

# COMMONWEALTH CORPORATION

Building skills for a strong economy.

## Health Care Workforce Transformation Fund Planning Grants

This brief is part of Commonwealth Corporation's effort to support health care provider, community college, workforce investment board, career center and community based organization staff, and policymakers in understanding the potential impact of Massachusetts' health care cost containment and quality improvement law (Chapter 224) on the health care industry's demand for skilled workers. We are learning a great deal about how the state's health care providers are addressing a variety of workforce skills challenges associated with operational changes they are making to comply with Chapter 224.

The Health Care Workforce Transformation Fund was established in 2012 by the Commonwealth of Massachusetts through Chapter 224, An Act Improving the Quality of Health Care and Reducing Costs through Increased Transparency, Efficiency and Innovation. In July of 2013, Commonwealth Corporation, working closely with the Executive Office of Labor and Workforce Development (EOLWD) and the Health Care Workforce Advisory Board, released a request for proposals (RFP) to fund needs assessment and planning activities. This RFP was intended to support employers and other health care workforce organizations in identifying workforce challenges associated with implementation of [Chapter 224](#) and developing an approach to addressing them. EOLWD and Commonwealth Corporation will award grants to fund training through another RFP process in Fall 2014.



Commonwealth Corporation funded 51 planning projects totaling more than \$1.8 million. These projects, which took place between March and July 2014, were located across the Commonwealth; more than half were led by health care employers. Projects led by non-employers were required to

have an employer as a partner in the grant. These projects were led by community based organizations/training providers, labor organizations, workforce investment boards or career centers, industry/professional organizations, and higher education institutions. The diverse array of employers and other lead organizations involved in these grants demonstrates the wide attention being given to the effects of health care reform and the goals of Chapter 224 on the skills needed in the health care workforce.

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The projects funded by the planning grants covered several major areas of focus. In many cases, grantees worked on multiple focus areas. For instance, many grantees focusing on primary care practice transformation were doing so by looking at new ways to integrate and use advanced practitioners, or by training

front-line primary care staff to work effectively with behavioral health patients. While the training needs of a variety of clinical and non-clinical health positions were considered throughout the planning grants, most examined the skills needed by front-line workers. Within these categories many projects focused on adopting new methods of patient engagement, care coordination, and the development and use of electronic health record systems. The “other” category of focus includes six projects led by workforce investment boards and other industry associations

to better understand the workforce challenges of their region’s health care employers, three projects seeking to develop pathways for new health workers, and one project on curriculum development to train health insurance workers in customer service. We detail the main areas of focus here to help inform the workforce community about practices in

addressing workforce training and development in health care across the state, particularly in response to the emphases in Chapter 224 on cost containment and improved patient satisfaction and health outcomes.



## Primary Care Practice Transformation

Health care reform (Massachusetts' initial legislation enacted in 2006, Chapter 224, and the Affordable Care Act) promotes policies and metrics that encourage primary care providers to deliver more efficient, cost-effective and high quality care across all settings (community health centers, private physician groups, etc.). These reforms are leading providers, health systems and payers to develop and refine several approaches to addressing these challenges. Some grantees stated that they are seeking out certification as an Accountable Care Organization (ACO) or Patient Centered Medical Home (PCMH). Grantees in this focus area reported that cost containment pressures and adoption of PCMH models are moving health care delivery out of traditional acute hospital settings and into home and community settings. They stated that this shift requires workers in those settings to develop the skills necessary to treat patients with more complex health needs and to help those patients manage their own care in order to prevent readmissions.

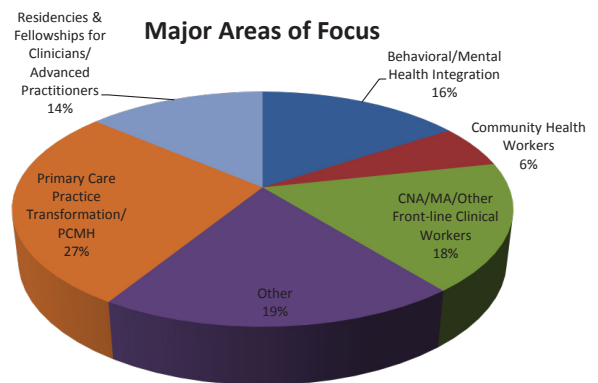
Many grantees in this focus area proposed to develop training plans for front-line clinical staff, particularly medical assistants, to support them in employing new methods of patient engagement to help patients manage their health. Grantees also proposed developing new career ladder opportunities for their front-line workers to increase staff retention and expand their roles. Through all of this additional training, grantees are seeking to allow everyone working in the primary care environment to work to the top of their training expertise or licensure, resulting in increased efficiency, increased productivity, and reduced costs.

Some grantees focused on developing training plans for the entire practice on electronic medical record use, care coordination, communication, team work, patient engagement, and continuous process improvement strategies to achieve improved quality and reduced costs.

## Community Health Workers

Community health workers have become an important part of the health care workforce under Chapter 224. Grantees in this focus area said they were developing plans to address community health workers' skill needs because they can effectively reach underserved populations (many of whom are served in community settings), improve their health outcomes, reduce health care disparities, and reduce costs. Some grantees ex-

## Planning Grants Major Areas of Focus



pressed the need for bilingual skills and cultural diversity among these workers as they target underserved populations to engage them in health care services. Grantees focusing on this emerging part of the healthcare workforce were developing training plans to build on core competencies that will support community health worker certification.

## Residencies and Fellowships for Clinicians/Advanced Practitioners

Grantees in this group were developing plans related to advanced and specialty practitioners. These grantees identified the need to increase the pool of qualified clinicians to work in outpatient and homecare settings. To meet this need, providers are exploring residency or fellowship programs. As a result of these programs, providers expect reduced turnover among these workers and ultimately improvements in health outcomes for patients and related cost savings.

## Behavioral/Mental Health Integration

The move toward greater behavioral/mental health integration with primary care is an important part of both Chapter 224 and the Affordable Care Act. New patients with more complex needs are being introduced into the health care system. Some grantees focused on developing training for primary care workers on how to effectively care for and support patients with behavioral health needs. Other grantees sought to design training for behavioral/mental health clinicians and direct care workers on coordinated care models, patient engagement related to physical health, and use of electronic health records to communicate with primary care and other providers. In all cases, the providers' goal for training is better patient outcomes in both the primary care and behavioral care settings.

### Certified Nursing Assistants (CNAs) in Acute Care, Long Term Care and Home Health Care

Leaders of health care delivery systems, including ACOs, are moving to increase provision of care in outpatient and home care settings. Outpatient and home care sites will therefore see an increase in patient volume and complexity as more patients, including those previously served in acute care institutions, will be moved to outpatient care, contributing to an increased demand for CNAs and other home care workers.

Many of the planning grantees in this group sought to develop training for their entry level clinical staff to work at the top of

their license in order to maximize efficiency, contain costs, and improve care. These grantees also reported that CNAs need additional training to be prepared to handle more medically and behaviorally complex patients. Most of the grantees in this group also indicated that they believe that investing in training and career ladder development for this group of workers will improve retention. These grantees said that improving retention of CNAs and other front-line clinical workers will reduce costs. They also said that it will support continuity of care which is considered key to improving patient outcomes.

### Conclusion

Through these planning grants we have observed that there are several workforce skills challenges associated with the implementation of Chapter 224, and health care reform more broadly, that Massachusetts providers, workforce development organizations, and education and training institutions are tackling. Primary care practice transformation, community health workers, residencies and fellowships for clinicians/advanced practitioners, behavioral/mental health integration, and certified nursing assistants are emerging as major areas of focus. Massachusetts' workforce development community is deeply

engaged in adapting to the changing health care industry and preparing workers to provide high quality, cost effective care in a dynamic environment.

You can find more information about these planning grants, health care payment reform in Massachusetts and the Health Care Workforce Transformation Fund on our website here (<http://www.commcorp.org/healthcareworkforcefund>). You can also find data on the status and recent history of the health care workforce in the Massachusetts Healthcare Chartbook ([http://www.commcorp.org/resources/documents/Health-care\\_6-4.pdf](http://www.commcorp.org/resources/documents/Health-care_6-4.pdf)).