Rose, Vice Chair  
Charles Perry

**Staff Present**

Heather DeSart  
Debra Collins  
Kelly Ford  
Jeannie Kuennen  
Emilio Pias

**Others Present**

Sherri L. Kidd – DRHS WIA Grant Program  
Thresea Kaufmann –NHA Health Care 20/20  
Norma Zamora – BCA  
Wendy Villanueva –ISIS  
Capucine Holmes –GNJ Family Life Center  
Helicia Thomas –GNJ  
Magda Hirsch – Goodwill of SN  
Lynda Parven – DETR  
Elizabeth McDaniels – Goodwill  
Vincent Miller – Goodwill  
Penny Hagen –FIT  
Jake McClelland – FIT

(It should be noted that not all attendees may be listed above

**Agenda Item 1 - Call to Order, confirmation of posting, roll call**

Chair, Valerie Murzl, called the meeting to order at 9:37 a.m. Staff confirmed the meeting had been properly noted and posted in accordance with the Nevada Open Meeting Law. Roll call was taken, no quorum was present at this time so the information part of the meeting was addressed first.

A quorum was present at 9:53am at which time the business portion of the meeting was conducted.

**Agenda Item 2 –ACTION: Approval of agenda with inclusions of any emergency items and deletion of any items.**

*Motion was made to accept the agenda as presented by Hannah Brown, and seconded by Maggie Arias-Petrel. Motion was carried.*

**Agenda Item 3 - First Public Comment Session:**

None.

**Agenda Item 4 – ACTION: Approve the Adult & Dislocated Worker Committee meeting minutes of November 9, 2011.**

*Motion was made to approve the meeting minutes of November 9, 2011 as presented by Hannah Brown, and seconded by Maggie Arias-Petrel. Motion was carried.*

**Agenda Item 5 – ACTION: Approve the Adult & Dislocated Worker Committee 2012 meeting schedule.**

*Motion was made to approve the Adult and Dislocated Worker Committee meeting schedule by Hannah Brown, and seconded by Maggie Arias-Petrel. Motion was carried.*

**Agenda Item 6 – ACTION: Accept staff’s recommendation to allocate \$1.6 million dollars of WIA Formula funds as a strategic reserve to be used for additional funding awards based on meeting or exceeding established performance goals. Direct staff to increase funded partner contracts using these funds and report contract amendments at the subsequent Adult and Dislocated Worker Committee meeting**

Heather DeSart began addressing this item by reminding the committee of the success that we experienced when an incentive plan was implemented in 2010. That incentive plan was centered on meeting or exceeding criteria for training goals and resulted in almost double the number of trainings in both Adult and Dislocated Workers categories by the Funded Partners. Because we considered that effort a successful one, we wanted to do it again this year; this time centered on performance. The criteria that the Funded Partners needed to meet included: the client needed to have a wage of \$11.00 an hour, they have to work at least 32 hours a week with proof of the placement (check stub, The Work Number, etc.) and they needed to be in permanent, unsubsidized employment, not through a temporary agency.

The Funded Partners provided proof that they had met the criteria, they were then ranked highest to lowest, and then they can request additional funding based on that. Ms. DeSart stated that the request today was to approve the recommendation to set aside the funds so that we could continue these successful incentive processes and be able to do that independently as we successfully requested of the committee last year, bringing reports back to the committee so that they would remain fully informed

A discussion commenced regarding the formula that was used for awarding the amounts, who the four Funded Partners who successfully met the criteria were, the amount of money that would be used and allocated for the program year, what the successful Funded Partners would be able to use their incentive funds for. The four Funded Partners are: FIT, Latin Chamber of Commerce Community Foundation, Goodwill Industries, and Nye Communities Coalition.

Following this discussion, Chair Valerie Murzl requested a motion, of which there was none. Committee member Hannah Brown stated that her hesitation was that she did not know enough about it, she was not saying she was opposed but that she did not know enough about it; Ms. Brown further stated she had no questions regarding this item.

Committee member Maggie Arias-Petrel stated she’d have a conflict of interest due to her involvement with the Latin Chamber; Committee member Hannah Brown voiced the same conflict.

A brief discussion commenced regarding the fact that the agenda item was not to award to the specific Funded Partners but to set aside the funds for use. Following the discussion, Chair Valerie Murzl noted that due to the inability to take action due to the conflicts of the committee members present, the action would be moved ahead to the full board for approval.

**Agenda Item 7 – INFORMATION: Nevada Hospitals Association –Healthcare 20/20 Update**  
Bill Welch, President & CEO, Marissa Brown, Workforce and Clinical Services Director, and Thresea Kaufman, Program Manager/Case Manager addressed the committee and expressed their happiness and excitement about being able to implement the Healthcare 20/20 program here in Southern Nevada.

With NHA’s involvement this becomes a statewide program to assist new grad nurses. Mr. Welch informed the committee that NHA is the association that represents all of the hospitals throughout the state of Nevada; they have quarterly meetings with all of the CEO’s, quarterly meetings with all of the Chief Nursing Officers, and quarterly meetings with other clinical staff in the hospitals; he believes that NHA is a good fit to implement the Healthcare 20/20 program because of their relationships with all of the hospitals.

Mr. Welch further stated that he knew that there had been some question as to how NHA would manage a Southern Nevada initiative from Northern Nevada; NHA has opened a local office, retained highly qualified, motivated, staff who are passionate about the work, and both Mr. Welch and Marissa Brown travel to Nevada on a regular basis. Mr. Welch noted that there would be regularly monthly meetings to ensure continuity of functions performed out of the Southern office which will directly handle client services and the Northern office which will handle the fiscal management of the program.

The committee members voiced their approval that the needs of Southern Nevada would be of paramount concern not only during the implementation of this transition, but also as the program continues to run under the auspices of the Nevada Hospital Association.

**Agenda Item 8 –INFORMATION: Funded Partner Update**

Heather DeSart, Deputy Director, Workforce Investment Systems, addressed the committee and gave an overview of the performance breakdown charts and graphs that were included in the committee packet. The charts and graphs were illustrations of the local and statewide common measures performance for PY2009 and PY2010. The charts and graphs helped to illustrate the fact that the Adult and Youth programs were meeting all of their performance measures and in some cases exceeding them on both the local and statewide levels. Ms. DeSart noted that while both measures had been met, there were still opportunities to increase the Dislocated Worker wage and the Literacy and Numeracy gains for Youth.

Ms. DeSart then moved on to discuss the chart and graph which detailed the numbers for 2<sup>nd</sup> quarter performance culled from NVtrac. Ms. DeSart stated that as of this date we were on track with 62% of the participants we are obligated to serve for PY 2011; of the participants who have been placed into employment we were getting a great average wage in both the Adult and Dislocated Workers categories.

John Ball, Executive Director, thanked the staff and the Funded Partners for all of the good work they've been doing and stated that it was particularly noteworthy since the Funded Partners had achieved these numbers in the worst regional economy in the country.

Ardell Galbreth, Deputy Director, Operations informed the committee that *workforce CONNECTIONS* had been awarded \$75,000 in incentive funds as a result of the successful performance numbers referenced by Ms. DeSart.

**Agenda Item 9 – Second Public Comment Session:**

Cornelius Eason, Director of Regional Strategies, gave the committee information regarding the new Layoff Aversion Business Services being offered by *workforce CONNECTIONS* and introduced the two Business Consultants, Janice Greer and Kenadie Cobbin Richardson, who are tasked with rolling out the program.

***The Meeting adjourned at 10:22am***

## **Introduction**

The Second Chance Act (SCA) was signed into Public Law 110-199 on April 8, 2008. The Act encourages practices that will reduce recidivism, and lead to the successful reintegration of incarcerated individuals into their communities. Furthermore, the SCA mandates strategic plans, roles of partners and stakeholders and collaborations.

## **Background**

Evidential data indicates that Nevada has a significant population of individuals, both Adult and Youth who could benefit from Re-Entry Services, i.e., employment and training, counseling (such as life skills, substance abuse, career, etc.), high school/GED, and work readiness. Moreover, studies reflect that incarcerated individuals transitioning back into their communities with little assistance are more likely to re-offend.

During PY 2010, workforceCONNECTIONS (wC) operated two “in-house” re-entry programs, one each for Adult and Youth Services. This experience has provided wC with invaluable information (such as issues and challenges) that will help wC provide proper oversight and technical assistance to contractors. Therefore, wC staff believes the Re-Entry Programs can now be sustained through community partnerships, and plans to publish an RFP, soliciting interested parties to submit proposals for the consideration of Adult Re-Entry Services and Youth Re-Entry Services.

## **Staff Request**

workforceCONNECTIONS staff would like to publish a Request for Re-Entry Proposals for both Adult and Youth Services in an amount not to exceed \$1,000,000. The tentative RFP schedule would be as follows:

**Release RFP:** March 7, 2012

**Bidders' Conference:** March 13, 2012, 10:00 a.m.

**Proposals Due:** April 20, 2012, 12:00 p.m.

**Technical Review:** April 20, 2012, 2:00 p.m.

**Evaluations of Proposals:** April 23 – May 4, 2012

**Recommendations to ADW and YC:** May 16, 2012

**Recommendations to Board:** May 24, 2012

**Contract Negotiation Period:** June 11 – June 18, 2012

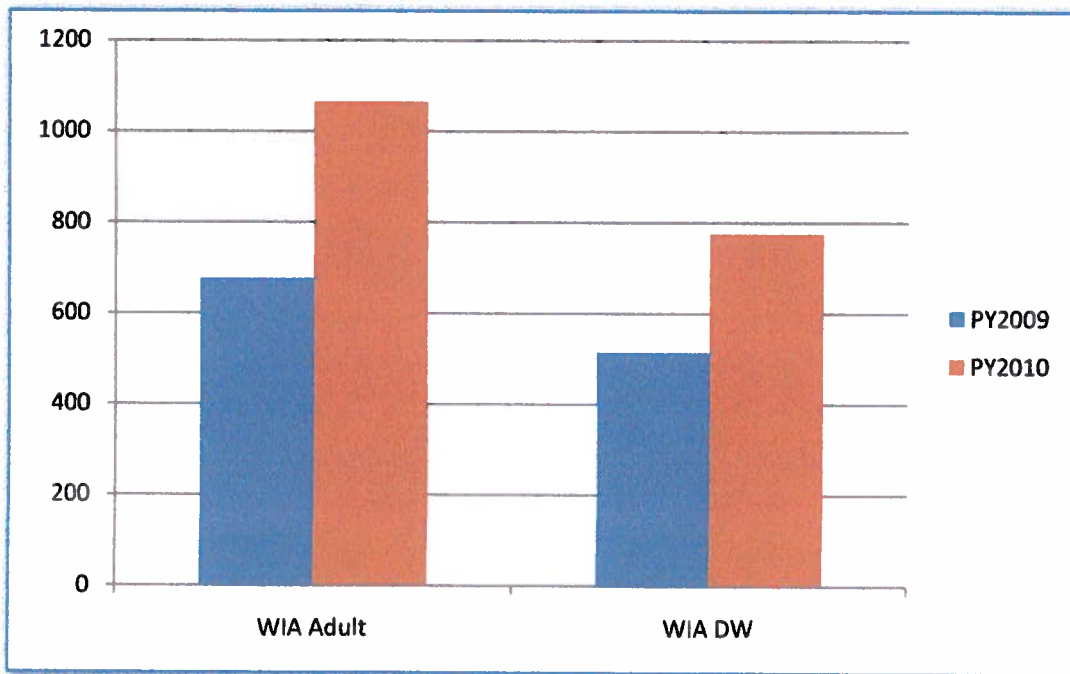
**Contract Agreement Begins:** July 1, 2012

*(Dates are subject to change)*

## WORKFORCE CONNECTIONS

During Program Year 2010 WC awarded additional funds to those ADW Funded Partners who met and exceeded training goals by placing participants into a training activity, either On-the-Job Training or Occupational Skills Training. Overall, the ADW Funded Partners increased total training activities by 65% from Program Year 2009 to Program Year 2010.

TRAININGS:		
FUND	PY2009	PY2010
WIA Adult	676	1064
WIA DW	514	774
TOTAL:	1190	1838





# PY11 Additional Funding Methodology and Example

**New Enrollment Exit Requirement:**  
 75% of total enrollments should be exited to limit participants carried forward to the next program year to no more than 25% of current year enrollments  
 Example: if required to enroll 133 participants, no more than 33 should be carried into the next program year

**Performance Measures:**

- Adult – 63% of exits entered into employment
- DW – 70% of exits entered into employment

**Additional Funding Criteria:**

- Participant earns at least \$11.00 per hour
- Participant works at least 32 hours per week
- Verified by paycheck stub or work number verification
- Permanent, unsubsidized employment
- PY11 enrollments only

## METHODOLOGY

**New Enrollments Split by Quarter:**

- 15% Quarter 1
- 25% Quarter 2
- 30% Quarter 3
- 30% Quarter 4

**New Enrollment Total Exits:**  
 75% of each quarter's enrollment

**New Enrollments Exited Into Employment:**  
 75% of Total Exits

**Additional Funding Criteria:**  
 75% of those exited into employment must meet these criteria for funded partners to be eligible

## EXAMPLE

**Funded Partner Enrollments=133:**

- Quarter 1 - 20
- Quarter 2 - 33
- Quarter 3 - 40
- Quarter 4 - 40

**New Enrollment Total Exits:**

- Quarter 1 - 15
- Quarter 2 - 25
- Quarter 3 - 30
- Quarter 4 - 30

**Exits into Employment:**

- Quarter 1 - 11
- Quarter 2 - 19
- Quarter 3 - 22
- Quarter 4 - 23

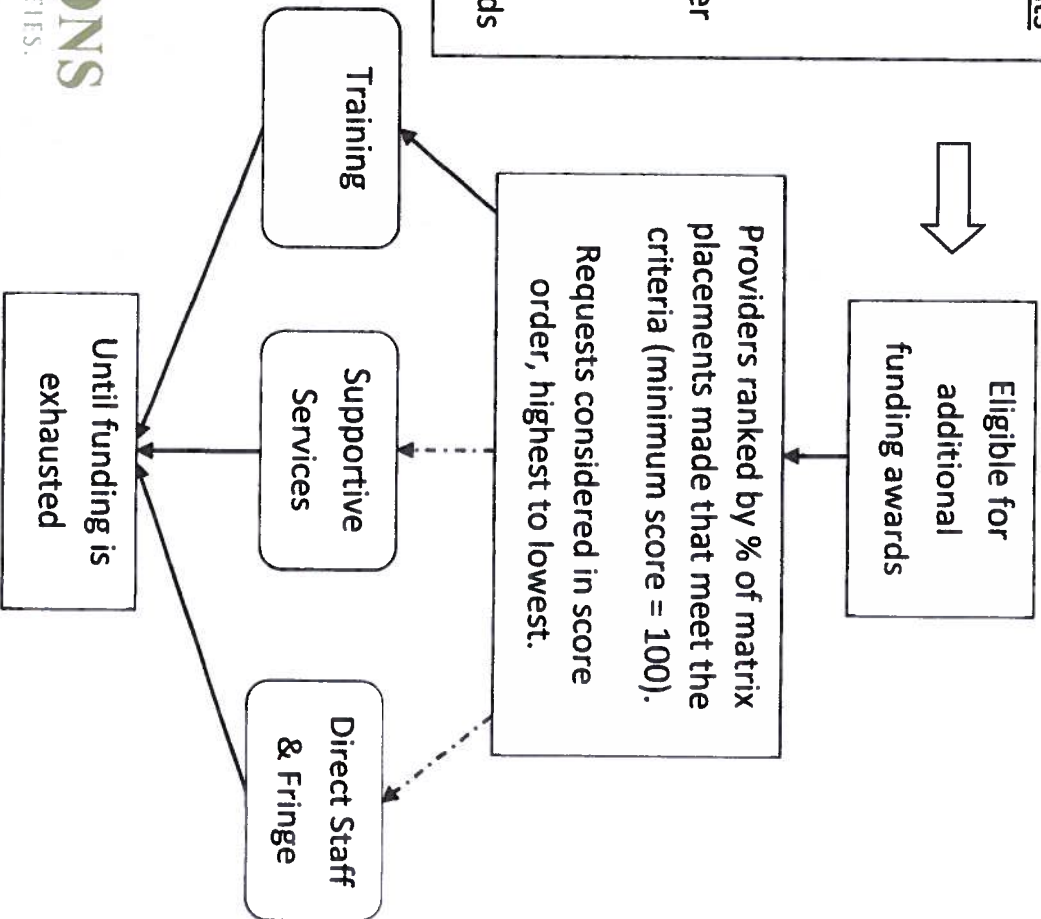
**Exits that Meet Criteria:**

- Quarter 1 - 8
- Quarter 2 - 14
- Quarter 3 - 17
- Quarter 4 - 17

# Program Year 2011 Additional Funding Flowchart

For each quarter:

- Provider meets or exceeds contracted placements per matrix with the following criteria:
- Participant earns at least \$11.00 per hour
  - Participant works at least 32 hours in any one week in the first month of the next quarter
  - Provider has paycheck stub or work number verification with this information
  - Placement is in permanent, unsubsidized employment not with a temporary service
  - For new enrollments only, not carryforwards



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## ADDITIONAL FUNDING RESULTS FOR QUARTER 1 OF PY11

Provider Rank	Provider Name	Combined Score	Score % of Total	Total Funding Requested *	Amount Recommended *
1	FIT	113	26.5%	\$ 216,000.00	\$ 216,000.00
1	Latin Chamber	113	26.5%	\$ 100,000.00	\$ 100,000.00
2	Goodwill	100	23.5%	\$ 77,696.00	\$ 77,696.00
2	NyE CC	100	23.5%	\$ 52,548.00	\$ 52,548.00
<b>Totals:</b>		<b>426</b>	<b>100.0%</b>	<b>\$ 446,244.00</b>	<b>\$ 446,244.00</b>

## ADDITIONAL FUNDING RESULTS FOR QUARTER 2 OF PY11

Provider Rank	Provider Name	Combined Score	Score % of Total	Total Funding Requested *	Amount Recommended *
1	NPI	143	58.8%	\$ 50,952.58	\$ 50,952.58
2	GNJ	100	41.2%	\$ 90,690.00	\$ 90,690.00
<b>Totals:</b>		<b>243</b>	<b>100.0%</b>	<b>\$ 141,642.58</b>	<b>\$ 141,642.58</b>

Total Funding Requested - This amount represents an "amount not to exceed."

Amount Awarded - The amount recommended is contingent upon final budget negotiations.

# Future of Nursing: Campaign for Action

Action Coalition: Application for Wave IV

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Submitted by the Nevada Health Care Sector Council  
and the Nevada Alliance for Nursing Excellence



# **Future of Nursing: Campaign for Action**

**Action Coalition:  
State of Nevada  
Application for Wave IV**

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## Nevada Action Coalition Application

This application is submitted on behalf of the Nevada Alliance for Nursing Excellence (NANE) and the Nevada Health Care Sector Council (NHSC) as co-lead organizations.

### Section 1: Contact Information and Background

#### Contact Information:

**Nurse Organization Lead Representative:** Jennifer Richards, PhD, RN, CNRN  
Chair, Nevada Alliance for Nursing Excellence  
1155 Mill St.  
Reno, Nevada 89502  
Office: 775-982-4151  
Cell: 775-224-0494  
Email: [JRichards@renown.org](mailto:JRichards@renown.org)

**Non-Nurse Lead Organization:** Linda Yi, RNC, MPA  
Project Director Nevada Health Care Sector Council  
7251 W. Lake Mead Blvd.  
Las Vegas, NV 89128  
Office: 702-636-2344  
Cell: 702-461-4669  
Email: [lyi@nvworkforceconnections.org](mailto:lyi@nvworkforceconnections.org)

### Background of the Co-Lead Partnership (Paragraph-12 sentences)

#### The Nevada Health Care Sector Council

The Nevada Health Care Sector Council (NHSC), composed of 28 stakeholders representative of Nevada's healthcare, labor, education, business and governments sectors was established in response to Nevada Legislation (SB239) for the purpose of identifying job training and education programs to best meet regional economic development goals.

The primary focus of the NHSC, during the previous year, has been the administration of a HRSA grant to plan activities leading to healthcare workforce development strategies at the state and local level to increase the primary care health workforce over a 10-year period by 10-25%.

The NHSC is currently exploring funding/grant opportunities to meet the health care career challenges identified by the research conducted through the HRSA grant.

\*See (Appendix A) for a list of NHSC members and their affiliations.

### The Nevada Alliance for Nursing Excellence

The Nevada Alliance for Nursing Excellence (NANE) is a professional nursing organization that aims through its vision to develop, "A premiere system for nursing education and practice providing for expertise and optimal capacity of the nursing workforce to ensure a healthy Nevada". NANE members include nursing leaders from academic and clinical practice settings throughout Nevada.

\*See (Appendix B) for a list of NANE members and their affiliations.

### Partnership

Four members of NANE including the Executive Director of the Nevada State Board of Nursing (NSBN), the President of the Nevada Nurses Association (NNA) and the co-chair of NANE sit on the NHSC. NANE leadership has provided formal updates to NHSC at each of its meeting keeping its partner informed of ongoing activities and accomplishments. Additionally, NANE has focused the majority of meeting agendas on the recommendations of the FON Campaign.

Non-nursing members of the NHSC have provided information and support on legislative initiatives and educational opportunities as well as aired concerns about barriers to care in Nevada to the NANE membership. The NHSC has pledged to work with NANE to establish sub-committees working toward solutions to barriers to healthcare in Nevada that can be enhanced with business, education, community and legislative members support.

## **Section II: Action Coalition Goals and Objectives: (Limit a total of 100 words for this section)**

The major goal of the Action Coalition will be to facilitate the collaboration of professional nursing, business, education and labor organizations on a shared vision and strategic plan to advance the Campaign's recommendations.

### **Short Term: 6-12 months**

- Establish an Action Coalition Executive Committee
- Project "Dinner Table" celebration and fundraiser during Nurses Week 2012
- Establish Action Coalition governance structure
- Recruit interdisciplinary, geographically balanced stakeholders. Development of sub-committees with stakeholders from NHSC and NANE to lead work on each IOM recommendation
- Educate stakeholders on IOM recommendations
- Complete strategic plan based on comprehensive assessment of current environment
- Develop funding infrastructure and initiatives
- Support the implementation of the Nursing Education Clinical Scheduling Project

**Long Term: >12 months**

- Develop business plan, including budget, for strategic plan implementation
- Implement plan to target identified recommendations
- Develop marketing/media plan
- Long-term sustainability plan
- Support the ongoing utilization of the Nursing Education Clinical Scheduling Project
- Actively participate in the adoption of legislative changes to bring Nevada into compliance with the FON recommendations, i.e. encouraging an increase in BSN prepared nurses, allowing nurses to practice to the full extent of their education and competence.

**Section III: Leadership and Support (Limit each answer to a total of 100 words per question)**

**1) Describe the nurse and non-nurse leadership's commitment to and understanding of overall Future of Nursing: Campaign for Action goals and objectives. Discuss their respective skills, talents, ability to work with divergent interests and time devotion to the Campaign and Action Coalition activities.**

NANE member and NHSC co-chair, Debra Scott, MSN, RN, FRE, has served as the Executive Director for the Nevada State Board of Nursing (NSBN) for the past 10 years. She has served on the Board of Directors for the National Council of State Boards of Nursing since 2009. In these roles, she is working toward the implementation of the IOM FON recommendations nationally and in the state of Nevada. Most recently, under Ms. Scott's direction, the NSBN passed regulations to allow nurses to practice more fully by broadening the definition of delegation and by clarifying the role of advanced practitioners of nursing.

NHSC member Debra Toney, PhD, RN, FAAN, has been involved with the Campaign for Action from its inception, providing testimony during stakeholders meetings and participating in the Champion Nursing Council and group meetings. Dr. Toney is a RWJ Executive Nurse Fellow Alumni.

NHSC and NANE membership represent diverse health care organizations and educational systems and are the major influential healthcare leaders within Nevada.

**2) Describe the nurse/non-nurse leadership's ability to engage a broad range of diverse stakeholders. Give examples of their current activities, or those proposed in their Action Coalition. How deep are the partnerships? Please provide a listing of existing and/or potential stakeholders as an Appendix to this application. Please provide name, information about their credentials, position and affiliations relevant to this effort. Examples of stakeholders include: business leaders, educators, students, health care providers, funders, providers, policy leaders, consumer groups and any grantees of the Robert Wood Johnson Foundation (Partners Investing in Nursing's Future; Executive Nurse Fellows, Nurse Faculty Scholars, Aligning Forces for Quality)**

See (Appendix C) for a list of current stakeholders



See (Appendix D) for a list of potential stakeholders

The attached extensive list of stakeholders represents legislators, labor, education, business, and health care leaders. Due to Nevada's relatively small population many of these stakeholders have collaborated together previously on healthcare projects, an advantage toward developing a comprehensive Action Coalition strategic plan.

Current activities include extension of nurse residencies throughout the state, clinical instructor training, a legislative effort to remove of scope of practice barriers, and a BSN in 10 initiatives. The goal is to bring all stakeholders under the umbrella of the Action Coalition, uniting to achieve common strategic goals as outlined by the Future of Nursing: Campaign for Action.

In addition, NANE is actively involved in initiating a Nursing Education Clinical Scheduling Program to maximize the availability of clinical education sites for nursing programs. A statewide Nursing Student Orientation Program is planned for standardizing requirements for students who are educated in various clinical sites.

The NSBN is working closely with the University of Nevada, Las Vegas and a large hospital system to pilot a Dedicated Education Unit to enhance nursing education in Nevada.

**3) *Describe the Action Coalition leadership's experience working with the media and/or serving as a communication contact in any previous or current capacity (professionally or as a volunteer)***

Workforce Connections, a Department of Labor Workforce Investment Board, and a stakeholder, will provide the Action Coalition with content creation support and access to the media Connections distributes to and maintains personal contact with state, local, and industry specific media outlets and engages the community-at-large in industry and workforce discussion through original content creation and distribution including a semi-weekly blog, a weekly radio show, in-house video documentation capabilities, and active engagement with the community through social media outlets. These efforts are fully accessible to the Action Coalition and will be mobilized to support and increase participation and awareness of their efforts.

Several state newspapers and TV stations have indicated their willingness to become stakeholders upon official designation as an Action Coalition.

**4) Describe and discuss resource availability (potential or real) including : local, state and national funding sources, donation in kind for space, rent, equipment, personnel, etc. and ability to attract funders to this efforts.**

The Nevada State Board of Nursing has approved an initiative that will allow nurses to donate funds to the Action Coalition as part of their online license renewal process. The NSBN will act as the conduit for the funds and has pledged to administer this program at no cost to the Coalition.

Strategies are being developed to engage a wider cadre of stakeholders to support fundraising efforts. We have the support of our state Department of Employment, Training and Rehabilitation for future financial assistance to support the work of the Action Coalition.

Workforce Connections will donate office space, computers, communication equipment and supplies. Meeting space and videoconferencing are available to the coalition in several locations statewide.

**5) What structures are in place to carry out the work? Describe the extent of the infrastructures, if any in place, to carry out this work including: existing coalitions and networks, local and state activities, area nursing schools and other supportive institutions and their work focused on the recommendations, businesses and Chambers of Commerce involved in this work.**

The main structure in place is the presence of Nevada Senate Bill 239 that places the Nevada Health Care Sector Council in statute guaranteeing continued work on the advancement of the health care workforce in Nevada.

NANE currently meets on a quarterly basis, alternating meetings between northern and southern Nevada. NANE will commit the majority of its agenda to furthering the work of the Action Coalition. Sub-committees with representatives from NANE and NHSC will be developed to lead work on specific campaign recommendations.

The Nevada Health Care Council meets monthly and has significant access to legislative health care committees, nursing coalitions, Chambers of Commerce and regulatory boards.

**Section IV: State Assessment—Readiness and Feasibility** (Limit each answer to a total of 100 words per question)

**1) Describe the readiness of your state to advance issues related to the Future of Nursing: Campaign for Action recommendations, including access to care/practicing at full scope, education progression and transformation, inter-professional collaboration, diversity and workforce data. What is the current state environment in these areas? What are the opportunities and challenges?**

The achievement of access to care/practicing at full scope will be the most challenging of the recommendations.

Legislation recently passed requiring national certification for Advanced Practice Nurses (APRNs). This is the first step toward meeting the requirements of the National Council of State Boards of Nursing (NSCBN) Consensus Model for APRN Regulation, Licensure, Accreditation, Certification and Education.

Education progression and transformation opportunities in place include:

- Online RN-BSN programs throughout the state
- Collaborative DNP program between UNR and UNLV
- PhD program at UNLV
- Statewide Nurse residency model
- Affiliation agreement established by the Nevada System of Higher Education Nursing Programs to facilitate educational progression throughout the system.

The NSBN has begun to collect Minimum Data Set information at the time nurses renew their licenses. The NSBN Board staff is meeting with Dr. Packham from the University of Nevada, School of Medicine, Department of Health Policy Research, to gather, organize, interpret, and apply statewide nursing data.

Several agencies represented by members of the NHSC are collaborating on a statewide Innovation Challenge grant addressing access and coordination of care of the complex patient.

**2) *What are the most significant deterrents to success of your Action Coalition?***

Nevada is a largely rural state with two large urban areas (Reno and Las Vegas) located at opposite ends of the state. Long distances between the urban areas require air travel which is expensive and has frequently led to isolationism and the great "north/south/rural divide". Significant economic disparity exists between the rural and urban communities further hampering communication and leading to geopolitics. In order for the Action Coalition to be successful, stakeholders in all areas of the state must be recruited, goals and timelines set and stakeholders opinions heard and valued.

**3) *Describe your Action Coalition's ability to address gaps in readiness.***

Significant infrastructure is currently in place to begin the work of the Action Coalition. Sustainable funding is being addressed for long term success. Willingness of current and potential stakeholders to partner has been overwhelming. Stakeholders recognize that Nevada has attempted to make progress through individual organizational efforts without significant improvement to Nevada's overall national health care ranking of 47/51. Nevada is prepared and committed to begin the work of raising the level of health care in our state by developing a strategic plan to implement the IOM recommendations.

**4) *How would you describe the feasibility of attaining your goals and objectives in your state? Are some easier than others?***

The short term goals and objectives are attainable. Nurse leaders in regulation, education, and clinical practice have embraced the IOM recommendations and have committed to working together to achieve the stated goals.

Attainment of the long term goals will be more challenging, requiring additional resources, compromise, and legislative support. However the lead organizations, with the incredible support of our stakeholders from northern, southern and rural Nevada, as evidenced by the 45 plus attached letters, of support are evidence that Nevada is ready and willing to address the challenges to nursing that health care reform will bring.

**5) *What activities has the Action coalition participated in related to the Campaign since the recommendation were released in October 2010, if any?***

**Recommendation #3---Nurse Residency**

- A new graduate *Transition into Practice* program has been implemented throughout Nevada including rural Nevada.

**Recommendation #4-BSN**

- NANE voted to rewrite their bylaws to include a position statement supporting the concept that all graduates from Associate Degree Nursing Programs attain their BSN within ten years of initial licensure.

**Recommendation #6- Lifelong learning**

- NANE recently piloted a Clinical Faculty Academy to assist new faculty in become effective clinical instructors
- NNA hosted the first annual initiative of the Future of Nursing Professional Progression Awards

**Recommendation #8 –Data**

- University of Nevada School of Medicine (UNSOM) is leading a collaborative effort to establish minimum data sets for occupations identified by NHSC.
- The NSBN Board staff is meeting with Dr. Packham to collaborate in gathering, organization, interpretation, and application of the Nevada statewide nursing data.

**6) *Has the Action Coalition developed action or implementation plans (not required at this stage)? If so, please briefly describe below and attach as an Appendix to this application.***

NHSC and NANE are reaching out to stakeholders, introducing IOM recommendations at professional meetings statewide.

The Nevada Organization of Nurse Leaders (NONL) annual conference in October 2011 featured Dr. Linda Burnes Bolton, DRPH, RN, FAAN as a keynote speaker. Dr. Bolton presented an update on the

efforts to implement the IOM recommendations and members of NANE and NHSC participated in a discussion of opportunities to lead changes in Nevada to advance health care.

NANE chair, Jen Richards, PhD, RN spoke at an information session of the Nevada Nurses Association about the work being done in Nevada toward the campaign recommendations.

NANE and NHSC leaders have been invited to the Nevada Student Nurses Association Annual Meeting in March to discuss the campaign and work in Nevada. The Student Nurse Association leaders have indicated their eagerness to become involved in the work.

**7) *Of your potential Action Coalition partners, which individuals or organization have done work that prepares them for leadership in issues related to the Future of Nursing: Campaign for Action recommendation, including access to care/practicing at full scope, education progression and transformation, inter-professional collaboration, diversity and workforce Data? What are the individuals' backgrounds that prepare them for leadership in their respective areas?***

See (Appendix G) for Curriculum Vitae of Nevada Health Care Leaders listed below:

#### **Leadership**

- Debra Toney, PhD, RN, FAAN  
Robert Wood Johnson Executive Nurse Fellow Alumni
- Jennifer Richards, PhD, RN  
Chair Nevada Alliance for Nursing Excellence

#### **Workforce Data**

- John Packham, PhD  
Director of Health Policy Research  
University of Nevada School of Medicine (UNSOM)
- William Anderson  
Chief Economist  
Department of Employment, Training and Rehabilitation (DETR)

#### **Access to Care/Practicing at Full Scope**

- Debra Scott, MSN  
Executive Director  
Nevada State Board of Nursing (NSBN)

January 27, 2012

Mary Greene  
Grants Management Officer  
Office of Acquisition and Grants Management  
Centers for Medicare and Medicaid Services  
U.S. Department of Health and Human Services  
Mail Stop B3-30-03  
7500 Security Blvd, Baltimore, MD 21218

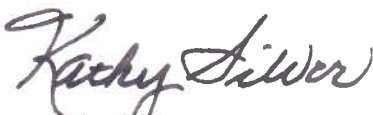
Dear Ms. Greene:

Attached please find a Health Care Innovation Challenge application, for letter of intent number 6914 which will enable the development of a new model of care delivery in Nevada through Telehealth Outreach and Care Coordination. The Culinary Health Fund (an affiliate of Unite HERE Health) will participate in this project along with the University of Nevada School of Medicine (Department of Psychology) and the Center for Health Statistics and Informatics, American Well (Telehealth), Dovetail Health (TCM), Workforce Connections (Workforce Development-Southern Nevada) and Nevadaworks (Workforce Development-Northern Nevada).

The total funding request for the grant is \$16,966,607.15 for 3 years. If funded, the agency that will administer the cooperative agreement for this program is Workforce Connections. Our role will focus on the development of Health Navigators and support for physician recruitment into the project.

As the Authorized Organization Representative (AOR) regarding this Federal opportunity, please contact Bobbette Bond as the principal contact person for the grant with any questions about the project. We look forward to this partnership.

Sincerely,



Kathy Silver  
President, Culinary Health Fund

## **Project Abstract**

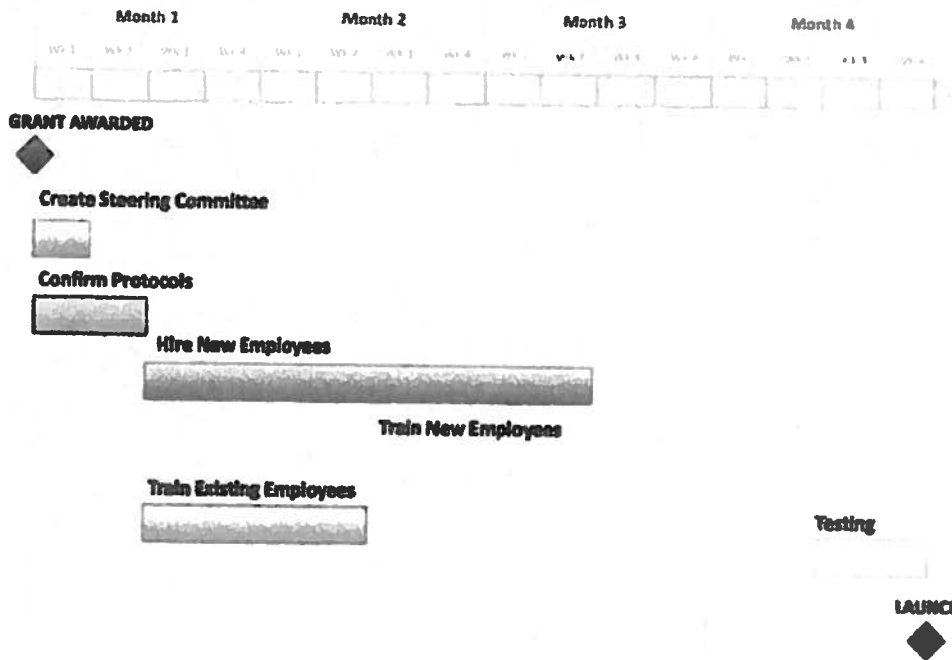
**PCMH Link is a statewide public-private collaborative organized to facilitate telehealth outreach and care coordination for complex care patients. The PCMH Link initiative will provide integrated, best practice solutions in four areas: 1) Telehealth, 2) Transition, 3) Complex Care Management, and 4) Behavior Compliance. In these areas, we will be utilizing leading organizations and collaborative methodologies to rapidly deploy high quality, low cost healthcare to the identified patient where and when they need it. This innovative approach will improve access and patient engagement, and supports targeted, appropriate interventions while advancing continuity of care through bi-directional data exchange and integration with the core delivery system, providing significant cost savings when compared to the same care, in traditional settings. PCMH Link will integrate the best practices in high tech, with high touch coordination of care, to deliver optimal performance in improving health outcomes for complex and transitional care patients, including Medicare, Medicaid and CHIP. Telehealth kiosks will be deployed in convenient locations to help meet the diverse needs of access for patients, members, employees and their dependents.**

**In collaboration with a leading telehealth provider, PCMH Link Online Care (POC) represents a complete telehealth solution that allows patients and healthcare providers to have immediate, live “online visits” through video, secure text chat or phone. This online care can be deployed in clinical settings as well as in the patients’ homes or workplace— extending provider’s primary and chronic care facilities beyond their bricks and extending their standard hours of availability. Additionally, POC offers integration of diagnostic and biometric devices, thus increasing clinical capabilities and creating clinically informed patient interactions, while supporting wellness initiatives at the workplace. PCMH Link online care will also support behavior compliance, through ACT therapy, to further improve clinical pathway adherence and patient health outcomes. Collaboration, innovation, evidenced-based results, rapid deployment and reliable reporting are key elements for success. The partners for this grant, provide a broad based of knowledge, expertise and proven results, in the aforementioned areas.**

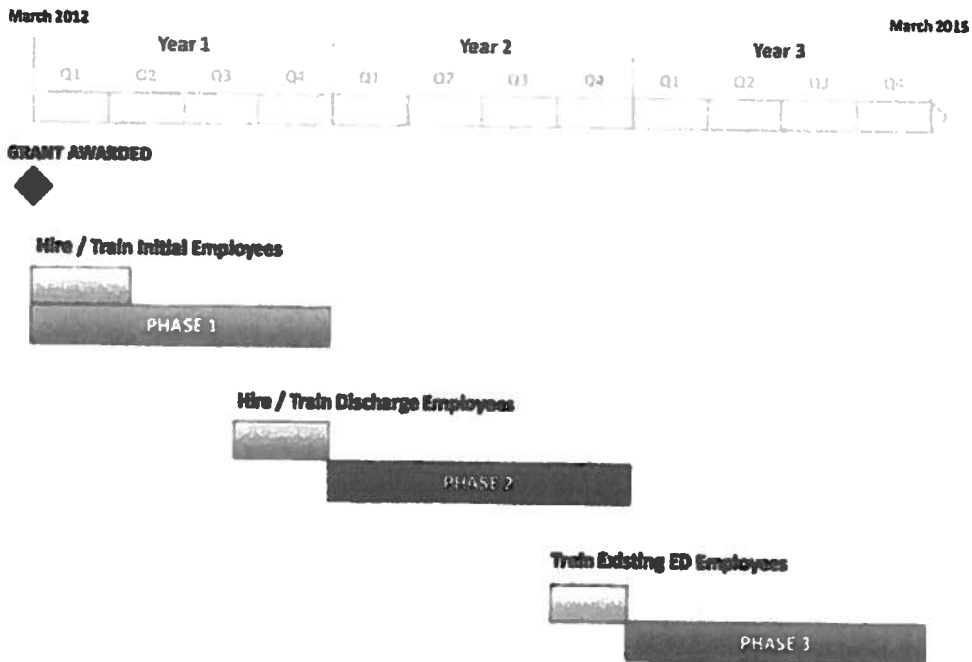
**PCMH Link will initially focus on engaging 15,000 complex care patients through telehealth outreach to improve health outcomes for the following conditions; Diabetes, COPD and Cardiovascular illnesses. Medicare, Medicaid and CHIP patients will be represented in the population of patients and insured dependents including their children. The focus of PCMH Link is to bring coordinated healthcare to the patient, at their convenience and in a timely manner. The attributes of this methodology will reduce high costs incidents of ER visits, hospitalizations and readmissions.**

**To support the healthcare workforce expansion in this emerging area, PCMH Link will coordinate efforts with leading healthcare partners and stakeholders in the public, non-profit, academic and private sectors. PCMH Link will generate an estimated three-year direct cost savings of approximately \$23M (net approx. \$6M), with an ROI, after three years, of approximately 3.5:1. To sustain the project, after three years, PCMH Link will have commercialized this initiative, as an integrated, socially responsible HR/Health Risk Management solution, for Labor Trust and Self Insured employers to further economic and social value for all stakeholders, while reducing systemic healthcare cost and risk.**

## Implementation Timeline (4 Month)



## Implementation Timeline (3 Year)





## **PCMH Partners**

### **Culinary Health Fund**

The Culinary Health Fund in Las Vegas is the largest affiliate of Unite HERE Health, a Multiemployer Taft Hartley Fund, governed by a Board of Trustees representing Labor and Management employers in the hospitality industry. Our parent, Unite HERE Health, represents about 240,000 lives nationally.

The Culinary Health Fund has spent the last 20 years developing an exemplary health plan for over 120,000 Las Vegas residents, providing comprehensive benefits with small cost share for participants and efficient and effective care delivery oversight. The Fund has two extremely strong focus areas: a Care Delivery and Customer Service. With nearly 50% of our population Spanish-speaking and most of our population low income, we know that strong patient education requires easy access to information. The Fund operates an onsite bilingual customer service office and all materials and communications are provided bilingually as well. Care Delivery includes case managers, hospital discharge nurses, a patient advocacy program, our own physician credentialing program, and a very large provider network.

Using an extensive claims and eligibility data base home-grown over two decades, the Fund is now a leader in integrated care development in a highly fragmented health care delivery community. The Fund has created integration among separate and unrelated health care provider services through an incremental approach focused on patient need. Rather than integrate the provider groups, the Fund creates the integration internally for patients by designing and implementing programs that fill care gaps and reduce the fragmentation between services. Examples of efforts to improve health outcomes and prevent unneeded hospitalizations and emergency room visits include:

- a) next-day access physician appointment program (called Dr. Tomorrow),
- b) case management program to track co-morbid patient needs,
- c) onsite hospital discharge team to ensure patients are provided with needed post-hospital care, and
- d) specific programs for areas of high patient need, such as back pain, high-risk pregnancy, diabetes, and knee replacement. A complete summary of CHF innovations is included within the Appendix.

### **University of Nevada School of Medicine Clinics (Family Medicine and PCMH)**

The proposed PCMH clinic (see <http://www.unr.edu/nevada-today/news/2012/patient-centered-medicine>) is a satellite of the University of Nevada School of Medicine's Family Medicine Clinic, which has been serving patients and training medical students and residents in Northern Nevada since 1978. The PCMH clinic in Northern Nevada (Washoe County) will be directed by Dr. Daniel Spogen who has been very active in health care reform and improving primary care health care delivery. He has been a delegate for the state of Nevada for 20 years to the American Academy of Family Physicians. He is the "key contact" for Senator Harry Reid on health care related issues, and he is a member of the Nevada Attorney General's task force on health care reform. He has been very active and on multiple national commissions on physician education and improving health care delivery.

Each year, the clinic provides a comprehensive range of primary care services to approximately 4,000 individual patients (20,000 patient visits) of all ages with needs ranging from preventive care to hospitalization. This project is solely organized through the Department of Family and Community Medicine at the University of Nevada, School of Medicine. The University of Nevada is a state supported, land grant school with campuses in both Reno and Las Vegas. Both of these institutions offer a broad range of studies in health care including medicine, dentistry, nursing, nutrition, social work, psychology, public and community health, laboratory sciences, physical therapy and exercise science. Excellence in education and training of students and residents is a core value of our department. For the PCMH clinic to begin operation, financial resources have been committed from area hospitals, and additional public and private funding opportunities are being pursued. A preliminary investment from the Commonwealth Fund is a necessary preliminary investment to get this project underway, and clinic revenue will make this project sustainable long term. There is tremendous support from the community to undertake this project. As mentioned in the opening statement, Nevada is last in its number of primary care providers per patient population and toward the bottom of the list in health care delivery. Nevadans recognize this problem and are seeking a better system. We have

tremendous support from the Nevada Academy of Family Physicians, Saint Mary's Regional Health Center, Nevada Health Care Coalition, Washoe County School System, and the University Health System.

### **Department of Psychology**

#### ***Clinical Psychology Program***

The University of Nevada, Reno's Department of Psychology is internationally-renowned for its development of Acceptance and Commitment Therapy (ACT; developed by Foundation Professor Dr. Steve Hayes). ACT has been featured in *Time Magazine*, *Psychology Today*, and numerous academic journals. The Psychology department, under the management of Chair, Dr. Victoria Follette, will provide brief psychological educational interventions/modules for target populations identified (by the Culinary Health Fund in southern Nevada and University School of Medicine's PCMH Clinic and Family Medicine Clinic in northern Nevada) as those populations who are complex care patients. These brief interventions will have a motivational component with respect to patients' focusing on compliance with the care and management of their disease (e.g., diabetes, obesity, chronic obstructive pulmonary disease-COPD). The goal would be to increase patient adherence with medications, their overall health regimen as prescribed by their medical team, and life style changes such as diet and exercise. The increased adherence would result in decreased use of medical resources and increased patient health.

The Clinical Psychology Program at UNR is fully accredited by the American Psychological Association, and is a charter member of the Academy of Clinical Science. We seek to train doctoral level clinical scientists who have a thorough grounding in research and scholarly activities, can develop and utilize scientific knowledge, are skilled in using their critical thinking and analytic tools in problem formulation and solution generation, and have a thoroughly developed repertoire of professional competencies, including applied skills. The program emphasizes creative research and applications of psychological principles to a broad range of applied problems. The program's scholars, faculty and students alike, make significant contributions in the areas of research methodology, treatment development, outcomes research, program development, program evaluation, training, supervision, technology transfer, basic behavioral research, and philosophy of science. The program values these behaviors, regardless of the setting in which they occur.

#### ***Behavioral Analysis Program***

The behavior analysis team and the clinical psychology team will be responsible for developing instructional content, materials, and modules to for ACT skills training. The clinical psychology team will be responsible for the training content, while the behavior analysis team will be responsible for the structure of content delivery and learning assessment. The behavior analysis team will be supervised by Dr. Mark Alavosius (University of Nevada, Reno, Psychology Dept.), who has an extensive background in organizational behavior management. His expertise includes, developing instructional materials and interactive multi-media systems, incentive and feedback systems, and data control technologies and decision-support tools. Dr. Alavosius will employ a support staff of two UNR graduate students to develop automated computer teaching modules for certain aspects of ACT training. To aid in curriculum development, Dr. Alavosius will utilize consultants from Fit Learning (a private business in Nevada, Reno that specializes in educational curriculum development, assessment, and testing).

#### **Center for Research Design and Analysis**

The Center for Research Design and Analysis (CRDA) has executed the Behavioral Risk Factor Surveillance System (BRFSS) for the Centers for Disease Control and Prevention (CDC) and the State of Nevada Health since 1992. Collectively, the CRDA team has twenty years or more experience in providing BRFSS survey services and other survey, research design, program evaluation, and statistical analysis experience to local, state and/or federal governmental agencies including programming in Computer-Assisted Telephone Interview (CATI). The Center for Research Design and Analysis is not only a University-wide multi-disciplinary research design and statistical support unit, but it is also a statewide program and serves organizations locally and nationally, both public and private. The Center not only has the adequate personnel with the proper qualifications for a research project of this magnitude and scope as outlined in the FOA, but the Center also has adequate resources, access

to other personnel at the University if necessary, and space to carry out these functions. The CRDA's research support team consists the Manager of Research Services, Dr. Veronica Dahir, a Survey Manger, an Assistant Survey Manager, an IT manager, an Administrative Assistant, four supervisors (who also serve as refusal conversion interviewers), twelve interviewers, and eight faculty and graduate student research design and statistical consultants. Taken as a whole, the Center's staff represents seasoned expertise--both in terms of practical, hands-on experience and theoretically-based knowledge--in the areas of survey methodology, program evaluation, instrument development, including psychometric analyses and cognitive lab testing of all project instruments, statistical analysis, research design, coding, computer programming, program evaluation, and all phases of data gathering in both English and Spanish, management and analysis. In 2008, CRDA conducted a BRFSS web pilot survey for the State Health Division and therefore, has the experience necessary to develop a BRFSS survey for data collection for this internal evaluation component of this project.

#### **Nevada Center for Health Statistics and Informatics**

The Nevada Center for Health Statistics and Informatics (NCHSI) at the School of Community Health Sciences, University of Nevada, Reno (UNR) will be responsible for data management, analysis, and internal evaluation. Represented by core staff including the former Nevada State Biostatistician, Biostatistics faculty members, and classified Biostatistician with certified with SAS programmer certificate, the Center provides technical capacity on statistical methodology, sophisticated database design, data collection, management, analysis, dissemination and data presentation. To provide powerful data management and analysis capacity, as well as to protect confidential and human subject information, the Center is equipped with high capacity PCs and security coded door locks. In addition, the Center is equipped with a high capacity Data Server (16 TB memory size plus expendable capacity) which is singly dedicated to the Center use with HIPAA complied IT management process. The Center has developed a Centralized Health Data Warehouse for quick retrieval, linkage, and analyses of health datasets. The Data Warehouse is a repository of electronically stored data in such a fashion to make the ability to retrieve and analyze data, to extract, transform and load data, and to manage the data dictionary (an essential component) efficiently. NCHSI has worked on more than 40 different health data systems and databases related to mortalities, incidents, morbidities, health behaviors, and healthcare services, including Nevada statewide registries of cancer, hospital discharges, birth, death, autism, and behavior risk factor surveillance system.

#### **Center for Sustainable Healthcare**

The Center for Sustainable Healthcare on the campus of the University of Nevada, Reno, brings together top community, state and national leaders to share ideas and awareness of innovative, coordinated health-care solutions, including access networks and programs, care and delivery systems, and research and development projects. The Center collects and disseminates reports and information concerning healthcare innovations, and it offers professional evaluations and recommendations through ongoing dialogue. The principle that drives the Center for Sustainable Healthcare says that health-care sustainability depends upon collaboration among public, private and non-profit entities to develop and promote programs that facilitate health and well-being, while reducing costs and risks.

##### ***PCMH Link-In Kind Advisors (Steering Committee)***

- Brian Russon- Microsoft Health Solutions
- Tom Ference- Former U.S. Executive Committee. Aon Consulting
- Ken Larson- Former Global CSR Director- HP
- Tom Zumtobel- Vice President Strategy, Unite Here Health
- Steve Lebedoff- Former President, BeneTrax, Aon Worksite Solutions; PPN Health Access
- Jim Arellano- Former National Practice Leader- Mercer and United Healthcare; PPN Health Access
- Pam Sime- S.V.P. Human Resource Capital, Management Science Associates, Inc.
- Raja Banerji- Global Head - Strategic Marketing, Life Sciences, Tata Consultancy Services

- Martin Pastula- V.P. Emergency Management U.S., Government

### **American Well**

Based in Boston, Massachusetts, American Well was founded in 2006 by industry veterans Drs. Roy and Ido Schoenberg. Our mission is to transform healthcare delivery through technology and improve access to quality care by removing traditional barriers to healthcare delivery such as distance, mobility, and time constraints. American Well is pleased to support PCMH Link in its mission to use disruptive technologies and strategies to achieve the triple aim of the CMS Innovation Grant, transforming health care to deliver lower costs, better care and better health. American Well's Online Care is widely deployed by the largest and most progressive operators across the US, including national health plans (WellPoint and UnitedHealth) and regional and local Blue Cross Blue Shield plans in Hawaii, Minnesota, New York, and beyond. In addition, its solution is used by Rite Aid and the US Department of Veterans Affairs. Outside of the US, it is being deployed by the government-owned private insurer Medibank as the leading telehealth infrastructure for the countries of Australia and New Zealand.

### **Dovetail Health**

Dovetail was founded in 2005 in Massachusetts, with a clear purpose – provide patients with the same things we want for ourselves as we age, to live with hope and dignity, in good health, in our homes, safely and securely, surrounded by the people and memories we hold dear. We meet patients where they are, literally and figuratively, with the highest quality compassionate care. We are there during the most vulnerable times of transition after a hospital or rehab stay, when sorting out the confusions of medications is so important to fostering continued recovery. We are there when overwhelmed families and caregivers may have nowhere to turn for answers about the health and wellbeing of someone they love. We create bridges throughout the healthcare system, helping to extend the reach of physicians to ensure that care plans are both understood and adhered to. Dovetail creates partnerships, working in unison with health plans, providers, hospitals, and other caregivers. Together, we empower patients to better manage their illnesses and medications to lessen the burden and financial strain on the healthcare system. At Dovetail Health, our mission is simple: to help reduce preventable hospitalizations among the highest risk patients. We are here to create change. We are inspired by these principles.

### ***Comprehensive Infrastructure and Support Systems***

In order to build a program that is truly scalable and sustainable, Dovetail has made significant investments in its own management infrastructure. The Dovetail Health Management System (DHMS) was built from the ground up to support our clinicians through every step of their patient care process. In addition, all of Dovetail's systems have been built to the latest HIT standards and have been designed to facilitate reporting and sharing of key information with our partners.

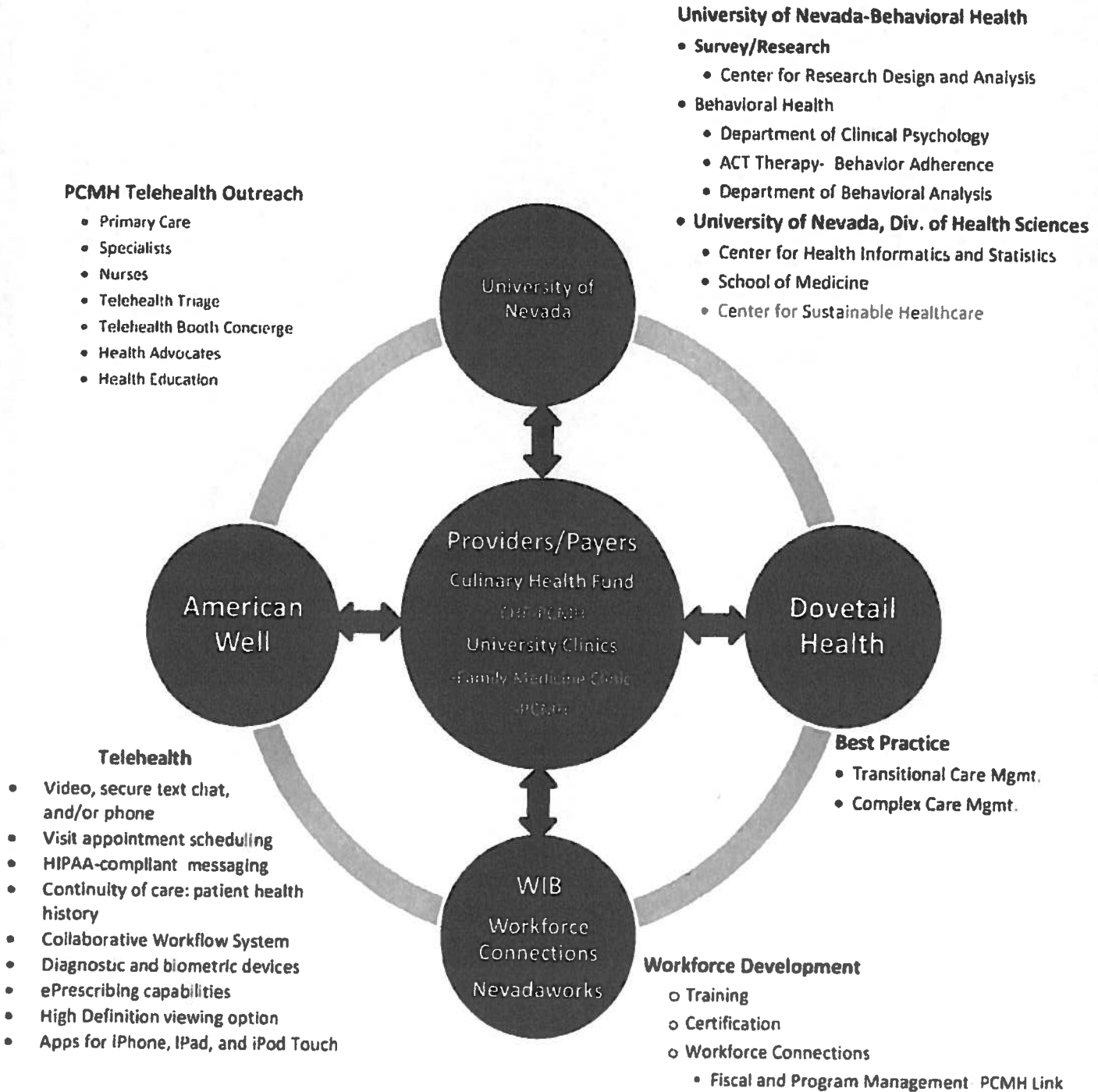
### **Workforce Connections**

At the request of the Culinary Health Fund, Workforce Connections, (the local Southern Nevada Workforce Investment Board), will administer and oversee the programmatic aspects of the project, including the cooperative agreement and financial management. The Southern Nevada Workforce Investment Board (operating as Workforce Connections) was formally established on July 1, 2000 following enactment of the DOL's Workforce Investment Act (WIA). Prior to this, the SNWIB functioned for 17 years as Nevada Business Services the administrative and programmatic arm of the Southern Nevada Private Industry Council under the DOL's Job Training Partnership Act (JTPA). The SNWIB recently changed its name to *workforce*CONNECTIONS.

### **Nevadaworks**

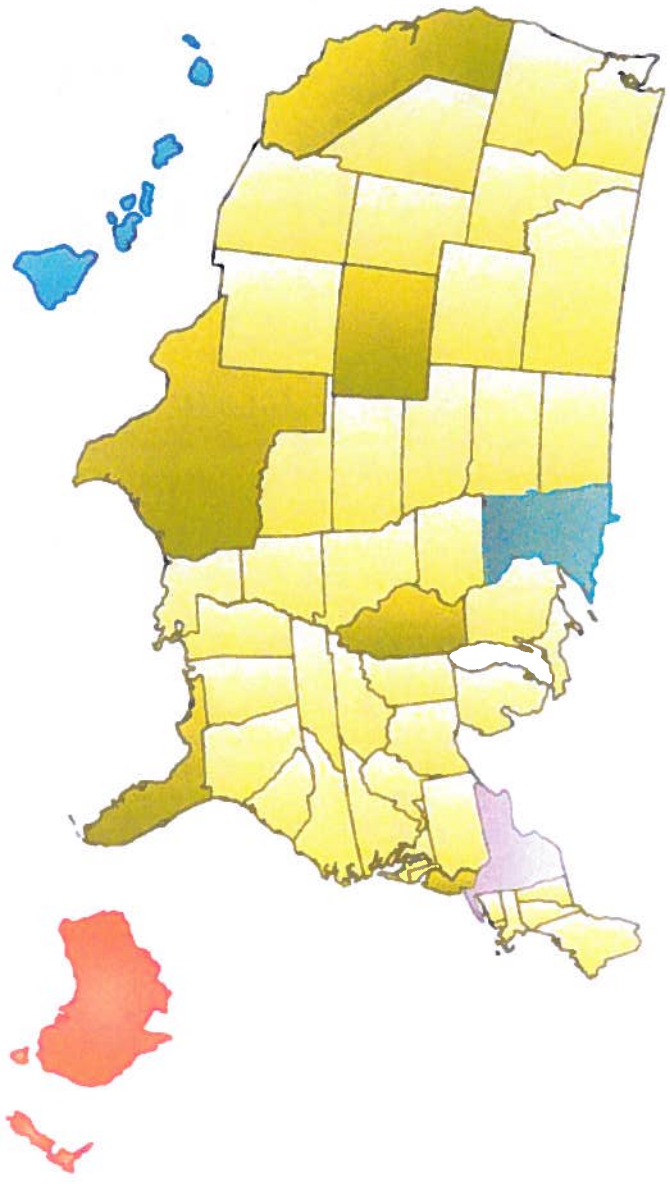
Nevadaworks, the Northern Nevada Local Workforce Investment Board, is the program operator and coordination agency for Workforce Investment Act programs in the 13 counties of Northern Nevada. Nevadaworks has extensive experience and expertise in the development and delivery of workforce programs. The Nevadaworks Board is responsible for the development and oversight of the Local Workforce Investment Board plan, and is comprised of Local Elected Officials and key business stakeholders committed to the success of Workforce Investment Act programs.

# PCMH Link- Collaborative Model Design





# Online Care Momentum



Year	Company	Founded
2008	BCBSHI	Hawaii
	BCBSMN	Minnesota
	UHG/Optum National	National
2009	TriWest Military	California
	Ascension Hospitals	California
2010	HealthNow New York	New York
	RiteAid Pharmacy	California
2011	WellPoint National	National
	VA Govt.	California
	MedBank International	California

# The Online Care Framework





# A new tier of care





# Telehealth Station



workforce CONNECTIONS

**BUSINESS  
SERVICES**



## Dr. CEO Roundtable

Thursday, January 26, 2012 at 6 p.m.

**A discussion for physician executives to discover solutions  
for challenges that impact independent physicians**



JOIN US AT

**Workforce Connections**

7251 W. Lake Mead Blvd.,  
Suite 200, Conference 200  
Las Vegas, NV 89128 ([Map it](#))

*Register Now*

**Topic: Overcoming barriers to selecting,  
implementing, and optimizing EHR/PM systems**

Hosted by Workforce Connections' Business Services consultants.  
This event is free to attend, but seating is limited so please register in  
advance. For more information contact Kenadie Cobbin Richardson via  
[email](#) or at (702) 636-2364.

This event is presented in partnership with:



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Las Vegas, NV 89128

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workforce CONNECTIONS



# LAYOFF AVERSION

*business services*



## DON'T BURY YOUR HEAD IN THE SAND.

Is your business experiencing difficulties such as:

- |                        |                                     |
|------------------------|-------------------------------------|
| Declining sales        | Inadequate research and development |
| Market concerns        | Quality concerns                    |
| Equipment obsolescence | Supply chain concerns               |
| Financial concerns     |                                     |

Workforce Connections' Layoff Aversion program provides business resources and professional consulting services on two levels:

**REACTIVE:** By responding to layoffs with strategies to avert further reductions and support services to transition displaced workers.

**PROACTIVE:** Drawing from professional expertise grounded in our unique business and economic landscape, our business consultants identify critical issues and match businesses to our network of professional and technical advisers who provide tools to avoid layoffs in the short term and strengthening solutions for job creation and sustainability for the long term.

## BUSINESS SERVICES:

Layoff aversion is a strategy that identifies and assists businesses experiencing operational difficulties. It serves to avoid layoffs and closures by deploying a team of business consultants that connect employers with a variety of resources and professional services to strengthen operations and positioning in the market.

FEATURES		BENEFITS
Turnaround specialists	➔	Mitigate business interruption
Intervention with local stakeholders	➔	Avoid layoffs
Technical expertise	➔	Optimize operations
Incumbent worker training	➔	Maximize short-term viability
Workforce and economic development alignment	➔	Provide for job creation and long-term stability

Analysis and consultation services are provided at no-cost to business owners as part of Workforce Connections' toolbox of valuable resources designed to strengthen the Southern Nevada workforce and help to diversify the local business landscape.

## PROFESSIONAL SERVICES:

- Accounting
- Business Consulting
- Financial Restructuring
- Legal
- Management Information Systems
- Marketing
- Operations Management
- Tax Credits
- Technical Assistance
- Trade Adjustment Assistance
- Turnaround Specialists
- Workforce Development

## CONTACT US

Our consultation services are free and confidential. To find out how we can help your company please contact our business consultants directly:

Janice Greer  
 (702) 636-2345  
[jgreer@nvworkforceconnections.org](mailto:jgreer@nvworkforceconnections.org)

Kenadie Cobbin Richardson  
 (702) 636-2364  
[krichardson@nvworkforceconnections.org](mailto:krichardson@nvworkforceconnections.org)

or visit the Business section of our website [www.nvworkforceconnections.org](http://www.nvworkforceconnections.org)



**workforce CONNECTIONS**  
 PEOPLE. PARTNERSHIPS. POSSIBILITIES.

## Brookings Report talking points for ADW Committee Meeting Agenda

- The Brookings Report will be the foundation for Nevada's Economic Development Plan. The plan is expected to be announced by new Economic Development Team Executive Director Steve Hill in February 2012.
- Seven sectors/industry clusters were identified as economic development opportunities for Nevada:
  1. Tourism, Gaming, and Entertainment
  2. Health and Medical Services
  3. Business IT Ecosystems
  4. Clean Energy
  5. Mining, Materials, and Manufacturing
  6. Logistics and Operations
  7. Aerospace and Defense
- Our plan is to capitalize on lessons learned through our Green and Healthcare sector efforts, and put in place additional sector strategies plan that align with and support the recommendations in the report.
- Our efforts over the last couple of years have positioned us well for strategic alignment with the recommendations in the report. Some of those recommendations are:
  1. Government sector innovation
  2. Data-driven performance management
  3. Sector specific policy development
  4. Alignment of state's resources around identified sectors
  5. Organizing of incoming federal resources around local efforts
  6. Aligning higher education and workforce development to strategic economic opportunities
  7. Raising the standards through the K-12 system



# UNIFY REGIONALIZE DIVERSIFY

AN ECONOMIC DEVELOPMENT AGENDA FOR NEVADA



## Executive Summary

Nevada stands at a crossroads yet it appears ready to remap its future.

Few would deny that the Great Recession has left the state grappling with a bona-fide “inflection point”—a deciding time.

Nevadans sense that lasting changes in U.S. industry structure, spending patterns, and economic behavior are all shaping a historic national “reset” to adapt to the shifting nature of the global economy, with huge implications for all places.

Likewise, Silver Staters sense that the current slump has not been just a temporary reversal but a challenge to the state’s traditional growth model—one that has revealed an economy over-dependent on consumption sectors, prone to booms and busts, and too little invested in innovation and economic diversification.

And yet, for all that Nevadans have been early to recognize that the current slump will beget, in some places, innovation and renewal, and in other places erosion—and so requires action.

In that vein, Nevada leaders have been engaging in an unusually serious discussion about the nature of the Nevada economy; the need for diversification; and ways to unleash the business, technology, and government-sector innovation that will drive growth.

Reflecting this ferment was the passage by the Nevada Legislature of the Economic Development Bill (AB 449) that was signed into law on June 17, 2011 by Gov. Brian Sandoval.

AB 449 is a potential watershed because it undertakes to reorganize and elevate the importance of the state’s economic development activities by, first, gathering them within the governor’s office and, second, by providing them a first installment of new funding.

But the legislation is also important because it endeavors to place Nevada development work on a modernized new footing. Not only is the state’s new Cabinet-level economic development executive director required to craft and implement a proper state economic development plan in the next few months. Also, the legislation conveys into Nevada development practice a new embrace of strategy, fact-driven analysis, and data-driven performance management.

Which is why in spring 2011 the state of Nevada turned to the Metropolitan Policy Program at Brookings, Brookings Mountain West, and SRI International to provide important analytic and policy background for the state’s planning.

Intended as a credible third-party analysis of the state’s competitive position and economic development opportunities, this report—“Unify / Regionalize / Diversify: An Economic Development Agenda for



Nevada”—speaks to the desire of Nevadans to “get on the same page” by providing a detailed accounting of the state’s present situation and most plausible routes toward economic diversification.

To that end, the pages that follow draw on an intense five-month inquiry that sought to define the nature of the economic challenges the state and its major regions face; identify industries and industry clusters that have the highest potential for expansion as part of an economic diversification effort; and suggest policy options that will enable the state, its regions, and the private sector to work more effectively to build a more unified, regionally vibrant, and diversified Nevada.

In keeping with these objectives, this report draws a number of conclusions about the state as it considers ways to build the next Nevada economy:

**1. Nevada possesses fundamental economic assets along with serious challenges as it seeks to build the next Nevada economy.** To be sure, the recent national recession and sluggish recovery has hit Nevada exceptionally hard. Most notably, the state’s heavy reliance on consumption-related sectors such as Construction and Real Estate, Tourism and Gaming, and Retail Trade—all of which are disproportionately affected by swings of the business cycle—has left the state prone to extreme economic volatility and lingering malaise. With that said, though, Nevada possesses substantial strengths—along with some serious deficits—as it considers a renewed economic development push.

In this connection, a systematic SWOT (strengths, weaknesses, opportunities, and threats) assessment reveals considerable assets and opportunities that the state can leverage as it seeks to renew its core industries and diversify by catalyzing growth in emerging ones. (See Figure 1). This assessment (summarized in Chapter III) confirms that Nevada’s core strength for economic development has been and will remain its overall business-friendly environment, including low taxes, relatively low costs, light regulation, and ease of business start-up/permitting. Going forward, these advantages will continue to anchor Nevada’s value proposition for business investment and economic development as will the state’s extensive entertainment and recreation assets, proximity to West Coast population centers, and excellent airport infrastructure. With that said, these assets are not likely to be sufficient to support the kind of growth and investment Nevadans desire given the increasingly determinative role of knowledge, technology, and workforce skill in today’s global economy. Key challenges include: spotty economic planning and cooperation; a weak innovation and technology commercialization enterprise; and substantial workforce skills shortfalls.

**2. Seven major industries and some 30 narrower target opportunities—distributed in varying mixes in the state’s regions—hold out plausible potential for economic growth and diversification for Nevada.** Building on the SWOT analysis and stakeholder consultation aimed at understanding Nevada’s statewide goals, the Brookings-SRI study team conducted an empirically grounded analysis aimed at identifying industries and sub-industries that have the highest potential to restore growth and jobs, spawn innovation in core or emerging sectors, or drive economic diversification. Along these lines, Chapter III of the study recommends the state focus its economic development activities on seven broad industries and 30 narrower target opportunities for growth, innovation, and diversification. (See Figure 2). These industries and target opportunities include:



Figure 1. Nevada Competitiveness SWOT Summary

Strengths	Weaknesses
<ul style="list-style-type: none"> <li>• Low taxes</li> <li>• Business friendly regulatory climate</li> <li>• Historically a high-growth economy</li> <li>• Good quality of life (although this is under-recognized)</li> <li>• Extensive entertainment and recreation assets</li> <li>• Proximity to West Coast population centers, markets, transportation routes, and ports</li> <li>• Excellent airport infrastructure (in both Las Vegas and Reno)</li> <li>• Excellent natural and physical resources (for mining, energy, etc.)</li> </ul>	<ul style="list-style-type: none"> <li>• Economy is heavily oriented toward consumption-based industries</li> <li>• Lack of proactive, coherent economic development strategy and structures</li> <li>• Workforce skill level is low (though improving)</li> <li>• K-12 educational system is underperforming</li> <li>• Healthcare system is underperforming</li> <li>• Energy costs are relatively high for the region</li> <li>• Land transportation connections can be challenging (in some parts of state)</li> <li>• Innovation inputs and outputs are weak (and there has especially been underinvestment in innovation capacity in Southern Nevada)</li> <li>• Lack of risk capital to invest in start-ups/innovation (although improving)</li> <li>• Real estate bust (devastating to construction)</li> </ul>
Opportunities	Threats
<ul style="list-style-type: none"> <li>• Political leadership closely engaged in revamping and renewing economic development activities</li> <li>• Ease and cost of living is attractive compared to neighboring California</li> <li>• Relatively affordable housing and high residential/commercial/industrial vacancy rates</li> <li>• Growing innovation districts in North and South</li> <li>• Large number of tourists/visitors/conventions – an opportunity to “sell” Nevada</li> <li>• Infrastructure for innovation is in place (at UNR, DRI, UNLV), but not at its full potential</li> <li>• Relatively strong science and engineering (S&amp;E) workforce and students in Reno</li> <li>• World-class Internet connectivity opportunities (such as the Switch data center in Las Vegas)</li> </ul>	<ul style="list-style-type: none"> <li>• Extreme economic cycles and volatility</li> <li>• Projected growth in the core consumption-based industries will not be sufficient to drive recovery</li> <li>• Limited state economic development resources dispersed through fragmented regional efforts</li> <li>• High unemployment</li> <li>• Underinvestment in higher education and lack of a top-tier Carnegie-ranked research university</li> <li>• Existing image issues can be a barrier in attracting higher-skilled workforce</li> <li>• Federal land ownership can hinder land usage/development in much of the state</li> <li>• Water shortages</li> </ul>

- **Tourism, Gaming, and Entertainment:** Going forward the focus for this massive base industry in Nevada should be on attracting visitors from varied markets with new and diversified offerings as well as leveraging the world-class capabilities that already exist here to create new sources of growth. Target opportunities in this huge sector include: Nevada as the U.S. online gaming center; Las Vegas as the intellectual capital of global gaming; gaming manufacturing; diversifying into niche tourism markets; retirees and second home owners; and film and media development
- **Health and Medical Services:** Bringing the low level of medical service production in Nevada just somewhat closer to the national average would generate substantial, stable economic activity and high-quality jobs in the state while improving health outcomes. Target opportunities here include: surgical specializations and stemming the “leakage” of surgical procedures out of state; geriatrics and related services; the disaggregation of medical service delivery; and leveraging a strong medical/health sector to build other emerging industries
- **Business IT Ecosystems:** Nevada has a short-term opportunity to create numerous jobs in low-to-moderate-skill business services segments already established in the state while simultaneously capitalizing on under-recognized technology anchors and building an environment to support higher-end IT industry growth over the longer term. Target opportunities include call centers/customer service and back office/BPO/shared services; e-commerce operations/headquarters; data centers; cloud computing/high performance computing; and cyber security
- **Clean Energy:** Clean Energy is a high-potential target for Nevada because it capitalizes on the state’s renewable resource base, its established geothermal expertise and headquarters strength, its proximity to large energy markets, and its capabilities in construction and project management. Key opportunities include: renewable component manufacturing; export of electricity; advancing and internationalizing geothermal development; and energy efficiency upgrades
- **Mining, Materials, and Manufacturing:** Given Nevada’s wealth of mineral resources, its history and knowledge base in mining operations, and its existing materials and manufacturing activities, this target industry provides a strategic opportunity for growth, diversification, and innovation. Nevada’s mining, materials, and manufacturing industries have common technical expertise and resources that are exchanged between their component sectors and also have synergies with the state’s renewables and defense industries. Areas of focus include: expanding participation in upstream mining activities; medium-value mineral supply chain development; manufacture of advanced composite materials; and organizing and marketing of Nevada’s manufacturing base
- **Logistics and Operations:** Nevada can be a West Coast hub of transport, distribution, and operations because of its locational and geographic advantages for easily reaching the entire Western U.S. Solid infrastructure, lower costs and regulatory hurdles (relative to neighboring states), lower congestion, and overall ease of doing business add to the value proposition. Focus opportunities include: warehousing and distribution; advanced logistics; air cargo; integrated manufacturing-distribution, assembly manufacturing, and food processing operations; and freight transportation (ground and rail)
- **Aerospace and Defense:** Finally, Nevada has a solid base of defense expertise, with a particular focus on testing and training, and the state’s geographic characteristics and low population density enable extensive testing operations. The state can build on this base of infrastructure and



expertise to solidify an important role for the Aerospace and Defense industry in its economic future. Target opportunities include: unmanned aerial vehicle (UAV) supply, assembly, and testing; and maintenance, repair and overhaul (MRO) of aircraft systems

Figure 2. Summary of Recommended Industries and Target Opportunities for Nevada

<p><b>1. Tourism, Gaming, and Entertainment</b></p> <ul style="list-style-type: none"> <li>• Nevada as the U.S. online gaming center (should Congress move to legalize it)</li> <li>• Las Vegas as the intellectual capital of global gaming</li> <li>• Gaming manufacturing</li> <li>• Diversifying into niche tourism markets</li> <li>• Retirees and second home owners</li> <li>• Film and media</li> </ul>	<p><b>4. Clean Energy</b></p> <ul style="list-style-type: none"> <li>• Renewable component manufacturing</li> <li>• Expanding transmission capacity</li> <li>• Advancing and internationalizing geothermal development</li> <li>• Energy efficiency upgrading</li> </ul>
<p><b>2. Health and Medical Services</b></p> <ul style="list-style-type: none"> <li>• Surgical specialties</li> <li>• Geriatrics and related services</li> <li>• Disaggregation of medical service delivery, creating new opportunities for middle-skill jobs</li> <li>• Leveraging a strong medical/health sector to build other emerging industries</li> </ul>	<p><b>5. Mining, Materials, and Manufacturing</b></p> <ul style="list-style-type: none"> <li>• Expanding participation in upstream mining activities</li> <li>• Medium-value mineral supply chain development</li> <li>• Manufacture of advanced composite materials</li> <li>• Organizing and marketing of manufacturing base</li> </ul>
<p><b>3. Business IT Ecosystems</b></p> <ul style="list-style-type: none"> <li>• Call centers/customer service and back office/BPO/shared services</li> <li>• E-commerce operations/headquarters</li> <li>• Data centers</li> <li>• Cloud computing/high-performance computing</li> <li>• Cyber security</li> </ul>	<p><b>6. Logistics and Operations</b></p> <ul style="list-style-type: none"> <li>• Warehousing and distribution</li> <li>• Advanced logistics</li> <li>• Air cargo</li> <li>• Integrated manufacturing-distribution, assembly manufacturing, and food processing operations</li> <li>• Freight transportation (ground and rail)</li> </ul>
<p><b>7. Aerospace and Defense</b></p> <ul style="list-style-type: none"> <li>• Unmanned Aerial Vehicle (UAV) supply, assembly, and testing</li> <li>• Maintenance, Repair, and Overhaul (MRO) of aircraft systems</li> </ul>	

It bears noting, meanwhile, that these industries and niches hold out a broad range of possible development and growth paths through their projected yield of a collective 80,000 to 125,000 jobs in the next five years (See Appendix C). Tourism, Gaming, and Entertainment, for example, may not seem to embody the goal of “diversification” into wholly new, high-value activities. However, the sheer size of this base sector that means that even with its modest projected 2011–2016 growth rate it will likely be the

largest near-term contributor of new positions among the recommended target industries. At the same time, the sector—far from representing “business-as-usual”—contains multiple sub-centers that hold out the possibility of valuable innovation and new growth. By contrast, while Business IT Ecosystems remains small, the variety and technology intensity of its projected longer-term job prospects make it a worthy focus.

It is also worth noting that the recommended industries and target opportunities do not occur evenly across the state. Instead, the target industries occur in unique mixes in the state’s regions.

Current concentrations of expertise and existing firms (or strong potential for industry growth and development) in **Northern Nevada** suggest that the state and its northern partners should focus their economic development work especially on niches within Clean Energy; Mining, Materials, and Manufacturing; Logistics and Operations; Aerospace and Defense; and Business IT Ecosystems. By contrast, state and regional leaders should build on **Southern Nevada** particular opportunities in Tourism, Gaming, and Entertainment; Business IT Ecosystems; Health and Medical Services; Energy Efficiency; and Logistics and Operations. For its part, finally, state and local leaders attending to the economic future of **Rural Nevada** can build on strong bases in Mining, Materials, and Manufacturing; Tourism, Gaming, and Entertainment; and Clean Energy.

One final observation: Not all of Nevada’s growth potential resides within the discreet target industries and segments focused on within this analysis. Other industries and segments may also contain, or see emerge, high-potential activity centers. For that reason, the state should remain open to new developments and fact-based business proposals about them. For example, at least three areas of economic activity outside of the seven priority industries merit additional mention even now. These include: Agriculture and Food Processing; Water and “Water Tech;” and Financial and “Intangible” Enterprises.

**3. To leverage the state’s opportunities, meanwhile, Nevada needs to upgrade its diffuse economic development system so that the state at once leads more vigorously, empowers its regions more fully, and also sets a state-wide platform for new growth.** In this vein, this report calls for the state to “Unify,” “Regionalize,” and “Diversify” as follows:

- **Unify: Install an operating system for 21<sup>st</sup> century economic development.** First, the state needs to put in place the basic elements of a state-of-the-art statewide economic development operating system—just as AB 449 requires. Currently Nevada lacks such a system. Therefore, the state should move decisively to set out a clear and unified model for pursuing growth. Such a framework will entail both leadership from the top and decentralization to the regions, as well as the provision of better information. Along these lines, Chapter V of the report calls on the state to:
  - Set out a compelling strategy for innovation and diversification—and lead
  - Structure effective partnerships with and among regional actors—including regional development authorities (RDAs), strong non-profits, and the state’s municipalities
  - Build the information base and use it to drive performance

To set out the strategy and lead the state should: Produce a compelling state plan for economic diversification; brand and communicate the new vision relentlessly; help the regions align with the



strategy; and name industry-specific “sector champions” to spearhead cluster development in its regions. Finally, the state should deploy the Catalyst Fund to build target sectors and clusters.

To restructure its partnerships and improve their workings in the regions the state should: Use RDA selection to promote aligned collaborative execution and use RDA funding and performance management to drive impact and reward achievement. The state should also create prizes, innovation grants, or competitions to spur creative initiatives.

And to enhance the information base and use it to drive performance the state should: Improve the basic availability of economic development information and use these new information resources to define and drive success.

- **Regionalize: Support smart sector strategies in the regions.** Secondly, the state needs to foster and contribute to “bottom-up” sector initiatives in its regions. Nevada’s regions are not only the true hubs of the state’s economy but are also full of business, civic, academic, and economic development leaders able to promote growth and diversification. Given that, the state should support Nevada’s regional development efforts as they develop sector- and region-specific strategies to spur growth, innovation, and job creation. To this end, Chapter VI of the report argues that Nevada should:

- Support convenings of target industry and cluster actors in the regions—and their planning
- Support well-conceived cluster initiatives in the regions
- Support other types of bottom-up sector development, including regional innovation districts, business plans, and regional export plans
- Align the state’s existing economic development policies, programs, and initiatives with the regions’ sector strategies and cluster initiatives

To help convene regional industry networks and clusters—and support their planning—the state should: Foster cluster organization in target sectors; join working meetings with sector associations and business leaders in the regions; task “sector champions” to work with regional clusters.

To support well-conceived cluster initiatives the state should: establish a competitive grant program to support cluster initiatives at all stages with planning grants, start-up and technical assistance grants, and competitive program grants.

The state should also support other approaches to bottom-up sector development like regional business planning, regional export plans, and regional innovation districts.

And finally the state should work to align its existing programs across departments by: prioritizing collaborative applications to program offerings; tuning department and program objectives to cluster needs; and organizing incoming federal resources to help coordinate local efforts.



- **Diversify: Set a platform for higher-value growth through innovation and global engagement.** Finally, since Nevada's regions can't "go it alone," the state needs to set the stage for broad-based growth by investing in effective innovation and commercialization infrastructure, attending to the state's global engagement, and working to align its education and workforce training efforts to its new economic strategy. Along these lines Chapter VII recommends that the state:
  - Bolster capacity for innovation and commercialization
  - Expand global engagement particularly with rising nations
  - Align higher education and workforce development resources for innovation and diversification

To bolster its innovation capacity the state should: Make strategic investments in "impact scholars"; incentivize university-industry research collaboration; boost industry R&D through competitive tax incentives; leverage federal resources to catalyze high-impact R&D; and assist small business in winning SBIR/STTR funds. Likewise, the state should develop a strong commercialization infrastructure by developing relevant intermediary, networks, and support mechanisms and increasing access to risk capital.

To expand Nevada's global engagement, the state should: Make global engagement a key priority by providing robust leadership, setting goals, and reaching out proactively to targeted exporters and foreign direct investors. The state should make FDI an explicit component of Nevada's global engagement policy and use it to build out target clusters. To support its efforts, the state should build the global engagement information base and use it to educate stakeholders. Finally, the state should leverage resources of other organizations involved in export promotion and FDI attraction and advocate at the federal level on behalf of global engagement priorities like infrastructure and visa processing.

And to align higher education and workforce development to strategic economic opportunities, the state should: Raise standards throughout the K-12 system over the longer term; leverage community colleges to deliver a skilled workforce; expand research universities' role in workforce development; and reorganize and re-energize the state's workforce investment system.

Figure 3. Unify | Regionalize | Diversify:  
Policy Recommendations for Nevada

Legend: \$ = \$0-\$50,000      \$\$ = \$50,000-\$250,000      \$\$\$ = \$250,000-\$1 million      \$\$\$\$ = >\$1 million  
 Immediate = within 3-12 months      Near-term = within 1-2 years      Long-term = > 2 years

**Unify: Install an Operating System for 21<sup>st</sup> Century Economic Development**

Set a strategy for innovation and diversification—and lead

RECOMMENDATION:	Produce a compelling state plan for economic diversification through innovation	Immediate \$
RECOMMENDATION:	Brand and communicate the new direction	Immediate \$
RECOMMENDATION:	Help the regions align with the state's economic development strategy	Immediate \$\$
RECOMMENDATION:	Name industry-specific "sector champions" to spearhead cluster development	Immediate \$\$
RECOMMENDATION:	Deploy the Catalyst Fund to build target sectors and clusters	Immediate \$\$\$\$

Structure partnerships with and among regional actors

RECOMMENDATION:	Use RDA selection to promote aligned, collaborative execution	Immediate \$
RECOMMENDATION:	Use RDA funding and performance management to drive impact and reward achievement	Near-term \$
RECOMMENDATION:	Create prizes, innovation grants, or competitions to incite creative partner initiatives	Near-term \$ - \$\$\$

Build the information base and use it to drive performance

RECOMMENDATION:	Improve the range of economic development information available	Near-term \$\$
RECOMMENDATION:	Improve the packaging of economic development information	Near-term \$\$
RECOMMENDATION:	Use information to define and drive success	Near-term \$

**Regionalize: Support Smart Sector Strategies in the Regions**

Support convenings of target industry and cluster actors in the regions

RECOMMENDATION:	Foster cluster organizations in target sectors	Immediate \$
RECOMMENDATION:	Speak at sector convenings and join working meetings with sector associations or business leaders	Immediate \$
RECOMMENDATION:	Task "sector champions" to work with regional clusters	Immediate \$

Support smart, well-conceived cluster initiatives in the regions

RECOMMENDATION:	Establish a competitive grant program to support cluster initiatives	Near-term \$\$\$
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Support other approaches to bottom-up sector development

RECOMMENDATION:	Encourage regional business planning in regions	Near-term \$\$
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RECOMMENDATION:	Support the development of regional export plans to boost global engagement	Near-term \$\$
RECOMMENDATION:	Use policy levers to support the building-out of a finite number of regional innovation districts	Near-term \$\$
<b>Align the state's existing policies and programs with a cluster-based, regional approach</b>		
RECOMMENDATION:	Prioritize collaborative applications in awarding competitive grants	Near-term \$
RECOMMENDATION:	Tune department and program objectives and offerings to cluster needs	Immediate \$
RECOMMENDATION:	Organize incoming federal resources to help coordinate local cluster-building efforts	Immediate \$

### Diversify: Set a Platform for Sustainable Growth through Innovation

#### Bolster innovation and accelerate commercialization

RECOMMENDATION:	Make strategic investments in "impact scholars" to boost research output and new discoveries	Near-term \$\$\$\$
RECOMMENDATION:	Incentivize university-industry research collaboration	Near-term \$\$
RECOMMENDATION:	Boost industry R&D through competitive tax incentives	Near-term \$\$\$
RECOMMENDATION:	Leverage federal resources to catalyze high-impact R&D	Near-term \$
RECOMMENDATION:	Assist small business in winning SBIR/STTR funds	Near-term \$
RECOMMENDATION:	Develop strong commercialization infrastructure, networks, and support mechanisms and establish an intermediary	Near-term \$\$\$
RECOMMENDATION:	Increase access to risk capital	Long-term \$\$\$\$

#### Expand global engagement particularly with rising nations

RECOMMENDATION:	Make international trade and global engagement a key priority	Immediate \$
RECOMMENDATION:	Make FDI an explicit component of the state's global engagement agenda	Immediate \$
RECOMMENDATION:	Build the global engagement information base and use it to educate stakeholders	Immediate \$\$
RECOMMENDATION:	Leverage resources of other organizations involved in export promotion and FDI attraction	Immediate \$
RECOMMENDATION:	Advocate on behalf of global engagement priorities	Immediate \$

#### Align higher education and workforce development to strategic economic opportunities

RECOMMENDATION:	Raise STEM standards throughout the K-12 system	Long-term \$\$\$\$
RECOMMENDATION:	Leverage community colleges to deliver a skilled workforce	Near-term \$\$\$
RECOMMENDATION:	Expand research universities' role in workforce development	Near-term \$\$\$
RECOMMENDATION:	Reorganize and re-energize the workforce investment system	Near-term \$\$\$

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In the end, this report assumes wholeheartedly that renewal and diversification through innovation is possible in Nevada. To be sure, there is much work to be done. A strong state economic development plan needs to be crafted and followed, requiring hard decisions and painstaking execution.

There will also need to be plenty of careful staging and collaboration as the state moves to address the nearer-term, lower-cost work of putting in place a top-quality operating system for 21<sup>st</sup> century economic development at the same time as it prepares to tackle the heavier lifts of setting a platform for longer-term growth. Constructing a top-flight innovation and commercialization system will be a major task. So will expanding global engagement and better aligning the education and workforce training system to the state's new sector strategies. Ideally, system improvement in the next year or two will ensure that future investments are maximized.

Yet, while this hard work might seem like a hard task at a difficult time, the study team is confident that the moment is right. Having spoken with scores of Nevadans during the course of this work the team emerges from the process deeply impressed by the shared sense of commitment and good will evident among the state's business, civic, government, and economic development leaders.

Focused by challenge, Nevadans seem ready to reach for a new future.



## RFP 101 Workshop

Becoming a Funded Partner begins with the desire to help people and an idea of how to do it. However, the process of applying for funds through *workforce CONNECTIONS*, especially for parties who are new to the process, can sometimes be daunting.

This ½ day workshop will:

- introduce potential partners to *workforce CONNECTIONS* procurement process
- educate on how to correctly respond to a Request For Proposals
- answer questions they may have
- demystify the process

A date (February 29) and venue (Texas Station) have been selected and we are in the procurement process for a presenter. Plans are being made and finalized for a helpful and informative workshop.