1	TOBACCO REGION REVITALIZATION COMMISSION
2	701 East Franklin Street, Suite 501
3	Richmond, Virginia 23219
4	
5	
6	
7	
8	<b>Education Committee Meeting</b>
9	Wednesday, May 29, 2019
10	11:00 o'clock a.m.
11	
12	
13	
14	Hotel Roanoke and Conference Center
15	Crystal Ballroom A/B/E
16	110 Shenandoah Avenue
17	Roanoke, Virginia
18	
19	
20	
21	
22	
23	
24	

## <u>APPEARANCES:</u>

- The Honorable Frank M. Ruff, Chairman
- 3 Ms. Rebecca Coleman, Vice Chairman
- 4 Ms. Gayle F. Barts
- 5 The Honorable Kathy J. Byron
- 6 The Honorable A. Benton Chafin, Jr.
- 7 Mr. Joel Cunningham
- 8 Dr. Alexis I. Ehrhardt
- 9 The Honorable Franklin D. Harris
- 10 Ms. Sandy Ratliff
- 11 Mr. Cecil E. Shell
- 12 The Honorable William M. Stanley, Jr.
- The Honorable Thomas C. Wright, Jr.

14

1

## 15 COMMISSION STAFF:

- Mr. Evan Feinman, Executive Director
- Mr. Andy Sorrell, Deputy Director
- Mr. Timothy S. Pfohl, Grants Program Administration Director
- Ms. Sarah K. Capps, Grants Program Administrator,
- 20 Southside Virginia
- Ms. Sara G. Williams, Grants Program Administrator,
- 22 Southwest Virginia
- 23 Ms. Stephanie S. Kim, Director of Finance
- Ms. Michele Faircloth, Grants Assistant
- 25 Southside Virginia

1	<u>COMMISSION STAFF</u> : (Continued)
2	Ms. Jessica Stamper, Grants Assistant
3	Southwest Virginia
4	
5	COUNSEL FOR THE COMMMISSION:
6	Ms. Elizabeth B. Myers, Assistant Attorney General
7	Richmond, Virginia 23219
8	
9	
10	
11	
12	
13	
14	
15	
16	
17	
18	
19	
20	
21	
22	
23	
24	
25	

1	May 29, 2019
2	
3	SENATOR RUFF: Good morning, everyone. Welcome
4	to the Education Committee Meeting, and I'm going to ask Evan
5	to please call the roll.
6	
7	NOTE: Mr. Franklin D. Harris asked for a moment of
8	silence.
9	
10	MR. HARRIS: Ladies and gentlemen, it's good to see
11	everybody this morning. Our church bus yesterday was involved
12	in an accident. Several people were killed and some hospitalized.
13	So, I'd ask everybody, if we could just have a moment of silence,
14	not only for those that died, but for the people who were injured
15	and trying to recover. Thank you very much. And I'd ask you to
16	keep us in your prayers. Thank you, Mr. Chairman.
17	SENATOR RUFF: Thank you. Evan, will you call roll.
18	MR. FEINMAN: Senator Ruff.
19	SENATOR RUFF: Here.
20	MR. FEINMAN: Ms. Coleman.
21	MS. COLEMAN: Here.
22	MR. FEINMAN: Delegate Byron.
23	DELEGATE BYRON: Here.
24	MR. FEINMAN: Senator Chafin.
25	SENATOR CHAFIN: Here.

1	MR. FEINMAN: Ms. Barts.
2	MS. BARTS: Here.
3	MR. FEINMAN: Mr. Cunningham.
4	MR. CUNNINGHAM: Here.
5	MR. FEINMAN: Dr. Ehrhardt.
6	DR.EHRHARDT: Here.
7	MR. FEINMAN: Mr. Harris.
8	MR. HARRIS: Here.
9	MR. FEINMAN: Ms. Ratliff.
10	MS. RATLIFF: Here.
11	MR. FEINMAN: Mr. Shell.
12	MR. SHELL: Here.
13	MR. FEINMAN: Senator Stanley.
14	SENATOR STANLEY: Here.
15	MR. FEINMAN: Delegate Wright.
16	DELEGATE WRIGHT: Here.
17	MR. FEINMAN: You have a quorum, Mr. Chairman.
18	SENATOR RUFF: The minutes for our meeting on
19	December 17 <sup>th</sup> , 2018 that are on the website. Do I have a
20	motion? All right, I've got a motion and a second. It's been
21	moved and seconded. All in favor, say aye. (Ayes). Opposed?
22	(No response). The minutes are passed.
23	MS. KIM: I think we all remember the December
24	meeting, we talked about changing the Student Loan Program
25	and we talked about issues with the Loan Forgiveness Program

and there's just not enough money to fund what we wanted to do. So, if you'll recall, some of the problems with the Loan Forgiveness Program was that there was not enough money to change behaviors as far as going to college and returning after graduation and there was no guarantee they could find a job in the region. When you make loans, you have to hunt down students to verify information. Sometimes we had to go after these people and some had not paid and some of them had other federal loans, plus our loans, so that could be a separate pot of money, and some didn't have the ability to pay. There was no provision for disability or death or other circumstances.

Many times, we had to garnish wages for people who wouldn't pay, and it became a big problem. And some of those loans they had, they couldn't consolidate ours with some of the federal loans, so that turned out to be separate, along with the private loans. Payments were based on the ability to pay the federal loan part. As I said, no provision in ours for disability or death or unforeseen circumstances.

The problems we had with a program several years back is that there were no measureable outcomes, and once again, not enough money to really encourage them to come to this region and then it was not based on financial need, and, again, there never was enough money.

Just to give you an idea of college costs for 2018-19, full-time, average cost is \$24,000, and the average debt for 2017

and the latest data available for a four-year institution, \$130,000.

In designing this program, we want to look at, and we contracted with Chmura Economics to study the jobs, the hard-to-fill positions in the Tobacco Region. And we also looked at the Virginia Department of Education unfilled positions by locality. We also looked at applications. You remember we heard from Ted Abernathy at the last meeting in January about economic leadership and his recommendation and we talked to VEDP as far as job reports. We also got information from the Chmura report, it's very detailed. And all that's contained in your handouts. But they look primarily at the workforce development area. We had to modify it a little bit because some of this information is from counties not in the Tobacco Region, and they added a county here and there when doing the study.

We looked at the top ten hard-to-fill jobs in the workforce development areas. The workforce is a separate funding of the Education Committee.

Chmura looked at how long the positions were advertised. In essence, what we were doing is looking at both supply and demand. As you can see, and I'll show you a map later, but these are the areas that are generally correct with a few exceptions. And talking about the top ten occupations that are the most difficult to fill, but a lot of them are in the health care area. This is going to be a real challenge. Things like

1	speech, language, pathologists, occupational therapists, and
2	physical therapists. And you can see the shortages here. What
3	we looked at is that a lot of these were health care areas, and we
4	realized that there is a program with the Virginia Department of
5	Health, and this involves the health care professions, of course.
6	And they give incentives, up to \$40,000 for medical, dental,
7	behavioral health, and clinical professions. We've been working
8	with the Virginia Department of Health regarding programs like
9	this, along the lines of what we are trying to accomplish just in
10	the health care area.
11	What we thought we'd do is splitting our funds with a
12	program that's aligned with federal and state funding and geared

program that's aligned with federal and state funding and geared towards health care professionals and then some money for programs that are not covered by the Virginia Department of Health. So, at this time, what I want to do is introduce you to all of that, Olivette Burroughs from the Virginia Department of Health. She runs the State Program, and she can explain their program before I continue on with the Talent Attraction Program.

UNIDENTIFIED: Good morning or afternoon. My name is Dr. -- . I'm director of the Office of Health Equity. And thank you for the opportunity to come and talk to you today and a little bit about our program. I'll give you an overview of our office and Olivette Burroughs actually manages it, and she'll speak with you further.

The Office of Health Equity in the Department of

Health in our jurisdiction is the entire state like four million 1 people. When I talk about health equity, everybody tries to put 2 it in laymen's terms, so it's our job to try to insure that the 3 people and folks in the underserved parts of the state have the 4 same opportunity with those that are in the most prosperous 5 parts of the state. Our mission is to create and sustain health 6 opportunity for all of Virginians. That means it's our mission to 7 protect the health and protect the wellbeing of all people in 8 Virginia. As I say, we're responsible for the health and wellbeing 9 of all people in Virginia, we must not forget the forgotten. 10 Divisions within our office that support health equity 11 and the mission. The first is social epidemiology and data, and 12 we try to track any inequities in the rural parts of the state. The 13 multi-cultural health and community engagement, and then the 14 Division of Primary Care and Rural Health work for us. That's 15 where we have our health workforce. 16 So, at this time, I'll call on Olivette Burroughs and 17 give you details about our program. Thank you for this 18 opportunity. 19 MS. BURROUGHS: Good afternoon, everyone. I am 20 21

22

23

24

and increase access to care, so we want to make sure that there is an adequate number of providers serving in the health care area throughout Virginia. We want to increase primary care occupation to our programs. We have a loan repayment exchange of services in health professional shortage areas.

For the initial obligation, it's two years, and you can get up to \$30,000 for the first two years. You can get up to \$30,000 for the first two years from the federal government and \$50,000 from the community, up to \$100,000 for two years of obligation. This can be from employers, foundations, State of Virginia, the Tobacco Commission, just as long as it's not federal funds, because the federal program will be action. If you have any questions, go ahead and ask them throughout my presentation.

We formed an advisory committee to assist us in a fair distribution of funds and to take care of that liability. Currently, we have funding from the federal government of \$500,000 for four years, and we're currently finishing up the first year of the program. We have \$300,000 from the General Assembly, which reviews \$25,000 from the State Office of Rural Health, and we have worked with the Virginia HealthCare Foundation, and they have been very helpful. The two major things I'll talk about as far as eligibility. You must have an eligible site and an eligible applicant in order for this to work. An eligible site has to be a nonprofit, a state or public facility for a for-profit operating party

nonprofit, and that facility must be in a health professional shortage area.

What providers are eligible? Priority care providers are eligible, physicians, nurse practitioners, physician assistants, dental professionals, mental health professionals, registered nurses, and pharmacists, as long as they work in pediatrics, geriatrics, psychiatry, family or internal medicine, and women's health. All eligible applicants must meet the eligible requirements. The main requirements must be a U.S. citizen or national. If there's any training, they must meet that and completed before they're eligible. They have to complete their schooling, such things as board certifications, that has to be done before they're eligible, they have to graduate from an accredited program, and there must be no restrictions on their license. A person cannot be serving any other contractual obligation.

There is a national health service program. If it's administered by the federal government, they must finish that before they're eligible for this or for our program. They must not have any type of state or federal obligation. For instance, if somebody applies and they owe child support, they won't be eligible. The applicant must be eligible for federal employment and must pass a background check. The provider must also agree to work full-time with that approved site, and full-time means 40 hours per week for a minimum of 45 weeks per year.

There's also an option to work in administrative duties

and not be more than four hours per week. They must agree to
use the funds to repay their loan. Proof of verification within two
months is required. Now, as far as collaboration with the
Tobacco Commission, and please feel free to interject or share
your views, the applicants must live in a Tobacco Region,
Roanoke and Lynchburg are not eligible and must also work in

cannot exceed a certain amount.

Now, what sites are eligible? We do have sites that are eligible for the State Loan Repayment Program. And for the Tobacco Region, we'll focus on three. The first one is federally qualified health centers. The second one is federally qualified look-alikes and rural health clinics.

the Tobacco Region and must have eligible loans and the awards

We took a look at the Tobacco Region, and federal look-alikes are facilities that meet all the requirements for FQHC, but they don't receive the federal funding. We took a look at the Tobacco Region just to get an idea of what area will qualify and determine where the professional shortage areas are. If you look at the map, you'll see the geographic area. See the green primary health care, the red is the population primary care, and the shaded areas do not qualify. You'll also see the green holes, those are the federally qualified health centers where providers are eligible to work, and then the green crosses are rural health clinics, those are also eligible areas.

The next map shows pretty much the same picture,

but that's for dental, and that shows the red and the green and the federally qualified health centers. The third map shows the same for mental health.

A provider must fulfill their obligation and the site must be primary care, mental health, or dental.

Now, how do we determine awards, and we have an advisory committee that helps to assist in the fair distribution of funds. For those that are interested, I attached a membership of the Advisory Committee and of membership selection method. The process is through nomination and final approval is by the State Health Commissioner. We have a rubric that we utilize in order to score and rank applicants for the SLRP.

So, for the State Loan Repayment Program and Tobacco Commission collaboration, we'll use our rubric process and continue to score the applicants based on the highest scores and utilize all of the state and federal funds first and then use the Tobacco funds to expand the Virginia State Loan Repayment Plan Program. So, what does that mean? For those in the health professional shortage areas, they will be funded first, and all others who normally would not be funded due to lack of funding, they will be funded if additional funds are left over. And I also have a map for you.

The award distribution currently cannot exceed \$140,000 for all four years. The person can get for the first two years up to \$50,000 from the community and 50 from the federal

government, and for the third and fourth year individually, they can get a total of \$40,000, twenty from the community and twenty from the federal government.

As far as the Tobacco Commission distribution and what it'll look like, we cannot get more than \$140,000 for all four years, which will be the same as the current program and get payments upfront and we check verification of employment every six months and we track them so we know where they are and we communicate with them. And to date, we have not had any defaults, and we've done really well with that. This does not replace the Virginia State Loan Program in any way, but it can be used as a match for smaller budget facilities if that's something you choose to do.

As far as the fund, there will be no action funds for the Tobacco Region extension part of the program. They'll receive the maximum of \$100,000 for the first two years and then 40 for the third and fourth years.

How do we promote the program and let people know this? We've done a great job so far with disseminating information throughout the country. We have folks applying from different states in Virginia because of our efforts. We go to military and civilian events. I also manage the recruitment efforts we make, and we're doing this for rural areas and we're trying to supplement the rural areas and we're trying to attract people to Virginia. We also use practice sites as far as retention

and surveys to the participants and get their input and
experience working as health professionals and asking questions
like are they interested in staying, or what is it that would cause
them to leave. We definitely want folks to come in and working
and we'd like them to stay for at least ten years in those
underserved areas.

We also interview past and current recipients to get any kind of information. We're starting an ambassador program and try to get people to relocate to underserved areas, but we want to welcome their families and we help them find employment for their spouses and schools for their children and also real estate and banking, anything having to do with their coming and staying and working in the community. Somebody from New York might be moving into the Tobacco Region, and we want to make sure that they're comfortable and want to make sure that they stay.

Just to give you a timeline from January to March is the application cycle, and we'll have an Advisory Committee meeting between April 1<sup>st</sup> and April 15<sup>th</sup>, then we'll generate contracts between April 15<sup>th</sup> and May 31<sup>st</sup>, and we'll mail checks from June 1<sup>st</sup> to June 30<sup>th</sup>. And then we'll continue to follow up with all of the recipients.

Partnerships with the Office of Health Equities, and we've also enjoyed a good reputation and working with all the funds that the federal government has allocated and funds we've

1	received from the General Assembly, and we have a lot of
2	unfunded applicants, we have to tell them they're not eligible
3	because there's no funding.
4	So, where will your investment go? It'll go directly
5	towards improving health equity for those in the Tobacco Region
6	and ultimately helping Virginia as a whole and making Virginia
7	the healthiest state in the nation.
8	Now, are there any questions?
9	DELEGATE BYRON: This is the first I've heard of your
10	program. Do you have figures on how many have been awarded,
11	out of the money, how many have been awarded?
12	MS. BURROUGHS: For this year, 24. Last year, we
13	awarded 26.
14	SENATOR RUFF: How many were doctors and how
15	many were in other health professions?
16	MS. BURROUGHS: I'll have to get you that
17	information.
18	DELEGATE BYRON: I think the details would be very
19	interesting to see, so we can truly understand this. Some of my
20	questions based on the things you mentioned, where are they
21	from, are they going to the Tobacco Region, or are they from the
22	Tobacco Region? Then you talked about marketing outside the
23	Footprint or the state. Then you said you had more applications
24	than you have money for. Is it necessary to go out of the state
25	looking for people, or are you marketing in other parts of the

1	Commonwealth to bring them into the Tobacco Region and
2	paying their college debt?
3	MR. BURROUGHS: We market throughout Virginia
4	and the country. We continue to market the program and we
5	want the community to know that and not just a state concern
6	but a community concern, we want people that are eligible to be
7	in the program, as well.
8	DELEGATE BYRON: You said you check every six
9	months to see if they're working. What is the criteria, or do they
0	have to complete the course, or what is the requirement for the
1	education?
2	MS. BURROUGHS: They must be completely finished
13	with all of their schooling or any certification that's related to
14	their discipline.
15	SENATOR RUFF: The commitment is for how long?
16	MS. BURROUGHS: The initial commitment is for two
17	years, and when they meet that obligation, they're eligible to
8	apply for a third and fourth year.
19	SENATOR RUFF: This is a repayment program. How
20	long do they have to repay it?
21	MS. BURROUGHS: If I understand your question,
22	once they're eligible, we write a check, \$50,000 from their
23	employer and \$50,000 the State Repayment Program. We have
24	60 days from the date that we write the check to show proof.
25	SENATOR RUFF: This is a grant from the state to

them. The concern that I have is that we have folks that come in 1 for two years, and the other issue is how are lines drawn as to 2 the served areas, is it by county, or is the county split, or is there 3 any way to determine that? 4 MR. BURROUGHS: We have professionals in our office 5 that I could connect you to, to answer that, but most of it is done 6 at the census --7 SENATOR RUFF: -- The reason I ask that question, 8 South Hill has a hospital and have doctors coming in, but say the 9 check is coming from VCU and they refused in this case to give a 10 grant, I don't know if that's worked out or not These are the 11 kind of problems I see, I'm venting.

12

13

14

15

16

17

18

19

20

21

22

23

24

25

MR. FEINMAN: For the Committee's benefit and thank you for coming, Ms. Burroughs, and if I'm way off base, just speak up. When you get into the question of how are we going to figure out what of this fits in our Footprint and what needs filling, we found that while we have some people that are not in the health profession business, when we looked further, it turned out that had this successful federally matched program for attraction of health professional, and while every single county in the Footprint is not necessarily eligible for a doctor or a nurse or a physician's assistant, or a dentist, every county was eligible for one or more of them.

So, rather than reinvent this particular wheel, it seems more efficient to us to split our talent attraction money,

1	and one of our programs that Stephanie will describe for the
2	nonhealth professions, it would be more efficient to add on to the
3	work that VDH is doing. We had some concern about supplanting
4	those dollars, so what was described there at the end may be the
5	best way for us to do it is use the last dollar addition to their
6	program. They'll run the standard program as if our funds did
7	not exist and award as many as they can statewide, including the
8	Tobacco Region. And then when they exhaust their funds, then
9	they'll use our funds simply to expand the programs within our
10	Footprint. Our belief is this will get us more health professionals
11	than anything else we could do.
12	DELEGATE WRIGHT: I have a couple of questions. It
13	says here the applicants must live in the Tobacco Region and
14	work in the Tobacco Region, et cetera. Does that mean that
15	before they come to this program, or is this for people in the
16	Footprint or for someone else?
17	MS. KIM: It's really for anyone. It's open to all.
18	DELEGATE WRIGHT: The people that live in the
19	Footprint, would they get a priority, or would they be eligible
20	before someone that lives outside the Footprint?
21	MS. KIM: You're looking at the Talent Attraction
22	Program. If somebody goes away to college for four years, how
23	do you create that ten years ago they lived in the Region, and I
24	don't know the answer to that, but if we can solve that issue,
25	then we can probably give priority to those people. Some of

1	them have been gone for quite some time.
2	DELEGATE WRIGHT: I see what your point is.
3	MS. KIM: Maybe their parents lived there or
4	graduated from here. If somebody is through college, through
5	medical school and residency and then comes back, how do we
6	get that? Ask for utility bills that they've paid ten years ago, I
7	don't know?
8	DELEGATE WRIGHT: I just think someone from the
9	Footprint should have the priority on this program from someone
10	who might have lived in another state to someone who's from
11	the area. Another question I have, do you have a list of, or if
12	you have a doctor that serves a tremendous area and you go in a
13	doctor's office and wait four hours and he can't take any more
14	patients because he can't serve any more, how do you answer
15	that?
16	MS. BURROUGHS: The larger hospitals are not
17	eligible and you mentioned the doctor's office and private
18	practice and it's not operated by a nonprofit, that would not be
19	eligible.
20	DELEGATE WRIGHT: Do you know how many facilities
21	would be eligible in Region 8, for instance?
22	MS. BURROUGHS: I can give you a list of that later,
23	but I have a list of people that are eligible in the last couple of
24	years. Some are in the Region.
25	DELEGATE WRIGHT: In our county, we have health

1	and I think the same in Amelia, maybe providing health care
2	based on their ability to pay. And I think that's federally funded,
3	would an office like that be eligible. They have dental facilities
4	there and it's based strictly on ability to pay.
5	MS, BURROUHS: We certainly can look into that, and
6	I can get back to you.
7	DELEGATE WRIGHT: The reason I'm asking those
8	questions is because if the area is in the Footprint and not
9	enough to be eligible, and, of course, my district is my first
10	concern, I'm sure other people from other districts feel the same
11	way. But we have a severe shortage of medical personnel, and
12	we don't have a doctor in Victoria. And it's a critical shortage,
13	and I'm concerned about the eligible facilities that could receive
14	Tobacco Commission funds. That's my main concern.
15	MS. KIM: They are shown on the map what you
16	should have, with the little dots and crosses.
17	MR. FEINMAN: It's a little difficult to see.
18	SENATOR RUFF: Would you have a problem if we set
19	criteria as long as it fits yours? If we'd place more importance on
20	somebody that grew up in the area, say more interest in the
21	nurse practitioner program?
22	MS. BURROUGHS: Yes, you can definitely do that as
23	long as it's within the guidelines.
24	DELEGATE BYRON: I'm trying to understand a little
25	bit. We're coming along at the end when there's a match and

1	the Tobacco Commission, whatever we pay, is it the full amount,
2	are we paying double because we're covering the
3	MS. BURROUGHS: Correct.
4	DELEGATE BYRON: With that, and there's some here
5	that are not \$40,000, some are less and some are a bit more, if
6	it's a small amount, what happens to that individual?
7	MS. BURROUGHS: For the existing State Loan
8	Repayment Program, if you saw someone on there that's
9	\$40,000, for example, may be an issue, if the employee signed a
10	contract with the employer, and if the employer likes the
11	employee and the \$40,000, one person might get 50 and another
12	person get 10. It all depends on the community budget. Some
13	of the folks that would be coming from the State of Virginia,
14	they're all consistent about twenty, twenty-five thousand,
15	depending on the need.
16	DELEGATE BYRON: When you talk about family
17	medicine, we would be making a decision on how much that
18	particular individual would receive or a match?
19	MS. BURROUGHS: Providing a match for the care
20	provider, yes.
21	DELEGATE BYRON: Who determines that for the
22	Tobacco Commission?
23	MS. BURROUGHS: So, for the Tobacco Commission,
24	there would be no match. So, the specific amount will be
25	determined by the it's determined by the Advisory Committee

1	MS. KIM: If you want a specific amount?
2	DELEGATE BYRON: Does that mean we would
3	determine a certain amount for some clinic in the Southside
4	area? Then we would determine what that was to bring them
5	into the clinic, is that what you're saying?
6	MS. BURROUGHS: That's correct, but you have to
7	also look at the amount that the person had. For example, this
8	year we had one person, a total of 20,000, and we could not give
9	her more than 10 from the community and 10 from the federal,
10	because there's different factors you have to take into
1	consideration where you determine the amount.
12	MR. FEINMAN: You wouldn't want to pay out the total
13	for the first year.
14	DELEGATE BYRON: That's right. You're doing this,
15	you're the agency for the federal program. What would you be
16	doing for us, and how does that work?
17	MS. KIM: They would handle the entire loan program.
18	They would be accepting applications and reviewing applications,
19	and their Advisory Committee would be, they would score the
20	application and make awards. They would send out the board
21	letter and the contract and payment. They would handle the
22	administration, beginning and end, and verification and
23	collections. We're paying a portion of their costs, a total of
24	\$35,000 per year. We would help cover some of their personnel
25	costs, travel and marketing costs for the program, but they'd

1	handle this portion of the program from beginning to end.
2	Without federal funds, and we could set it up to access the
3	Tobacco fund and match the federal funds.
4	I think I don't want to replace the local match,
5	facilities, or state funds. My suggestion was that they award as
6	they normally do, the majority of those go to the Tobacco
7	Region. I don't want us to plant those funds. The idea was to
8	expand the program, if they didn't have enough money to fund
9	the federal funds. And that's the only reason why now we're at
10	the bottom of the list and have to make a cutoff once you have
11	funds, and then it becomes just purely our funds. If you only
12	want to give a match or whatever because you're providing the
13	full amount, or a percentage of the loan. If they had \$200,000,
14	\$200,000 for the loan or a portion of that, it's entirely up to you
15	however you want to set it up.
16	MR. CUNNINGHAM: Once you determine eligibility,
17	who does the selection?
18	MS. BURROUGHS: An Advisory Committee.
19	MR. CUNNINGHAM: So, the Selection Committee?
20	MS. BURROUGHS: Yes.
21	MR. SHELL: The percentage of loans you've given
22	out, what percentage was funded?
23	MS. BURROUGHS: This year, we received 72
24	applications, and we were able to fund 24.
25	MS COLEMAN: I do have a question about the

1	process. Initially, you're working within the group, how many
2	eligible applications did you get last year.
3	MS. BURROUGHS: Twenty-four.
4	MS. COLEMAN: Of the 24, how many were you able
5	to fund?
6	MS. BURROUGHS: Twenty-four.
7	MS. COLEMAN: I'm looking at your flow chart for
8	eligibility determination. You've got applicants eligible and
9	ineligible. Of the pool of eligible applicants, how many eligible
10	applicants did you have and were you able to fund all of them?
11	MS. BURROUGHS: So, the Committee, they score all
12	of the applications and they don't go any further, the funds
13	stopped. Let's say the top 24 out of 100, they pull those and
14	then they can fund those and that's all they look at.
15	MR. CUNNINGHAM: That's as far as eligibility?
16	MS. BURROUGHS: You mean you're asking if they are
17	held by the Advisory Committee?
18	MS. COLEMAN: I'm asking about the flow chart where
19	you develop the eligible applications and ineligible applications.
20	The ineligible applications, what's the reason, or how many
21	eligible applications did you have out of that 72?
22	MS. BURROUGHS: That's 72, yes.
23	MS. COLEMAN: And those were ranked?
24	MS. BURROUGHS: Yes.
25	MS. COLEMAN: You only went down as far as you had

1	money?
2	MS. BURROUGHS: Correct.
3	MS. COLEMAN: Then the Tobacco Commission would
4	kick in. So, my question is I don't know what the ranking and
5	scoring is based on, but it looked as if the Tobacco Commission
6	was funding those, is there a risk to us that we would be funding
7	a position who have a higher risk because they had a lower rank?
8	MS. BURROUGHS: So, if you look at the list, several
9	Commission providers were in the higher ranking, but they had
10	higher test scores, so they wouldn't necessarily pick the lower
11	one. They funded a variety of specific numbers, but they
12	wouldn't necessarily just fund the lower ones, but they funded
13	various numbers, over five folks that were funded this year from
14	the Tobacco Commission. I wouldn't necessarily say lower, but
15	you could look at it that way.
16	MR. FEINMAN: Part of the issue and the scoring, but
17	if you look at a local match is required for accessing and the
18	federal dollars. Those clinics and community health providers
19	that don't have money for a match don't make the cut for those
20	24 folks. Some have access to the program in a way they
21	wouldn't have previously.
22	DELEGATE BYRON: Two questions come to mind.
23	When you determine the scholarship people, they already know
24	where they're going to be working?
25	MS. BURROUGHS: Yes, they must have an

employment contract to begin working or a starting date.

DELEGATE BYRON: For how long do they have to work there?

MS. BURROUGHS: So, for employer eligible, no specific time. For the initial award, two years.

DELEGATE BYRON: What prevents those people, those going to the bottom funding other people, those that were eligible for your first group of funding, the people here from the Southside, what would prevent and if they had a match from the Tobacco Commission, when they do a match from the Tobacco Commission?

MS. KIM: We're trying to get through the regular process of making an award, we would be last dollar. We didn't want them to, pulling their match money, because the Tobacco Commission, and that was a concern, or we don't get the state money, because the Tobacco Commission would fund it. What we wanted them to do is go through their normal process and make an award giving priority whose community is providing a match. We also narrowed the facilities that we would fund, so roughly hospitals that were already putting out money. We were trying to target those who did not have Commission funding and might not have a match and just did make the cut based on the scoring. We don't want to replace if you use Tobacco Commission funds and then the federal funds or federal and state funds for the rest, that was my concern.

1	MR. FEINMAN: If any of the Committee members
2	have any heartburn, and I suspect we're the Commission to go
3	forward with this funding and maybe a member of the
4	Commission or the Staff sitting on that advisory selection
5	process, and we could verify things were going the way that we
6	understood it.
7	MS. COLEMAN: How much are we talking about
8	spending on this program?
9	MR. FEINMAN: Two million dollars that we allocated
10	for.
11	SENATOR RUFF: If we decide to do this, we ought to
12	set some priority. I'm concerned we all want good doctors and
13	we don't want to have a problem or create a revolving door
14	situation. Come in for two years and serve and then leave. I
15	would suggest that if we do this, we should have priorities for say
16	nurse practitioners, they're more likely to stay because they are
17	generally part of the community and partners. If we could
18	identify those that came from the Region, we ought to give them
19	a priority, say from several states away, if that's where they
20	came.
21	DELEGATE BYRON: You're talking about \$2 million, is
22	that for a year or four years?
23	MR. FEINMAN: For each of these or the Talent
24	Attraction Program, \$3 million for the Talent Attraction Program
25	and \$2 million for the VDH's program for two years minimum.

1	DELEGATE BYRON: How many people would this
2	affect approximately?
3	MS. BURROUGHS: About 50.
4	MR. FEINMAN: Fifty. You could make a \$20,000 loan
5	and 40 the next. And then, of course, depending if the nurse
6	practitioner, they're less likely to have as much, but it depends.
7	SENATOR RUFF: Is there a motion? Does anybody
8	care? We operate on a motion.
9	MS. KIM: Do you want to keep going with the rest of
10	the program?
11	MR. FEINMAN: Well, thank you very much.
12	Mr. Chairman and Ms. Coleman, Staff motions that we
13	set a Staff motion on the last slide that Stephanie has.
14	DELEGATE WRIGHT: I think a motion is called for.
15	MR. FEINMAN: We'll just delay it.
16	MS. KIM: I have a list of all the motions. From the
17	Virginia Department of Healthcare, the Talent Attraction
18	Program, which is internal and which we fund. The purpose is to
19	encourage recent graduates to stay and work in the Tobacco
20	Region for hard-to-fill occupations. We're trying to better target
21	occupations where there are shortages and where we have
22	difficulty filling these positions. We're trying to provide a two-
23	year commitment, and we would be making payments. When
24	they apply, they show us their loan balances, we would not
25	award more than they have a balance of We would make a

\$24,000 commitment to them and paying out \$12,000 after the first 12 living and working here and a total of 24 after working and living in the Region. We also want to encourage them to become civically engaged in their community. We will give priority to residents of the Tobacco Region. It makes it easier coming back with a Bachelor's degree, and that's a little easier to verify. We're trying to allocate the awards across the region based on population. 

We have some guidelines. We want people that graduated within the last 18 months with a Bachelor's degree or higher and living in the Region and then working for at least 24 months in civic-targeted occupations. We looked at taking different occupations and different workforce development areas and that became very confusing, but we just looked at the Region as a whole and picked out ones that were consistently the same in most regions.

So looking at public school teacher, public school superintendents and realized that not all public school teachers, they're not all in shortage, but there are specific areas like science, math, technology, computer science, or a career in technical education. And those were the Bachelor's degree. For those in science and math and computer technology, and those kind of people are hard to attract, and special education. Speech, language, pathologists, and physical or occupational therapists are not included in health care occupations, and

1	they're separate and they're in short supply all over. Industrial
2	and electrical engineering and information security, network or
3	computer systems analysts. These are the occupations we are
4	targeting, and if they come back in the region and live and work
5	and perform in these occupations, then we would provide up to
6	\$24,000 for a two-year commitment.
7	SENATOR RUFF: You said \$24,000, do you mean up
8	to \$24,000?
9	MS. KIM: Yes. Most of the time with a Bachelor's
10	degree. We're proposing to accept applications from July 1 to
11	August 31 each year. Now, these are proposed guidelines, and if
12	the Education Committee feels differently, we can change it.
13	We'd like to have the applications reviewed and either the
14	Education Subcommittee or Staff can do it and look at the
15	applications and look at the award. There'd be a lot of options,
16	but we want people to be engaged in their community. We
17	would disburse the funds annually after they work for a year.
18	Based on a \$3 million budget, there'd be a minimum of 125
19	recipients. If some of them had a lower requirement, then we
20	could make more awards.
21	Just to give you an idea of what the Region would look
22	like, we're looking at the modified workforce development areas
23	with the Tobacco Commission. Many of them are pretty much
24	the same, but based on 125 awards, this is how we would

generally propose that they would be distributed, depending on

1	the number of applications we receive.
2	MR. FEINMAN: Mr. Chairman, the applicants wouldn't
3	say I'm in Workforce Region 1, this is according to the
4	distribution.
5	MS. KIM: So, here's what we're recommending to the
6	Commission to adopt the Talent Attraction Program guidelines,
7	which were emailed to you.
8	DELEGATE BYRON: Mr. Chairman, is the award based
9	on the residents or based on the workforce or based on what?
10	MS. KIM: Across lines, if they lived in one and worked
11	in the other. I think there's value saying they lived in that region
12	or worked in that region and even though they cross over,
13	they're in the Tobacco Commission region.
14	SENATOR RUFF: Living in one and working in the
15	other?
16	MS. KIM: Yes, we didn't want to make the awards all
17	in one area. So, adopting the guidelines and recommending
18	funding for both of these programs, authorize the Executive
19	Director to enter into an MOU with Virginia Department of Health
20	to administer programs for health care.
21	DELEGATE WRIGHT: I believe in the December
22	meeting we discussed I don't think the one about health was in
23	there yet, I was not fully in favor of it then and I'm still not, and
24	it's the concept. I like an idea of spending it in the Footprint on
25	people that are already here. I think that's the original goal of

the Tobacco Commission. And I think we're getting away from it now. This idea of bringing people in from other parts of the state and not in the Tobacco Commission.

If the program is not working, but if we can't fix it, then I would take this money and give it to organizations like the community colleges and other programs and things of that nature and give incentives for people in the Footprint even more. An idea is to try to keep people in our area. That may not be acceptable to everybody. I think the concept, I'm just opposed to this. I don't think it's something the Tobacco Commission should be doing. That's my comment.

MR. FEINMAN: One thing I want to be clear about. This is the Talent Attraction Program, and certainly if it's the will of the Committee and the VDH Program, as well, we can move the folks in the region to the front of the line in exactly the same way that a company that's not from the region but wants to build a factory and grow the economy of the region, because it's good for the folks that live in the region. If we don't have a pediatrician in the Footprint or a nurse practitioner, our preference would be for that pediatrician or nurse practitioner to be from the Footprint, but bringing somebody from the outside as long as they put down roots and they become engaged and take a job and secure housing in the Footprint, they are from the Footprint, they join us in the same way that a factory owner does. I think ultimately that inures to the benefit to the folks

that are from here, as well.

DELEGATE WRIGHT: Well, pediatrician, that's an example in one particular area. All the other areas are example of where we shouldn't be trying to bring people in outside the Footprint and we should be trying to make people eligible inside the Footprint. Pediatricians and so forth, that's one thing, but I just think that our focus should be on people that are living here now and try to lift them up and that's my opinion.

DELEGATE BYRON: I echo what Delegate Wright was saying. I think what really is concerning is we're going in a different direction and there's been a lot of change in workforce in utilizing the scholarship system or the college system and utilizing our colleges in the area. And there's people that are working together and others to fill the demand jobs and make sure that we're lined up with jobs. When you're talking about doctors and pediatricians and some of the biggest challenges have been getting residency programs at our hospitals in order to bring the physicians here that we need.

And once they get that physician, and I know my niece was three or four hundred thousand dollars in debt from her pediatrician degree. And I don't think a hundred thousand would attract her, that wouldn't give her the type of salary that she needs to accommodate what her requirements are. I still think we can do this in some of the ways that we've been working on and maybe a lesser amount and on a pilot-type

program by making sure that we're all comfortable with it. And that's my comment.

MS. KIM: We can modify all this as we go along and see how the application process goes and how many we get and what kind of applicants we get and then reassess and determine whether there's a better way. Of course, we can just modify it as we go along.

MS. RATLIFF: I'm kind of piggy-backing on what Delegate Byron said. I know in the rural or Southwest areas and they come and maybe they reside in the rural communities or maybe they go into Kentucky or Kingsport, Tennessee to work, but would they be able to benefit from this?

MS. KIM: We thought about requiring one or the other, living or working. I think after looking at it, we decided we wanted to more narrowly focus, but I think our preference would be that they live and work in our region. But at least for the first year, let's require that. And if we have to expand upon it at a later time and allow them to work outside of the region, then we can do that.

MS. COLEMAN: With all due respect, and all the comments that I heard, I think this is an approach that where we need to strengthen the delivery system for education. I do agree that starting with a lesser amount and maybe try that for the first couple of years.

THE COURT REPORTER: Could you please speak up.

1	MR. FEINMAN: Mr. Chairman, in many ways the
2	switch from scholarship grants to the loan repayment was the
3	pilot of this program. But from the Staff's perspective, when we
4	stopped saying here's money to go to school and saying here's a
5	couple of thousand, we'll forgive that loan if you come back. But
6	what we learned is that giving somebody a couple of thousand
7	dollars does not change their economic behavior. And that's
8	reinforced.
9	So, moving to, and I don't want to underplay this, but
10	working on this and trying to generate this program, but it's
11	simply a rehearing of what we've been doing before. We're going
12	to target our loan forgiveness to and folks working in hard-to-fill
13	jobs and increase the amount on a per-person basis, so we can
14	make sure that there's enough money that they'll actually or try
15	to change somebody's behavior. Otherwise, it's still
16	fundamentally what we've been doing before. So, what we're
17	saying is that if you come and work in our region, we will help
18	pay for your education.
19	MS. BARTS: My question is about who will be, as far
20	as the incentive, will the school system itself know about these
21	expenses and have a part in selecting teachers for those
22	positions?
23	MS. KIM: The superintendents are all aware of the
24	program that's being proposed, so they know it's on the table

and we'll make sure we communicate with them and the

economic development folks and other employers who have a vested interest, like engineers, for example. Also, the department's marketing teach, especially for the speech therapist position and occupational therapists, because all that is related to

health care, they're able to hand out our brochures and also

6 competing for those positions.

UNIDENTIFIED: I appreciate your comments, and I would agree, but a word about the pilot. We know in the county we have 840 openings for health care workers, and so that's at least 2018, so there's a real challenge.

Speaking more broadly, absolutely positive, it's a lot of money, and we probably won't know a lot just after two years, but who gets up and goes. I also will say that this is an important point for me and perhaps I'm a bit biased, but I've been in the Footprint 19 years, and I have no intent of leaving, so I think we really need a good mix, those we bring in and those we grow.

SENATOR CHAFIN: I've been here long enough on this Committee to see some really good programs and some that were not quite as good, but we really have areas that are underserved. And we need better outcomes for our educational opportunities that are available, and we all know that and we're all searching for a solution. And these programs deliver solutions. Maybe they're not perfect and maybe as we go along, things will always get better depending on what information we

receive back.

But in the meanwhile, we continue to see that many of us in the county who had health care, tries to get improved and then have people available and train, and I don't know how we can sit here and not want to use our assets to help deliver better outcome to those areas and better educational opportunities, also.

So, I support these programs.

SENATOR RUFF: I appreciate these comments, but nobody is going to medical school at this time, they wouldn't go if they didn't have something in mind, and that's just a thought. I'd be more comfortable if we took out graduate degree programs and psychologists out of it and use the dollars and focus them on the folks that are doing the hard work, like nurse practitioners and physician assistants and the counselors.

DELEGATE WRIGHT: I think you mentioned about doctors.

SENATOR RUFF: You mentioned the doctors.

DELEGATE WRIGHT: I thought you said that, and the reason I mentioned it is because the last doctor we got in our area got the support of our town's council and board of supervisors and promised he would come back to the county, and that's the reason we got one doctor now. They'll come and stay for a while, but this was funded by the Farmville Hospital and they couldn't find anybody to stay. So, it will take somebody

1	from the area, and that's who we need to encourage, somebody
2	from that area, not get somebody from outside. Give them some
3	money to come in our area hoping they'll stay I don't think will
4	work. The idea is to create more avenues for people living there
5	and then understand they're going to come back, that's an
6	opportunity we can give them. I think it's fair to say some of the
7	doctors we have in Southside now they did promise to come
8	back.
9	SENATOR RUFF: If we take a high school graduate
10	and expect them to come back, a lot of us will be gone by then.
11	All right, is there a motion to recommend to the
12	Commission guidelines for the program? All right. It's moved
13	and seconded that we adopt them with the guidelines that we
14	talked about earlier and focusing attention on those who grew up
15	in the area, such as nurse practitioners.
16	MS. KIM: That would be the hard-to-fill positions.
17	SENATOR RUFF: Still have the requirement first
18	consider those that come from the Tobacco Region.
19	MS. KIM: From the Region.
20	SENATOR RUFF: All right, we've got a second. Any
21	further discussion. All in favor, say aye. (Ayes). All opposed?
22	DELEGATE WRIGHT: No.
23	MS. KIM: As far as scoring the applications, do you
24	want Staff to do that?
25	SENATOR RUFF: Unless somehody volunteers. I

1	would say let the Staff do that and come back to us.
2	MR. FEINMAN: Any members of the Committee that
3	would like to be involved, you're welcome.
4	SENATOR RUFF: The next one is the funding \$3
5	million, \$3 million for a two-year period. Is there a motion? We
6	have a motion and a second. Any further discussion? All those
7	in favor, say aye. (Ayes). All opposed? (No response).
8	Next, we go back to the health issues, and that's the
9	\$2 million for that program. Is there a motion? So, is there an
10	amendment to that and to qualify as we discussed? Priority for
11	folks, physician's assistants and nurse practitioners.
12	MS. KIM: There's a lot of information provided with
13	different categories. Maybe to specify which category.
14	SENATOR RUFF: My thinking and welcome comments,
15	but that the doctors, if they have \$400,000 debt, we're not going
16	to buy them for a two-year period. And that's a concern, that's
17	why I suggested what I did.
18	MR. FEINMAN: As I understand the motion, Mr.
19	Chairman, the motion would be to fund VDH with the amendment
20	to the motion, to fund the VDH Program \$2 million with provision
21	that, is that they show preference to people from the Tobacco
22	Footprint originally, and, B, not fund dentists or doctors.
23	MS. KIM: I'd recommend maybe having a lower
24	priority.
25	SENATOR RUFF: Someone needs to make the

1	amendment.
2	MS. COLEMAN: I will make it.
3	MS. KIM: Physicians and dentists.
4	SENATOR RUFF: Yes. Is that agreeable with the
5	original motion? All right. Everybody understand the motion and
6	what we're voting on? All in favor, say aye. (Ayes). All
7	opposed? (Nos). Two nos.
8	The last motion authorizes the Executive Director to
9	enter into an MOU with the Virginia Department of Health to
10	administer the program for health care. Is there a motion?
11	MS. RATLIFF: So moved.
12	MR. CUNNINGHAM: Second.
13	SENATOR RUFF: We have a motion and properly
14	moved and seconded. Any discussion? Hearing none, all those
15	in favor, say aye. (Ayes). Opposed? Two nos.
16	DELEGATE BYRON: On the motion we recently did,
17	the first program called the TAP Program, there's nothing that
18	excludes anyone from the health profession receiving funds for
19	that, right?
20	MS. KIM: The health professions through the Virginia
21	Department of Health, they're targeting just the ones that were
22	mentioned, once a year.
23	Our program would be two years, \$24,000 up to,
24	maximum up to.
25	SENATOR RUFF: There's a cap.

1	DELEGATE BYRON: Up to 24 for two years and actual
2	100 for a nurse practitioner, is that what you said?
3	MS. KIM: Yes.
4	SENATOR RUFF: Yes. All right. Let's move on to our
5	next item on the agenda. Tim.
6	MR. PFOHL: Mr. Chairman and members of the
7	Committee, let's start with the Workforce Financial Aid first and
8	you can focus yourself with what's up on the screen. This is a
9	handout in your packet, and just a quick summary. In January,
10	the Committee agreed to earmark \$3 million for Workforce
11	Financial Aid Proposal, and Tuition Assistance for Tobacco Region
12	residents and Community colleges and higher education centers
13	in the upcoming school year, '19 to '20.
14	Based on the awards that were made a year ago for
15	the current school year, the Staff advised those recipients that
16	were going to reapply that they should assume no more than a
17	five percent increase in the current year funding, with a
18	maximum request of \$315,000.
19	As of March, the new date we received 11 proposals
20	for the '19-'20 school year seeking \$2,945,000 and some
21	change. These are within the \$3 million that your Committee
22	earmarked for this Education budget.
23	We also advised the applicants to align their requests
24	as closely as possible as far as funding priorities. Funding
25	priorities one through five as shown in the middle of that page

adopted by your Committee a couple of years ago. We advised folks that the Commission will continue one-sixth of the cost of training and certification that are getting the same workforce credential training. On the pages after that, you have the summary for each applicant. If you'll turn that page, you have the example, you have Central Virginia Community College requesting \$315,000, and then the breakout charts and you see how many students are served and the cost for each one of the subcategories. And then you have the number of students completing it in the school year, which is our top two priorities.

For instance, on CDCC, you have five subcategories serving 253 students for the '19-'20 school year, and 210 of those students are projected, will complete credentials within that year and it lists the matching funds for each one of those 11 students or applicants. Rather than walking through all of those, I think Staff wants to share that our analysis is that the 11 requests shall clear the bankable progress than adjusting of funds for those.

All those requests generally comply with the Commission's longstanding objectives and providing last dollar assistance. The students working to obtain national recognized workforce credential. The request anticipates serving a total of 2,383 students, resulting in 1,773 of those students obtaining a credential in the 2019-20 school year. The vast majority of the students served here will fall into those top two categories to

complete credentials in six to 12 months. The proposals also estimate matching funds of more than \$3.8 million for all students.

Staff recommends approval of these requests as submitted for Workforce Financial Aid for the Tobacco Region residents in the 2019-2020 school year.

SENATOR RUFF: Any questions of Tim's presentation? All right.

Tim, are we having any conversations about those who don't finish the program? We hear that some people don't complete the programs because of family commitments, child care, and other financial demands. We also hear some people don't complete programs because they're offered jobs and they get a course or two that they need and then they move on to employment. The numbers are a little bit startling. How many people initially enrolled in the community college and don't complete, I'd say the figures are around 45 percent that don't complete. You'll have to trust me on that number. Beyond that, efforts are being made at the community colleges to keep people enrolled and working toward completion. Folks in the audience can answer that better than I can.

SENATOR RUFF: I won't ask to answer that now, but we need to get together and see if we can't better understand what we need to make sure that they complete the programs as possible. Any other discussion on Tim's report on that subject?

1	Is there a motion?
2	DELEGATE WRIGHT: I move we accept the Staff's
3	recommendation.
4	UNIDENTIFIED: Second.
5	SENATOR RUFF: It's been moved and seconded the
6	Staff's recommendation be accepted. All in favor, say aye.
7	(Ayes). Opposed? (No response).
8	MR. PFOHL: Then we'll shift over to the competitive
9	education round. These are the requests and the guidelines were
10	posted on our website, and the call for proposals was posted with
11	a March due date, as well. We have received 11 requests this
12	year for a competitive education that the Commission budgeted
13	for, and the Commission budgeted \$2 million this year or in the
14	current fiscal year. And we had more than twice that available.
15	Initially, we received \$2.9 million of requests and there were
16	some reductions, but ultimately we settled on two-and-a-half
17	million dollars requests. And Staff is recommending \$2.2 million,
18	with the majority being a Staff recommendation for full funding
19	of those proposals.
20	It turns out that the education wasn't all that
21	competitive this year and we had more available than we had
22	requests.
23	If you'd like me, Mr. Chairman, I can walk through
24	these and try to be extremely brief. There's not a whole lot of
25	competition for the funds this year.

SENATOR RUFF: Well, please go through it.

MR. FEINMAN: Mr. Chairman, I'll remind the Committee this is the first time I believe we've seen a program undersubscribed since I've been here. It does not necessarily be an invitation to build up Staff recommendation.

MR. PFOHL: Before I get started, I'd like to say a note about the quality of the requests. Only 11 requests this year, and we used to get 45, and we don't miss those days. I attribute the volume and the quality to a couple of things. First off, the Committee's tightening of the objectives to focus on short-term nationally recognized credential training; secondly, the work of Sarah Capps and Sara Williams, who spent a lot of time advising each one of these applicants before they ultimately submit their projects. I think we can attribute a low volume but high quality to those factors.

I'll start off with the Blue Field College request. It was originally submitted for \$102,000, and they were able to acquire some equipment from the former Pioneer Hospital in Stuart to equip the Undergraduate Nursing Career Program. So, Blue Field reduced their request to \$84,814.47, a very precise number. Fifty percent of equipment and supplies needed to establish this program. This is located in the space added to their Science Building with significant assistance from the Commission, and the college added a third floor to their Science Building, and they got a couple of other grants, and they had one of the initial Tobacco

1 Commission loans, which was a million dollar loan, which enabled 2 them to have the space to expand. Full capacity in the fourth 3 year, there will be 120 students enrolled in the Nursing Program, 4 and Staff recommends funding of \$84,814,47.

So, the Staff recommends with a preference for Commission funds to be directed to the purchase of longer life equipment purchases rather than consumables.

Second request is from Danville Community College for the Advanced IT/Cybersecurity Program Expansion. Funds are requested to support the \$200,000 estimated construction costs for relocation of DCC's Advanced IT and Cybersecurity Program into existing space to be renovated on campus. The Commission previously gave an award to start that program in 2017. The expansion will increase enrollment from 38 students annually to 66. And Staff recommends an award of \$200,000.

Next one up is Longwood University Foundation. Enhancement to Nursing Simulation Laboratory at Longwood University, and a request for \$59,934.13. We have some very specific requests today. This would be to support 60 percent of the costs and replacement costs of mannequins in the Nursing Simulation Laboratory at Longwood. That was previously supported with Commission grants dating back to 2009. Some of the equipment is outdated and can no longer be serviced. That's why Longwood is asking for some replacement cost help. The Staff would recommend that the grant be no more than 50

- percent of the \$100,000 cost, in fact, \$50,390. However, given
  the fact that this has been a very successful program as student
  enrollment of 250 students. Staff is suggesting that the
  University be offered an interest-free loan with a term of five
  years or up to five years to be administered in-house by
- Commission Staff, something like how we administer the TROF
   loans.

So, Staff recommends a grant award, but alternatively recommends an interest-free loan of up to five years for these project expenses.

I spoke to the provost this morning and he wouldn't be here today. They are discussing this loan offer and they are aware of the offer.

Next one up, Mountain Empire Community College to establish a Dental Assistant Career Studies Certificate Program, requesting \$195,700. The program would be established in the newly created, recently opened Center for Workforce Innovation in the Town of Appalachia. The facility opened late last year and got funding support from the Special Projects Committee last year to renovate a former elementary school.

The application seeks support for a full-time program director, only one year in the startup period for equipment, software, supplies, and marketing. The proposed program to be completed in two semesters with two cohorts, each with 15 students completing annually.

While they relatively have lower or minus outcomes with this, it aligns well with our funding. And Staff recommends an award of \$195,700 for Mountain Empire.

The next one up is Patrick Henry Community College Foundation, Manufacturing and Engineering Technology Complex requesting \$600,000 of Phase Two renovations. Out of the \$3.8 million estimated renovation costs, and they'll renovate a second building at the complex or the MET complex, a former motor sports facility that they acquired in 2013.

Renovations of the second building will allow for expansion of Advanced Manufacturing and a program for welding and for development for precision machining. The new facility will allow more than doubling from 16 welding to a total of 35. The Commission previously supported the MET complex in 2015, with a \$600,000 grant. Staff toured the building a couple of weeks ago and really impressive.

While the net new welding outcomes alone are not substantial and their outcomes are somewhat modest, the ability to initiate and expand offerings in precision machining significantly boosts their outcomes for the useful life of this facility and aligns closely with the Commission's advanced manufacturing training and objectives. The matching funds of \$3.2 million from the Harvest Foundation, making this the most highly leveraged proposal in this cycle and in recent years. One of the top three scoring proposals in this cycle. And Staff

recommends an award of \$600,000.

Next up is Radford University Foundation, Counselor Education Program, \$325,000 requested. This project was initially submitted just under a half million dollars, and Staff has had multiple conversations with the project leadership, and the request had been revised to \$325,000. It would establish a Bachelor's degree program from Radford School of Counseling for public school counselors. The request support for personnel services in year one of the project, \$131,000, and transfer payments in years two and three subsidized students' tuition costs. One cohort of 22 students, Master's level students for every three years. By all accounts, this is a much needed program to address regional shortages.

The proposed subsidy is a significant precedent for other higher ed. programs. Only one cohort will be supported by this grant, and it is unclear how additional cohorts could be supported or that ongoing demand will exist. We feel it's not unreasonable to expect that there's adequate demand for the program.

However, Staff has identified a gap of approximately \$60,000 between year one and expenses, between the operating expenses, approximately \$130,000 and tuition revenue of approximately \$70,000 when the first year the cohort is only taking six credit hours. They're not paying for as much tuition as the supporting program.

Staff suggests that the Committee consider for year 1 one operation, and the Staff recommends an award of \$60,000 2 for Year One personnel expenses. There are some folks from 3 Radford here. 4 Next one is Scott County Career and Technical Center 5 for the Barn Project, requesting \$26,559.98. This is a project 6 referred from the Agriculture Business back in January. 7 Complete development of a dedicated agriculture, education 8 facility at the Scott County Career and Technical Center. Courses 9 are offered in livestock and equine management, veterinary 10 science, agri-science, and technology. 11 Staff notes that the technical training has only been a 12 funding priority for the Education Committee when VCC credits 13 are also awarded. And that's the Pittsylvania Career and 14 Technical Center. Scott County Career and Technical Center has 15 provided documentation from two community colleges of 16 agriculture funding for people enrolled is not a realistic option. 17 We are supportive of this proposal to provide TCC 18 training for students in livestock management and veterinary 19 sciences. However, SCCTC has provided documentation from the 20 two area community colleges, agriculture training for dual 21 enrollment credits is not a realistic option. Given the modest size 22 of this request, albeit with modest support from this proposal to 23

provide CTE credit training to students for careers in livestock

management and veterinary science in a region that relies

24

heavily on those agriculture sectors and related careers, but does 1 not offer dual enrollment. 2 Staff recommends an award of \$26,559.98. 3 Next up is Southern Virginia Higher Education Centers 4 IT Academy Expansion to Meet Regional Workforce Needs, 5 requesting \$505,929. The original request was for \$688,000, but 6 the Staff worked with them and revised a request of \$505,929 to 7 support the majority of new personnel costs over three years for 8 two new instructors, a lab technician, and \$10,000 for marketing 9 and materials. 10 The funding would support expansion of the IT 11 Academy at the Higher Ed Center and expanding lab and 12 classroom areas for accommodating more students in the 13 existing program, as well as having a new TIA certification 14 program and IT fundamentals, IT Linux, PenTest, and Cloud. 15 Expansion of existing programs and expansion of several new 16 national certifications. 17 The Commission first supported the IT Academy in 18 2014 with a substantial grant. Estimated enrollment for the four 19 new programs is 151 students in the next three years, and all 20 programs the existing and new one, estimated enrollment is 583 21 students over the next three years. 22 Staff suggests supporting 100 percent of the new 23 instructor personnel costs in year one and marketing the 24

program and enrolling students. That would be 100 percent of

1	costs of the two new instructors in year one, but reducing this to
2	50 percent in year two where the applicant is requesting 75
3	percent support and reduction in year two for instructor costs,
4	and then 50 percent in year three as requested by the Higher Ed
5	Center.
6	At this point, we're not convinced there is a need for

At this point, we're not convinced there is a need for a new lab technician at \$40,000 a year or for the requested marketing costs, \$10,000.

Staff's recommendation based on the total deduction of that \$100,000 in those areas. With the other two IT proposals, the other programs have demonstrated success and the opportunity to expand further and demand from employers, including Microsoft providing high skilled high wage positions across the Region in a variety of businesses and institutions, banks, schools, hospital, et cetera. As such, it would align closely with the educational program objectives and outcomes.

The Staff recommendation is an award of \$406,000 to support the new instructor salary and benefits costs, excluding the lab tech position and marketing, contingent on no more than 50 percent of the instructor costs being covered by Commission funding in years two and three of the project.

Next one up is Southside Community College
Foundation for a CITE Lab Expansion IT project. Grant funds are requested for a portion of costs to hire a new 12-month coordinator for expanding into two new information technology

1	training areas at the Center for Information Technology
2	Excellence in South Hill. I'd point out this is supported at 75
3	percent of instructor or program coordinator costs in year one,
4	and hopefully growing enrollment in these programs. The
5	outcomes of CITE's expansion are projected to increase some 30
6	students to 75, which is an increase of 45 students annually.
7	The Commission provided a startup grant award in
8	2016 to support the IT Academy in South Hill. This expansion
9	aligns closely with the program objectives to assist in training
10	students for high wage positions that are in demand across South
11	Hill. This proposal received one of the top three scores.
12	The Staff recommends an award of \$226,355.
13	Next up, Southwest Virginia Community College,
14	Diagnostic Medical Sonography Program. This would establish a
15	new two-year program in diagnostic medical sonography.
16	Currently, only three schools in the VCCS offer this program.
17	Northern Virginia Community College will provide course
18	instruction at a satellite location in Southwest Community
19	College. Lab instruction will take place on site at SWCC, which
20	will be the only VCCS location to offer this program in the
21	Tobacco Region.
22	The majority of the requests just under \$150,000 will
23	be used for one-half of the costs for ultrasound machines and
24	other various ultrasound and related instructional material. The

balance of the request is for supplies and marketing outreach.

Relatively modest outcomes on this at 12 students enrolled annually, but these are well paying jobs and much in demand in the region and a median salary is just under \$60,000 and experienced workers can earn over \$80,000. It's a new program that leads to well-paying medical careers that are in demand and this proposal was one of the top three scores in this cycle.

Staff recommends an award of \$165,337.09.

The last one in this competitive round is Wytheville Community College, a \$175,000 request to create a simulated hospital lab. This will be at the Crossroads Institute in Galax. The current lab is used by the Practical Nursing Program at Crossroads and is very modest with much of the equipment nearing the end of useful life. The space will be redesigned to develop a 6,000 square foot simulated hospital lab. It'll be home to the Practical Nursing Program and additionally serve as a training site for the short-term Nurses Aid Program, as well as customized training for health care organizations and emergency responders.

While the additional space does not result in a modest growth within the practical nursing aid programs, the primary benefit of this project is the higher level of training offered to the students. There's a strong case made for local job demand for these graduates, 148 practical nursing positions averaging \$35,000, and 337 first aid positions at \$24,000. This is a clear and logical response to significant demand from employers

1	seeking nursing graduates in the Southwest Region and therefore
2	aligns closely with the Education Program objectives and
3	outcomes.
4	So, Staff recommends an award of \$175,000. That's
5	it.
6	SENATOR RUFF: All right. What we'll do is take these
7	as a block unless there's a single objection.
8	3513, 3518, 3517, 3510, 3512, 3515, 3497, 3514,
9	let's take that out of the block, 3511, 3509, 3516. Is there a
10	motion to approve all of those except 3514?
11	DELEGATE WRIGHT: So moved.
12	SENATOR RUFF: It's been moved and seconded. All
13	those in favor, say aye. (Ayes). Opposed? (No response).
14	DR. ADAMS: Good afternoon, Mr. Chairman, and
15	members of the Committee. I'm Betty Adams, I'm Executive
16	Director of the Southern Virginia Higher Education Center, and I
17	want to humbly request that the Committee consider funding us
18	at the full amount, and I want to speak to each of the areas that
19	Tim has described for reductions.
20	Before I do that, I want to make a few comments. I
21	know the Tobacco Commission, and rightly so, is very concerned
22	about duplicating programs. And you have before you three that
23	are aligned with IT, and I want you to know that all of these
24	grants are extremely important. We find that IT cuts across all
25	business centers and more demand than can be filled. You may

1	have seen in the Richmond Times-Dispatch this morning an
2	article about these universities, including George Mason and
3	VCU, are beginning to adopt a credential in these degrees,
4	because these IT skills are so universal.
5	I want you to know that the Southern Virginia Higher
6	Education Center is leveraging the investments that you've
7	already made in the IT Academy by working with our community
8	colleges and our partners. That's why we have articulation
9	agreements with both DCC and SVCC so that IT Academy
10	completers can transfer into those programs.
11	We also have an agreement that allows Southside
12	Virginia Community College students to co-enroll and sit through
13	our IT Academy courses and earn all its credit. We also, this
14	year, started a Career Academy for our juniors and seniors in
15	three public schools, Mecklenburg, Charlotte, and Halifax, come
16	to the Center Monday through Friday from 8:30 to 10:30 and
17	take courses from the IT Academy. In an agreement with
18	Southside Virginia Community College, we're teaching college
19	degree curriculum. So, those young people after a year can earn
20	a certificate and industry-approved credentials. We were happy
21	in our first year that 26 certificates from Southside Virginia
22	Community College were conferred.
23	I can explain how the IT Academy is different from our

24

and get a job and move on with their careers.

Also, our programs are hands-on and more than 50 percent of other programs are spent in labs doing the work. It is focused on credentials and the employability skills. It's also developed and customized to meet the IT employers' immediate needs, and it's built from scratch. This is not an off-the-shelf credential. We have to take the credential and then build upon it with hands-on exercises.

Microsoft is very happy that we have and Anthony Putorek, who is our contact, was not able to be here today, but I believe he wrote a letter to Senator Ruff. Microsoft refers to the IT Academy as its flagship data center training center, and they're replicating the model we have in South Boston internationally. Our completion rate is approaching 90 percent, our post-employment rate. Microsoft is very happy with the skills and the folks that we are turning out, that's why they put forward \$200,000.

I'd like to speak to each of those three areas. First of all, the instructor reduction from 75 to 50 percent. One of the reasons why we've been so successful, we have recruited topnotch instructors and brought them in and prepared them and helped develop the curriculum. So, in first year of the grant, we will use that year to recruit and develop these instructors. They'll have to be credentialed so that will take time, and they will use their time to develop the curriculum. We're not going to

1	roll out multiple programs immediately. They will be staggered.
2	It will not be until Year Two, that we will begin to generate
3	revenue, that's why we need the instructional support of 75
4	percent in that second year.
5	The lab tech, we have 24 students in each cohort, and
6	you can imagine when you have 24 students that are doing
7	hands-on lab exercises, it's difficult for an instructor to be able to
8	supervise and manage 24 hands-on individual items, and that's
9	where the lab tech comes in.
10	The lab tech also helps make sure that the equipment
11	is up and maintained and the lab techs work one-on-one with the
12	students to help them develop the areas where they're having
13	any problems. And eliminating the marketing means that it will
14	be difficult for us to recruit and generate revenue. So, that's why
15	we need this.
16	With all due respect, I'd ask you to reconsider and
17	increase the amount to the \$505,000. I'll be glad to take
18	questions now.
19	MR. CUNNINGHAM: Did you say that 50 percent were
20	in delay?
21	DR. ADAMS: More than 50 percent.
22	MR. SHELL: When they complete the course, will
23	most of them be employed?
24	DR. ADAMS: When we started this at the data
25	centers, and what we found everybody needs an IT tech now.

I	mese people that have completed, they re working in hospitals
2	and small employers, they're going to the VIR Research Center
3	and the public school system, as well as Microsoft and the Data
4	Center in Clarksville.
5	SENATOR RUFF: Let me follow up on that. A month
6	ago, I was at the Southern Virginia Technology awards in
7	Danville and a young lady come up and said I'm from Halifax
8	County and went through the training at the Higher Ed Center,
9	and she's now employed and extremely happy. That's probably
10	the best we have in that program. She has a good income now,
11	and I think we should try to keep that going as best we can.
12	MR. CUNNINGHAM: Without the lab technicians, who
13	would maintain the equipment?
14	DR. ADAMS: The instructor would have to do that and
15	that takes them away from their student time.
16	DELEGATE BYRON: At the appropriate time, I'd like to
17	make a motion that we increase the funding to the full amount
18	that they requested.
19	SENATOR RUFF: We have a motion and a second. All
20	in favor, say aye. (Ayes). Opposed? (No response).
21	DR. ADAMS: Thank you very much.
22	SENATOR RUFF: That gets us to the fifth year
23	extensions.
24	MR. PFOHL: We have two items of other business
25	regarding the Advanced Manufacturing Center of Excellence

Southern Virginia Higher Ed Center, Center for Manufacturing
Excellence, Phase II. A \$2 million grant that was approved
September of 2015. At the end of September, it will reach the
end of its fourth-year extension. The standard project is three
years, and the Commission would have to authorize a fourth-year
extension administratively.

The Higher Ed Center is requesting an additional two years and revision of scope. That means changing the original focus to a proposed robotics lab. This involves a request to repurpose \$600,000, the current grant balance, to equip the new robotics lab.

Staff recommends approval of the revised scope and for a sixth-year extension to September 23<sup>rd</sup>, 2021, two years, so they can do the revised new program, contingent on a line-item detail budget for new proposed expenses being approved by the Commission's Executive Director once the final details are known.

The second extension is the New College Institute

Center of Excellence Phase II grant approval in May, 2015. Then
in May of 2017, the Commission froze the New College Institute

Center of Excellence grant.

New College Institute requests a sixth year extension and release of the budget freeze for the Phase II Grant Number 3098. Staff notes that the balance is for equipment, staffing, and Patrick Henry Community College to support their Precision Machine Program.

1	Staff recommends that the grant extension be
2	approved to September 23, 2021 and that the Staff will work
3	with New College Institute to move the project forward.
4	MR. SORRELL: We have been talking with them and
5	expect good results in the future.
6	SENATOR RUFF: Do I have a motion? I have a
7	motion and a second. All those in favor, say aye. (Ayes).
8	Opposed? (No response). That motion carries.
9	Do I have any public comment? Hearing none, we're
10	adjourned.
11	
12	
13	PROCEEDINGS CONCLUDED.
14	
15	
16	
17	
18	
19	
20	
21	
22	
23	
24	
25	

1	
2	<b>CERTIFICATE OF THE COURT REPORTER</b>
3	
4	I, Medford W. Howard, Registered Professional
5	Reporter and Notary Public for the State of Virginia at Large, do
6	hereby certify that I was the Court Reporter who took down and
7	transcribed the proceedings of the <b>Tobacco Region</b>
8	Revitalization Commission, Education Committee Meeting,
9	when held on May 29, 2019, at 11:00 o'clock a.m., at Hotel
10	Roanoke and Conference Center, Crystal Ballroom A/B/E, 110
11	Shenandoah Avenue, Roanoke, Virginia.
12	I further certify this is a true and accurate transcript,
13	to the best of my ability to hear and understand the proceedings.
14	Given under my hand this 8th day of July, 2019.
15	
16	
17	Medford W. Howard
18	CCR
19	
20	
21	
22	
23	
24	
25	