

DSRIP/SIM Workforce Workgroup

Established in May, 2015

Charge:

- Development of recommendations regarding workforce needs essential to the goals and objectives of DSRIP and SIM
 - Promote development of better integrated models of care
 - Assure comprehensive, coordinated and timely access to care
 - Improve population health



Workforce Workgroup members agreed on need to “develop core competencies and/or training standards for workers in care coordination titles”

Three subcommittees convened to focus on different aspects of effective care coordination

- **Subcommittee 1:** Identification of core competencies and functions and regulatory barriers that could impede effective care coordination
- **Subcommittee 2:** Identification of curricular content for educating the health workforce on core concepts in care coordination (embedded in health professions education curricula and to use for continuing education)
- **Subcommittee 3:** Identification of recommended core curriculum for training workers in care coordination titles



Subcommittee of the Workforce Workgroup Was Formed to Identify Recommended Core Curriculum for Training Workers Who Provide Care Coordination Services

Charge:

- Review curricula used by groups across the state for training workers in care coordination titles
- Examine overlap in core content of these training programs
- Identify key curricular components to include in all basic training programs for workers in care coordination titles



Subcommittee Membership

- **Center for Health Workforce Studies**, Jean Moore and Bridget Baker
- **Fort Drum Regional Health Planning Organization**, Tracy Leonard
- **New York Alliance for Careers in Healthcare**, Shawna Trager
- **State University of New York, Office of Academic Health & Hospital Affairs**, Heather Eichin
- **JFK, Jr. Institute for Worker Education, City University of New York**, Carrie Shockley and William Ebenstein
- **1199SEIU/League Training & Upgrading Fund**, Sandi Vito, Becky Hall and Selena Pitt
- **Paraprofessional Healthcare Institute**, Carol Rodat
- **Office of Mental Health**, Johny Barnes
- **Home Care Association of NYS**, Alexandra Blais



Progress to Date

Primary focus of curricula review:

- New York Alliance for Careers in Healthcare Training
- North Country Care Coordination Certificate Program
- 1199SEIU Care Coordination Fundamentals
- CUNY Credited Course Sequence in Care Coordination and Health Coaching

Reviewers found a great deal of consistency in content across the different training curricula

Worked collaboratively to create training guidelines for workers who provide care coordination services

Core Curriculum Guidelines Developed

Consists of 9 modules that include:

- topics,
- learning objectives and
- resources

Estimated completion time for all modules between 36-45 hours

Designed to be adapted to fit local circumstances

- Could be embedded in medical assistant or home health aide training
- Adjusted for geography, educational level of trainees, patient population served
- Could serve as a base for care coordination training worth college credit



Summary of Modules

- Introduction to New Models of Care and Health Care Trends
- Interdisciplinary Teams
- Person-Centeredness and Communication
- Chronic Disease and Social Determinants of Health
- Cultural Competence
- Ethics and Professional Behavior
- Quality Improvement
- Community Orientation
- Technology, Documentation and Confidentiality



Reference Materials

List of and links to (where available) all training programs reviewed

Resources

- Textbooks
- Supplemental readings
- Documentaries/programs
- On-line resources



Solicited Feedback on Guidelines from Stakeholders

- Are guidelines needed?
- Was anything missing from content?
- Are there additional stakeholders who should review guidelines and provide feedback?
- What strategies could be used to encourage use of the guidelines?
- How can the guidelines be kept current?



Feedback from Stakeholders

- Generally positive
- Thought guidelines make sense – like the flexibility associated with ‘guidelines’
- Provided recommendations for additional content and resources
- Suggestions were reviewed by subcommittee and, where appropriate, guidelines were revised to reflect this input

Next Steps

- How can we make these guidelines readily accessible to NY's providers and educators?
- What strategies could be used to encourage use of the guidelines?
- How can the guidelines be kept current?



Thank You