SHIP/DSRIP Full Workforce Workgroup Meeting

DSRIP Update
# Workforce Deliverables and Deadlines

<table>
<thead>
<tr>
<th>Milestone / Deliverable</th>
<th>AV Driving?</th>
<th>Prescribed Reporting Period / Completion Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Workforce Strategy Spending</td>
<td>Yes</td>
<td>Baselines: DY1, Q4 Actuals: DY1, Q4 and subsequent Q2 and Q4</td>
</tr>
<tr>
<td>Workforce Staff Impact Analysis (Redeployment/Retraining)</td>
<td>Yes</td>
<td>Baselines: DY1 and DY2 Q1 Projections: DY1-DY5 Actuals: DY1, DY2 Q2 and subsequent Q2 and Q4</td>
</tr>
<tr>
<td>Workforce New Hire Analysis</td>
<td>Yes</td>
<td>Baselines: DY1 and DY2 Q1 Projections: DY1-DY5 Actuals: DY1, DY2 Q2 and subsequent Q2 and Q4</td>
</tr>
<tr>
<td><strong>Milestone #4</strong>: Produce a Compensation and Benefits Analysis.</td>
<td>Yes</td>
<td>DY1: DY2, Q1 DY3: DY3, Q4 DY5: DY5, Q4</td>
</tr>
<tr>
<td><strong>Milestone #1</strong>: Define target workforce state (in line with DSRIP program’s goals)</td>
<td>No</td>
<td>None / Suggested completion date of DY2, Q1</td>
</tr>
<tr>
<td><strong>Milestone #2</strong>: Create a workforce transition roadmap for achieving your defined target workforce state.</td>
<td>No</td>
<td>None / Suggested completion date of DY2, Q2</td>
</tr>
<tr>
<td><strong>Milestone #3</strong>: Perform detailed gap analysis between current state assessment of workforce and projected state.</td>
<td>No</td>
<td>None / Suggested completion date of DY2, Q2</td>
</tr>
<tr>
<td><strong>Milestone #5</strong>: Develop training strategy.</td>
<td>No</td>
<td>None / Suggested completion date of DY2, Q2</td>
</tr>
</tbody>
</table>
DSRIP Workforce Spending DY1 – DY2Q2

Other includes:
- Workforce Vendor Subcontracting
- Compensation and Benefit Report Development
- Scholarships

$109.5M
Spent by PPS

$116.2M
Spending commitment
Progress Toward Total Five Year PPS Workforce Spending Commitment as of DY2 Q2
PPS Progress Toward DY2Q4 Spending Commitment

% of Minimum (80%) DY2 Q4 Spending Threshold Met (AV Driving)
Summary of Vacancy Rate Snapshots

Vacancy rates for positions varied among the PPS, even in overlapping regions. This may be explained by the responses and response rate provided by the participating providers in the PPS network as well as other local attributes of the provider network.

PPS Snapshots:
• There were six PPS who had 12 or more job titles with vacancy rates over 8%
  • Four Upstate
  • Two New York City

Top job titles where PPS had vacancies above 8%:
• Primary Care MDs – 12 PPS
• Psychiatrists – 12 PPS
• Primary Care NPs – 16 PPS
• Psychiatric NPs – 17 PPS

Top emerging titles where PPS had vacancies above 8%:
• Peer Support – 16 PPS
• CHWs – 9 PPS
• RN Care Coordinators – 11 PPS
• Care/Patient Navigators – 12 PPS
### UPDATED Summary Snapshot: High Vacancy Rates by Job Title

**Number of PPSs with 8%+ Vacancy Rates, by Job Title**

<table>
<thead>
<tr>
<th>Job Title</th>
<th># of PPSs with 8%+ Vacancy Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary Care Physician</td>
<td>12</td>
</tr>
<tr>
<td>Primary Care Nurse Practitioner</td>
<td>16</td>
</tr>
<tr>
<td>Psychiatric Nurse Practitioner</td>
<td>17</td>
</tr>
<tr>
<td>Staff Registered Nurse</td>
<td>8</td>
</tr>
<tr>
<td>Licensed Practical Nurse</td>
<td>8</td>
</tr>
<tr>
<td>RN Care Coordinators/Case Managers/Care Transitions</td>
<td>11</td>
</tr>
<tr>
<td>Psychiatrist</td>
<td>13</td>
</tr>
<tr>
<td>Psychologist</td>
<td>4</td>
</tr>
<tr>
<td>Medical Assistant</td>
<td>8</td>
</tr>
<tr>
<td>Social and Human Service Assistants</td>
<td>5</td>
</tr>
<tr>
<td>Substance Abuse and Behavioral Disorder Counselors</td>
<td>7</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Job Title</th>
<th># of PPSs with 8%+ Vacancy Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nursing Aide/Assistant</td>
<td>9</td>
</tr>
<tr>
<td>Certified Home Health Aide</td>
<td>5</td>
</tr>
<tr>
<td>Personal Care Aide</td>
<td>6</td>
</tr>
<tr>
<td>Licensed Clinical Social Worker</td>
<td>14</td>
</tr>
<tr>
<td>Bachelor's Social Worker</td>
<td>3</td>
</tr>
<tr>
<td>Licensed Master’s Social Worker</td>
<td>9</td>
</tr>
<tr>
<td>Social Worker Care Coordinator/Case Manager/Care Transition</td>
<td>6</td>
</tr>
<tr>
<td>Care Manager / Coordinator</td>
<td>8</td>
</tr>
<tr>
<td>Care or Patient Navigator</td>
<td>12</td>
</tr>
<tr>
<td>Community Health Worker</td>
<td>9</td>
</tr>
<tr>
<td>Peer Support Worker</td>
<td>16</td>
</tr>
</tbody>
</table>

**Note:** 23 PPS submitted vacancy rate data
## Summary Snapshot: PPSs with High Vacancy Rates

### Number of Job Titles with 8%+ Vacancy Rates, by PPS

<table>
<thead>
<tr>
<th>PPS</th>
<th># of Job Titles with 8%+ Vacancy Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Suffolk Care Collaborative</td>
<td>0</td>
</tr>
<tr>
<td>Nassau Queens PPS</td>
<td>5</td>
</tr>
<tr>
<td>Advocate Community Partners</td>
<td>8</td>
</tr>
<tr>
<td>NYU Lutheran PPS</td>
<td>10</td>
</tr>
<tr>
<td>Maimonides Medical Center</td>
<td>14</td>
</tr>
<tr>
<td>SBH Health System</td>
<td>15</td>
</tr>
<tr>
<td>New York-Presbyterian/Queens</td>
<td>8</td>
</tr>
<tr>
<td>OneCity Health PPS</td>
<td>7</td>
</tr>
<tr>
<td>Alliance for Better Health Care</td>
<td>10</td>
</tr>
<tr>
<td>Albany Medical Center Hospital</td>
<td>9</td>
</tr>
<tr>
<td>Bronx Health Access</td>
<td>1</td>
</tr>
<tr>
<td>Central NY Care Collaborative</td>
<td>9</td>
</tr>
<tr>
<td>Finger Lakes PPS</td>
<td>12</td>
</tr>
<tr>
<td>Montefiore Medical Center</td>
<td>5</td>
</tr>
<tr>
<td>WMCH Health PPS</td>
<td>9</td>
</tr>
<tr>
<td>Bassett PPS</td>
<td>12</td>
</tr>
<tr>
<td>Adirondack Health Institute</td>
<td>14</td>
</tr>
<tr>
<td>Care Compass Network</td>
<td>8</td>
</tr>
<tr>
<td>North Country Initiative</td>
<td>16</td>
</tr>
<tr>
<td>Community Partners Western NY</td>
<td>11</td>
</tr>
<tr>
<td>Millennium Care Collaborative</td>
<td>9</td>
</tr>
<tr>
<td>Mount Sinai</td>
<td>7</td>
</tr>
<tr>
<td>New York-Presbyterian</td>
<td>8</td>
</tr>
</tbody>
</table>

Note: Only 23 PPSs submitted vacancy rate data
Note: Only 22 key job titles were considered for this analysis
PAOP Mid-Point Assessment Presentations
Workforce Highlights
Collaboration with Arthur Ashe Institute for Urban Health (CCHL)

Step 1
- Arthur Ashe aligned the training strategy with our PPS’s approach to CCHL and the Brooklyn Community Needs Assessment (developed with Maimonides, HHC and NYAM).

Step 2
- Arthur Ashe interviewed key community-based partners to assess their training capacities and capabilities relative to the needs of the populations they serve.

Step 3
- Arthur Ashe created the NYU Lutheran PPS’s Cultural Competency and Health Literacy Training Strategy, which was approved by the PPS’s Executive Committee.

Step 4
- Next steps: Implementation of Cultural Competency and Health Literacy Training Strategy
PPS Innovations: What is New for Patients?

43 Patient Navigators, Community Health Workers, Peers, and other Field-Based Staff working across a variety of settings

- Navigators in Emergency Departments
- CHWs providing HIV/HCV testing in community
- CASAC making CPEP linkages to community SUD tx
- Navigators contacting tobacco using population

Operating in Patient Homes and Communities
Workforce

- Leveraging Long-term Pipeline
  - Career exploration programs

- Collaborating with Institutions of Higher Education
  - Bachelors & Masters Programs at community college (i.e. Nurse Practitioner & Social Worker)
  - Development of North Country Care Coordination Certificate Program with SUNY Jefferson & SUNY Canton

- Customized Training Videos (DSRIP 101, Blood Pressure Measurement, Health Literacy & MEB, Medicaid Health Home, Care Transitions)

- Provider Incentive Programs
  - Approximately $3 million for recruitment of 8 Primary Care Physicians, 6 Family Nurse Practitioners, 2 Psychiatric Nurse Practitioners, 5 Physician Assistants, 2 Psychologists, 2 Psychiatrists, 2 Dentists, 4 Certified Diabetes Educators (growth), 1 Licensed Clinical Social Worker (growth) & 6 Licensed Clinical Social Worker-R (5 growth, 1 recruit)

- Regional Expansion of Graduate Medical Education
  - Partner hospital - recipient of Rural Residency GME Grant. PPS providing support of residency spots at local GME Program with rotations at regional sites. Minimum 3 year service commitment to region
A HEALTHCARE CAREER IN THE NORTH COUNTRY!

WANT MORE INFO? Contact Santina Baker at sbaker@fdhpo.org or visit www.fdhpo.org.
• Partnered with Nassau Queens PPS, the Long Island Health Collaborative and the Center for Suburban Studies at Hofstra University to deliver a Cultural Competency and Health Literacy (CC&HL) Training program. 60 Master Trainers and 122 workforce staff have been trained as of January 2017.

• SCC Facilitated 17 OASAS Certified SBIRT Training Sessions across 9 Suffolk County Hospitals, resulting in 238 staff across hospitals and PCP sites, completed training and received OASAS SBIRT Certifications.

• Community Health Worker Training for staff engaged in our Asthma Home Environmental Trigger Assessment Program curricula provided by the Association for Asthma Educators, developed by Certified Asthma Educators.

• Partnership with North Carolina Center for Excellence in Integrated Care in design of Primary Care & Behavioral Health Integrated Care Education Series and Implementation for participating provider practices.

• Care Coordination & Transition Management (CCTM) from the American Academy of Ambulatory Care Nursing certification effort initiated September 2016 for roughly 25 Nurses across all 11 Hospitals participating in TOC Project.

• Over 80 Directors of Nursing across 44 Skilled Nursing Facility partners received an INTERACT Champion Certification in November of 2015 which kicked-off our program implementation efforts.

• 30 Care Management Organization staff training immersion at Geisinger Health System.

• MAX Series Participation in the Train-the-Trainer Program.
Workforce Transformation

- Partnering with Hofstra University to develop an online CCHL PPS wide training and a Population Health Certification Program
- Trained Nassau County Police Force on mental health first aid and training of all new Probation Officers
- Trained 26 RN’s, care managers & coordinators on care coordination and population health
- 175 primary care physicians & their staff received training on behavioral health integration or cardiovascular disease (e.g. Million Hearts Campaign)
- Over 50 SNF Leaders attended a day-long INTERACT training, & have subsequently launched web-based INTERACT modules for the whole facility
Training & Developing the Community Workforce

Through DY2Q3...
- BPHC has developed 29 courses delivered to 781 trainees across the PPS
- 27 CBOs have registered staff to participate in these courses

Training Programs in Cultural Responsiveness: DY2Q4 – DY3

Programs for segments of BPHC workforce:
1. Leaders as change agents for cultural responsiveness
2. Cultural affirming care for frontline staff
3. Cultural competency & the social determinants of health for practitioners: promotes behaviors & attitudes that enhance patient-provider communication & trust

Programs based on PPS community needs
4. Train-the-trainer for CBOs to educate community members on community health literacy topics (obtaining health insurance & navigating health care system)
5. Patient-centered care for immigrant seniors addresses behavioral & psychosocial issues

Raising cultural competency for the frontline:
6. Knowledge & skills for recovery-oriented care for people with behavioral health conditions
7. Understanding cultural values for home health workers
8. Poverty simulation to experience how living in poverty effects health behaviors and to influence policy changes

Celebrating Graduates
New York City Council Member Ritchie Torres and Ousman Laost, Office of U.S. Senator Kirsten Gillibrand, celebrating Peer Leaders & CHWs trained by Health People (Diabetes Self-Management) and a.i.r. bronx (Asthma Home-Based Self-Management)

Providing Cultural Responsiveness Training
- The Jewish Board
- NYC Human Resource Administration’s Office
- Immigrant Health and Cancer Disparities Service
- Healthlink NY
- People Care
- New York Association of Psychiatric Rehabilitation Services
- Regional Aid for Interim Needs (R.A.I.N)
- Selfhelp Community Services
# A Trained Workforce is a Transformed Workforce

## Training Scope

### xG Health Care Management Training
- Engaging home care and hospital staff including nurses and physicians on transitions of care and chronic disease management:
  - COPD, Diabetes, Heart Failure

### INTERACT
- All 10 Skilled Nursing Facilities trained on INTERACT
- 22 Certified INTERACT Facility Site Champions

### Palliative Care Training
- Comprehensive Palliative Care training implemented
- Participation from 10 Skilled Nursing Facilities

### 1199 TEF
- 22 different training courses offered

### LEAN Training
- SI PPS sponsored LEAN education series for all partners
- PPS partners using LEAN for process redesign

## Training Outcomes

- Over 15,000 hours of PPS partner training
- Partners and CBOs fully engaged in training
- 1,000 participants surveyed

## Outcomes

- Improved patient access to clinical and social services
- Process improvement
- Improved communication and understanding

## Higher Education Partnerships

- Created CHW & Care Management Credit Certificate Programs at College of Staten Island (CSI)
- $300,000 in Scholarships for PPS Partners
- Held CSI PPS Partner Day to discuss:
  - Future Curriculum Needs
  - Internships
  - Development of Hiring Pipeline
Sustainable Projects and Initiatives

1. Care Coordination, High Utilizers.
2. Diabetes and Asthma Programs.

1. Building Knowledge
   i. Cultural Competency & Health Literacy Trainings
   ii. DSRIP 101
   iii. Diabetes Self-Management Program Training

2. Building Skills
   i. CASAC program
   ii. Language of Care – Spanish for Healthcare workers
   iii. Medical Assistant Training

3. Creating Opportunities
   i. Community Health Worker Apprenticeship
   ii. Bilingual RN Program
   iii. HIV Peer Certification
Supporting a More Integrated Workforce

• **Trainings Utilize a Train-The-Trainer (TTT) Model**
  Once trained, participants commit to providing a minimum of 2 trainings/year
  – 24 trainers have completed Brief Action Planning
  – By March, 12 trainers will complete Motivational Interviewing
  – Through 2017, an additional 50 trainers for Care Management and 3 trainers enrolled in the MAX TTT program

• **Increasing Primary Care Capacity for the Region**
  – Launching a Nurse Practitioner residency program in Sept 2017
  – 18 – 24 Nurse Practitioners over 4 years
  – Placements in FQHC’s, Behavioral Health and Primary Care sites
  – MHVC covers tuition costs and preceptor costs

• **Partnering w/ Regional Colleges to Design Future Workforce**
  – 6 Meetings w/ local colleges to define future curriculum needs

• **Promoting Health Equity**
  – All trainings include a module that relates to cultural competency
  – Supporter of the Blueprint for Health Equity, 3 events held in 2016, 7 planned for 2017
  – Cultural Competency TTT program in 2017 for up to 60 trainers
QUESTIONS?