

Health Workforce Data Collection & Analytics Workgroup Minutes

August 24, 2022 | United Way of RI

Co-facilitators: Marti Rosenberg, RI Executive Office of Health & Human Services & Larry Warner, United Way of RI

General Meeting Overview:

Cofacilitators, with support from Rick Brooks of EOHHS, reviewed high-level updates on subcommittees generated by both the 'Health & Human Services Partnerships with Higher Education' and 'Health Career Pathways & Pipelines' workgroups.

- 'Health & Human Services Partnerships with Higher Education' workgroup subcommittees:
 - CNA Testing & Licensure
 - Clinical Placements Solutions
 - Research project: What other states are doing to address similar issues identified by the higher education workgroup
 - This group is reassessing their focus and approach to ensure they are best of service to the needs of the Health Workforce Planning and Implementation Initiative at large.
 - RI Department of Ed./Career & Technical Education Enhanced Partnerships
 - Not yet active so no immediate updates
 - Simulation Lab Partnerships
 - Not yet active so no immediate updates

8/16/22 Health & Human Services Partnerships with Higher Education workgroup minutes can be accessed [here](#).

- 'Health Career Pathways & Pipelines' workgroup subcommittees:
 - Career Development Day
 - Cody Fino, CCRI, gave a brief verbal update based on the subgroup meeting held on 8/15. We will need manpower for this event planning. Once we nail down resources and capacity we will look to those on the education & training sides to participate. We will need to do extensive marketing and outreach in order to get folks to the event.
 - Health & Human Services Career Ladders & Pathways (not yet active)
 - Rachael Sardinha, RIDOH, noted that RIDOH also has an intern who is working on developing a career pathways document and will share this with the Health Career Pathways & Pipelines workgroup once the RIDOH communications team signs off on the document.

This was followed by detailed discussion and report-outs from the leads of subcommittees formed under this 'Health Workforce Data Collection & Analytics' workgroup. Additionally, you can refer to this [Current Projects August 2022 - Updated 8/29](#) document for the most up-to-date status overview of all subcommittees.

Below are Health Workforce Data subcommittee updates, and ideas that were stimulated through full workgroup discussion:

a) Inventory of available workforce/higher education data sources

- Subgroup reported out from their 8.3.22 meeting. The group met and defined the scope and type of data they are looking to inventory. Their primary focus is on identifying and providing data to inform the policy and program change efforts of the 'Health Career Pathways and Pipelines' & 'Health & Human Services Partnerships with Higher Education' workgroups – primarily supply and demand data, along with any programmatic or structural barriers between supply and demand.
 - A 'Healthcare Workforce Data Inventory' excel file has been created and is being worked on collaboratively via [Teams](#). There are currently 20 or so data sources included in the file, which also delineates the data subject, source, report name, lowest aggregation readily available, whether it is publicly available, and contact information, for each data set. Subgroup participants continue to add to the file.
 - During the workgroup meeting there was discussion regarding consideration of various inventory/data needs of various possible audiences. Through discussion, workgroup participants identified three possible audiences/purposes to explore – 1. A repository of resources for individuals/program seekers; 2. "Average Joe" report relevant to the needs of employers/providers; and 3. More refined data, supporting our internal utilization, could be used to back policy/proposals.
- A side project was identified: pulling together all public licensure data.
- Next steps are for the subgroup to reconvene, discuss the ideas which arose in the recent data workgroup, and continue to refine their activities. They were assigned homework by the cofacilitators, to contemplate prioritization of this group's efforts; tying the purpose of any inventory back to the identified scope of the project will continue to be a driving force in any decision making. Subgroup will also work on the identified side project. Subgroup to provide an update at the next 9.23 data workgroup meeting.

b) Authorized vs. delivered service hours for homecare and beyond (as a proxy for workforce shortages)

- Subgroup reported out from their 8.19.22 meeting. Most of the data is in the Medicaid realm. EOHHS tracks some home care hours, but the data is limited based on participation of payer sources. Given a variety of confounding factors, examples including the interplay of low reimbursement rates and agency capitation payment models, and nursing homes limiting admissions due to low staffing ratios, the subgroup determined this approach will not result in an accurate data source. It was noted that there is no real incentive for payer sources or providers to report information.

- Katie Norman, RIHCA, stated Leading Age RI disseminated a survey in November 2021, the results of which may be useful to this subgroup. For nursing homes, they also have payroll data, which is reported to CMS, which could be utilized to help determine shortages based on staffing requirements per the state.
 - Next steps were identified:
 - Subgroup pivot needed. Will explore looking specifically at Medicaid programs and services provided through payer sources (United Healthcare, Neighborhood Health, Tufts) as a microcosm/small snapshot and will report back at next Sept. 23 data workgroup meeting. Please email [Rebecca](#) if interested in participating.
- c) Healthcare salary & vacancy surveys
- Comprehensive subgroup update following an 8.3.22 meeting was provided and can be found here: [Subgroup-Healthcare Salary & Vacancy Surveys 8.3.22 Status Update](#)
 - Next steps were identified:
 - Identify and begin outreach to relevant trade associations to explore available vacancy survey data and consider opportunities for statewide health and human service key position vacancy data collection.
 - Subgroup to develop a project budget.
 - State to identify sources of funding to support the collection of healthcare position salary data via private consulting firm surveys.
- d) Sharing of RIDOH licensure data with EOHHS EcoSystem & DataSpark
- Initiative update was provided. RIDOH legal had raised some questions and concerns regarding the legal authority and data security needed to share the SSN and DOB of health professional licensees. In response, EOHHS has provided further information and guidance to RIDOH to address their concerns, and we expect that the data sharing process will move forward in the near future. There is continued commitment to enable this sharing.
 - It was identified, given the nature of data agreements, the matching of RIDOH data will likely happen at DataSpark rather than EOHHS Ecosystem, since the Ecosystem cannot release identifiable data per overarching agreement. It is anticipated that DataSpark's data security protocols and prior history with RIDOH will satisfy any concerns that their newer staff may raise.
 - Regarding next steps, steadfast efforts spearheaded by Secretary Novais to expediently dispel any further RIDOH legal concerns and fully execute a data sharing agreement are persisting. EOHHS leadership is hopeful there will be a substantive, productive update to provide at the next workgroup.
- e) Expand core data elements collected in RIDOH licensing system
- Initiative update was provided. This matter is ultimately a legal question of what type of authority (statutory, regulatory, licensure board) is necessary to enable the state to add questions to licensing system and/or make those data fields required.
 - Next steps are for EOHHS and RIDOH colleagues to convene and identify a path forward to concretely determining and securing necessary authority source(s).

Other concurrent activities relevant to this health workforce planning initiative were then discussed.

- The ‘Health Professional Equity Initiative’ – With a focus on pursuing equitable outcomes for racial, ethnic, and culturally diverse individuals, EOHHS and OPC have partnered to support paraprofessionals who currently work in home and community-based services to pursue higher education leading to a health professional credential, degree and/or license. These supports may include tuition assistance, books, fees, childcare, tutoring and more. **135** individuals have been accepted into this program. The time for spending these funds has extended to March 2025; the program will support individuals until the funding runs out, at which time they will be connected with other resources. The workgroup will be notified when the application process reopens and roughly how many spots will be left to fill.
- Health professional loan repayment resources:
 - EOHHS, with support from a RIC graduate intern and RIDOH, are developing a health professional loan repayment resource tool. Group members provided helpful input on the mechanics of a resource tool.
 - Barry O’Connor from Commerce RI discussed RI’s Wavemaker Fellowship tax credit program which has recently been expanded to include a healthcare cohort, likely to begin an application cycle in Fall 2022 or early Spring 2023, once an advisory committee puts necessary rules and regulations in place.
 - Discussion was held regarding if/how providers promote various federal and state loan repayment options for health professionals through their hiring processes, as well as if/how loan repayment options are promoted to higher ed students along their academic journey (such as a recruitment strategy, at new-student orientation as applicable, incorporated into guidance counseling or academic programming, etc.)
 - Generally, it seemed that this is an area with significant room for improvement on both the provider and higher education sides. Loan repayment options should be a key recruitment strategy for both IHEs and providers.
 - It is imperative that health professional loan repayment information is incorporated into high school curriculum. This area of focus will be brought to the health career pathways workgroup as well.
 - Several workgroup members volunteered to be part of a loan repayment subcommittee, were one to be in place. The internal planning team plans to discuss emerging subcommittees and will contact volunteers with any developments.
- U.S. Department of Labor forecasted grant: [Nursing Expansion Program](#). This link can be accessed for further information on this grant, which is intended to address bottlenecks in training the nursing workforce and expand and diversify the pipeline of qualified nursing professionals through two training tracks. The group briefly reviewed this forecasted grant (estimated to be posted 9/30/22) and concluded that we should aim to submit one consolidated application as a state.

The topic of revisiting the workgroup meeting cadence was addressed. Workgroup participants were in consensus that at this point, to support advancement of our action-oriented efforts, there is still a need to meet on a monthly basis.

Next Steps:

- All workgroup members will be added to the Health Workforce Planning “Teams” channel(s). **Everyone should review and acclimate themselves with the Teams channels**, including the available resources included in the [“Helpful Resources” channel](#).

Some key resources to review:

- [Informing Healthcare Workforce Policy by Leveraging Data-Ntnl. Governor's Assoc. States Toolkit](#)
 - [Why Data Matters to Advance Direct Care Workforce Equity-Center for Equity](#)
- If there is any difficulty in accessing Teams, please reach out to [Aryana Huskey](#)
 - The next meeting date for the ‘Health Workforce Data Collection & Analytics’ workgroup is Friday, September 23rd, from 9:30-11:00am @ United Way of RI, 50 Valley St., Providence.

Workgroup Attendees:

1. Cofacilitator: Marti Rosenberg, EOHHS
2. Cofacilitator: Larry Warner, United Way
3. Rick Brooks, EOHHS
4. Aryana Huskey, EOHHS
5. Sophie Asah, EOHHS
6. Rachel Mulvaney, RIDOH
7. Rachael Sardinha, RIDOH
8. Donna Murray, DLT LMI
9. Kathleen Greenwell, DLT LMI
10. Megan Swindal, DLT
11. Sue Pearlmutter, RIC
12. Jennifer Carreiro, RIC
13. Dana Brandt, DataSpark URI
14. Der Kue, RI Health Center Assoc.
15. Rebecca Fiske, United Healthcare
16. Ashley Sadlier, BAYADA
17. Katie Norman, RI Health Care Assoc.
18. Katelyn Hebert, Tides Family Services
19. Stephen Grivers, PACE-RI
20. Ara Millette, Lifespan