



## HEALTHCARE WORKFORCE TRANSFORMATION

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### *Executive Summary*

Rhode Island is changing the way it delivers and pays for healthcare. In Rhode Island, healthcare doesn't stop at the doctor's office or the hospital bed—It extends to where people live, work, play, and learn. It rewards quality outcomes rather than quantity—the number of patient visits. It is a “team sport” rather than a solo endeavor, bridging physical and behavioral health and clinical and non-clinical providers. This approach to care is data-driven and evidence-based—tracking patient populations to identify risks and measure results. Its point of departure is not limited to the episode of care for an individual; rather, it manages care for populations and seeks out “upstream” causes of health problems, such as housing, income, access to healthy food, and transportation.

Rhode Island's overarching goals for transforming the health system mirror the “Triple Aim” of the Affordable Care Act: better care, smarter spending, and healthier people. “Better care” is patient-centered, accessible, culturally competent care, delivered by practitioners working at the top of their license or job description, and focused on keeping people well. “Smarter spending” is more efficient use of health resources to lower the per capita cost of care—through paying for value rather than volume of services, encouraging prevention, and rebalancing care from costly hospital or nursing home stays to home and community-based care. “Healthier people” means enhancing the overall health of the population—including physical, oral, and behavioral health—while coordinating the care of specific populations with chronic disease or multiple conditions, and addressing social determinants of health. To achieve the Triple Aim goals, Rhode Island has mounted a number of initiatives to change healthcare payment policies and service delivery—working through both the state Medicaid program and commercial insurers.

None of these changes in healthcare are possible without a transformed workforce—with the right workers, with the right skills and tools, in the right place at the right time. To determine what this workforce looks like and how to prepare for it, the Rhode Island Executive Office of Health and Human Services, in partnership with the State Innovation Model Test Grant, convened a cross-section of stakeholders from the state’s healthcare providers, education and training organizations, and policymakers in health and workforce. This group—the Rhode Island Healthcare Workforce Transformation Committee—gathered to establish workforce priorities and weigh potential strategies, assembling as a full group in October 2016, and then breaking into seven topical subcommittees for more intensive discussion in November. Topics analyzed included primary care, behavioral health practice and integration, social determinants of health, health information technology, oral health, chronic disease, and home and community-based care. In December 2016, the full group reconvened to consider cross-cutting strategies and their feasibility, and in February 2017, the group discussed the prioritization of these strategies.

This report, prepared by Jobs for the Future (JFF), provides background research to support Rhode Island’s development of a healthcare workforce transformation strategy. It analyzes workforce and educational needs required to achieve the Triple Aim of better care, smarter spending, and healthier people. To determine workforce needs in a changing healthcare environment, this study asks not just how many new workers are needed in particular occupations, but how to renew the skills of the existing workforce to assume new and evolving healthcare roles in new settings.

To define these needs and how to address them, JFF interviewed a cross-section of the state’s healthcare employers, educators, and policymakers about changes in healthcare payment and delivery and their impact on the workforce; the adoption of new roles and occupations critical to delivering better care; changes in skill and performance requirements; and the capacity of the state’s education and training entities to meet new health workforce needs. Data from Healthcare Workforce Transformation Committee meetings, interviews, and literature on health workforce transformation helped build a portrait of Rhode Island’s current health workforce landscape and potential strategies for the state to consider in achieving its transformation goals.

In order to translate our findings from interviews, literature, and meetings into actionable strategies and recommendations, we used the lens of “drivers of health system transformation”—or principles and concepts that can aid in achieving better care, smarter spending, and healthier people. The drivers of change include social determinants of health, value-based payments [that reward quality outcomes]; population health; data analytics; rebalancing delivery systems from high-cost institutional settings to home and community-based care; and access to high-quality primary care.

This research was complemented by analysis of labor market information on present and projected employment trends in key healthcare professional and support occupations, as well as vacancies and skills sought by employers. The analysis (presented in appendices and an occupational compendium) focuses in depth on occupations considered strategic to

transforming Rhode Island's health system, such as nurses, community health workers, and behavioral health professionals. The report also provides data (in appendices) on the number of graduates from the state's public higher education health professional programs, and the employment of these graduates in the state and in the healthcare industry.

Based on our research and analysis and on the discussions of the Healthcare Workforce Transformation Committee, we have identified three key priorities and a number of accompanying strategies:

### *1. Build Healthcare Career Pathways to Develop Skills That Matter for Jobs That Pay*

Prepare Rhode Islanders from culturally and linguistically diverse backgrounds for existing and emerging good jobs and careers in healthcare through expanded career awareness, job training and education, and advancement opportunities.

#### **Strategies:**

- > **Support the Entry-Level Workforce:** Improve recruitment, retention, and career advancement
- > **Increase Diversity and Cultural Competence:** Increase the cultural, ethnic, and linguistic diversity of licensed health professionals
- > **Develop Youth Initiatives to Expand the Talent Pipeline:** Increase healthcare career awareness, experiential learning opportunities, and readiness for health professional education
- > **Address Provider Shortages:** Remediate shortages among certain health professions.

### *2. Expand Home and Community-Based Care*

Increase the capacity of community-based providers to offer culturally competent care and services in the home and community, and reduce unnecessary utilization of high-cost institutional or specialty care.

#### **Strategies:**

- > **Expand Community-Based Health Professional Education:** Educate and train health professional students to work in home and community-based settings
- > **Prepare Healthcare Support Occupations for New and Emerging Roles:** Prepare healthcare support occupations to work in home and community-based settings.

### *3. Teach Core Concepts of Health System and Practice Transformation*

Increase the capacity of the current and future workforce to understand and apply core concepts of health system and practice transformation.

#### **Strategies:**

- > **Prepare Current and Future Health Professionals to Practice Integrated, Team-Based Care:** Increase the capacity of health professionals to integrate physical, behavioral, and oral health, and long-term care
- > **Teach Health System Transformation Core Concepts:** Educate the healthcare workforce about the significance of value-based payments, care management, social determinants of health, health equity, population health, and data analytics

## ***STRATEGY GRID***

### ***For EOHHS Healthcare Workforce Transformation***

#### **PRIORITY 1: Build Healthcare Career Pathways to Develop Skills That Matter for Jobs That Pay**

*Prepare Rhode Islanders from culturally and linguistically diverse backgrounds for good jobs and careers in healthcare through expanded career awareness, job training and education, and advancement opportunities*

#### **SUPPORT THE ENTRY-LEVEL WORKFORCE: Improve recruitment, retention, and career advancement of entry-level workers**

- > Address issues of compensation, work load, and/or job satisfaction to improve recruitment and retention of entry-level workers
- > Establish core competencies for all unlicensed, entry-level occupations
- > Develop advanced certifications in specialties such as behavioral health, gerontology, and chronic diseases to increase the knowledge, skills, compensation, and career advancement opportunities of entry-level occupations
- > Reduce financial and logistical barriers associated with pre-employment requirements (e.g., criminal background checks, physical exams, and vaccinations)
- > Revise Certified Nursing Assistant regulations to update scope of practice, training, and testing requirements to reflect varied and emerging roles
- > Consider licensure or certification for unlicensed occupations such as Community Health Workers, medical assistants, case managers, peer recovery specialists, and dental assistants
- > Align publicly funded job training programs with health system transformation priorities

**INCREASE DIVERSITY AND CULTURAL COMPETENCE: Increase the cultural, ethnic, and linguistic diversity of licensed health professionals**

- > Create more diverse talent pipelines by providing healthcare career awareness, academic advising, mentoring, financial assistance, and supportive services for youth and adults in targeted populations
- > Build career ladders for individuals now working in entry-level health support occupations, such as nursing assistants or medical assistants
- > Develop pre-apprenticeships to address gaps in foundational and employability skills to diversify the ranks of apprentices, increasing access for racial, ethnic, and linguistic minorities
- > Offer training and testing for CNAs and other entry-level occupations in languages other than English
- > Utilize the Rhode Island Department of Health licensure process to analyze the ethnic and linguistic diversity of health professionals

**DEVELOP YOUTH INITIATIVES: Increase healthcare career awareness, experiential learning opportunities, and readiness for health professional education**

- > Build broader, more diverse talent pipelines by developing healthcare career awareness programs and training in middle and high schools
- > Identify resources and healthcare employer partners to increase paid internships and work experiences for youth
- > Develop career and technical education programs that prepare students for emerging, in-demand healthcare jobs and careers

**ADDRESS PROVIDER SHORTAGES: Remediate shortages among selected health professions**

- > Determine the nature of shortages (e.g., statewide, regional, by payer) and causes of shortages (e.g., compensation, workload, job satisfaction)
- > Enhance loan forgiveness, tax credits, and/or other financial incentives to improve recruitment and retention of providers
- > Maximize federal assistance for federally designated provider shortage and/or underserved areas
- > Expand appropriate use of telemedicine (e.g., monitoring, diagnosis, treatment, consults, and referrals)
- > Cross-train clinical psychologists as psychiatric advanced practice RNs in order to increase patient access to prescribers
- > Consider establishing a licensure category, educational program, and payment structure for advanced dental hygienist practitioners to augment the dentist workforce and expand access to underserved Rhode Islanders
- > Utilize the licensure process to collect the Nursing Workforce Minimum Data Set needed to more accurately assess the supply of RNs

## **PRIORITY 2: Expand Home and Community-Based Care**

*Increase the capacity of community-based providers to offer culturally competent care and services in the home and community, and reduce unnecessary utilization of high-cost institutional or specialty care*

### **EXPAND COMMUNITY-BASED HEALTH PROFESSIONAL EDUCATION: Educate and train health professional students to work in home and community-based settings**

- > Expand partnerships between health professional education programs and community-based healthcare and service providers, such as primary care providers, behavioral health providers, community health teams, and Health Equity Zones, to increase clinical placement opportunities for students
- > Expand interprofessional classroom instruction to increase student understandings of home and community-based approaches to improve population health
- > Expand home and community-based residency programs to enable newly-licensed graduates to obtain specialized training

### **PREPARE HEALTHCARE SUPPORT OCCUPATIONS FOR NEW AND EMERGING ROLES: Prepare healthcare support occupations to work in home and community-based settings**

- > Strengthen the ability of home health aides and personal care aides to work in home settings by providing training keyed to special needs of the home environment and preparation to respond to behavioral health needs
- > Retrain or upskill current occupations such as medical assistants, patient access representatives, home-based workers, and mental health caseworkers in core CHW skills: patient engagement and navigation of community supports
- > Research the potential business case for financing and sustaining CHWs through evaluation of patient impacts and development of an evidence base
- > Explore emerging home and community-based workforce options (e.g., EMTs, LPNs, peer recovery specialists, medication aides, navigators, telemedicine)
- > Support the emerging role of public health dental hygienists by finalizing licensure regulations, developing training capacity, and determining deployment and funding plans

### **PRIORITY 3: Teach Core Concepts of Health System and Practice Transformation**

*Increase the capacity of the current and future healthcare workforce to understand and apply core concepts of health system and practice transformation*

**INTEGRATED TEAM-BASED CARE: Increase the capacity of current and future health professionals to integrate physical, behavioral, and oral health, and long-term care through interdisciplinary, team-based practice**

- > Incorporate understandings of integrated physical, behavioral, and oral health into all health professional education programs
- > Expand interprofessional health education activities among higher education programs (e.g., nursing, social work, pharmacy, medicine)
- > Expand continuing education, supervisor training, and leadership development to support integrated, team-based care
- > Provide continuing education to behavioral health professionals on assessment, diagnosis, treatment, and/or referral of physical and oral healthcare issues
- > Provide continuing education to primary care providers on assessment, diagnosis, treatment, and/or referral of behavioral and oral health issues

**HEALTH SYSTEM TRANSFORMATION CONCEPTS: Educate the current and future health care workforce about the significance of value-based payments, care management, social determinants of health, health equity, population health, and data analytics**

- > Engage and support higher education partners and others to develop a “clearinghouse” of content-specific training modules (for-credit, not-for-credit, or continuing education) that can be delivered in the classroom, workplace, and/or online.

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*The full publication is available for download at [www.jff.org/rihwt](http://www.jff.org/rihwt) or at  
[www.eohhs.ri.gov/Initiatives/HealthcareWorkforceTransformation.aspx](http://www.eohhs.ri.gov/Initiatives/HealthcareWorkforceTransformation.aspx)*

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