

Health Care Workforce Transformation Trust Fund Report to the Administration & Legislature on Fund Activity through December 2015 Submitted: April 2016

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Part 1: Introduction and Overview

In August 2012 Massachusetts became the first state in the country to enact health care cost containment legislation: Chapter 224 of the Acts of 2012, AN ACT IMPROVING THE QUALITY OF HEALTH CARE AND REDUCING COSTS THROUGH INCREASED TRANSPARENCY, EFFICIENCY AND INNOVATION.

Chapter 224 included the establishment of the Health Care Workforce Transformation Fund (the Fund), with a budget allocation of \$20 million. The Fund is administered by the Secretary of the Executive Office of Labor and Workforce Development (EOLWD).

This report provides information about the status of initiatives that have been supported by the Health Care Workforce Transformation Fund (the Fund) as of the end of calendar year 2015. Part One outlines the Fund's priorities and provides information on the structure for providing Fund oversight and program management. Part Two provides information about Planning grants; Part Three provides information about Training grants; Part Four provides information about a grant to the Massachusetts Technology Collaborative/Massachusetts eHealth Institute (MeHI); and Part Five provides information about the status of initiatives managed by the Massachusetts Department of Public Health.

Fund Priorities

Chapter 224 established parameters for Fund expenditures, which included the allocation of 20% of funds (\$4 million) to the Massachusetts Department of Public Health (DPH) and an unspecified amount to support a pilot project to be managed by the Massachusetts Technology Collaborative/Massachusetts eHealth Institute (MeHI).

Chapter 224 identified the following purposes for the remaining funds (approximately \$16 million to be used to support competitive grant programs):

- 1) support the development and implementation of programs to enhance health care worker retention rates;
- 2) address critical health care workforce shortages;
- 3) improve employment in the health care industry for low-income individuals and low-wage workers;
- provide training, educational, or career ladder services for currently employed or unemployed health care workers who are seeking new positions or responsibilities within the health care industry;
- 5) provide training or educational services for health care workers in emerging fields of care delivery models; and
- 6) fund rural health rotation programs, rural health clerkships, and rural health preceptorships at medical and nursing schools to expose students to practicing in rural and small town communities.

The Secretary of the Executive Office of Labor and Workforce Development charged Commonwealth Corporation with administering \$16 million in competitive grant funds. In consultation with the Secretary, Commonwealth Corporation established two types of funding opportunities, Health Care Workforce Planning grants and Health Care Workforce Training grants, to support health care providers, educational institutions and other key stakeholders in developing and implementing programs designed



to address the purposes outlined above. The Planning and Training grants are described in further detail in Parts Two and Three of this report.

Health Care Advisory Board

Subsection (b) of Section 38 of the legislation establishes that...

(b) There shall be a Health Care Workforce Trust Fund Advisory Board constituted to make recommendations to the director secretary concerning the administration and allocation of the fund and establishing evaluation criteria. The board shall consist of the following members: the secretary of labor and workforce development who shall serve as chairperson; the executive director of the (health policy) commission or a designee; the commissioner of public health or a designee, and no more than 13 members who shall be appointed by the secretary and who shall reflect a broad distribution of diverse perspectives on the health care system and health care workforce needs, including health care providers, health care payers, health care employers, labor organizations, educational institutions, and consumer representatives.

Then EOLWD Secretary Joanne Goldstein established and chaired the Advisory Board in 2013. The Board is now chaired by Secretary Ronald L. Walker, II with the following members: David Seltz, Health Policy Commission; Dr. Monica Bharel, MA Department of Public Health; Veronica Turner, 1199SEIU United Healthcare Workers; Kelly Aiken, MA Senior Care Association; Brian Rosman, HealthCare for All; Dr. Patricia Maguire Meservey, Salem State University; Dr. Karen DaSilva, Harvard Vanguard Medical Associates/Atrius Health; Lisa Gurgone, MA Home Care Aide Council; James Hunt Jr., MA League of Community Health Centers; Marta Montleon, Diman Regional Vocational Technical High School; Julie Pinkham, MA Nurses Association; Harriet Tolpin, Partners HealthCare; Elizabeth Whittemore, Health Management Consultants; and Karin Jeffers, Clinical and Support Options.

To date, the Board has met six (6) times. The Secretary and Commonwealth Corporation have designed these meetings to provide Board members with the opportunity to review and discuss procurement and project activities related to the Fund and meet with grantees to learn about their projects. Board members are also provided with information from the MA eHealth Institute, the Health Policy Commission and about the Community Hospital Acceleration, Revitalization & Transformation (CHART) grants.

Commonwealth Corporation's Role

Commonwealth Corporation (CommCorp) provides strategy, oversight and overall program management under the leadership of the Executive Office of Labor and Workforce Development. This includes administration of the procurement process, contracting, provision of technical assistance, program and contract management, program and fiscal monitoring, and technical assistance to grantees.

Staffing and Program Management

Two (2) CommCorp staff work on this program; they monitor program and fiscal activity, develop program policy and strategy, and address specific grantee requests and technical assistance needs. Each staff has a caseload of grantees.

Each grantee submits a quarterly narrative report providing an update on grant activities, successes and challenges. In addition, Training grantees submit a report on training activity for each quarter and track measurements of business impact.



Grantees are also required to submit quarterly invoices for expenses.

CommCorp staff conduct site visits to grantees to attend kick-off events and graduations, participate in project meetings, and observe grant-funded training. CommCorp staff provide support and technical assistance to address compliance, program challenges or contract issues through email, phone or in-person meetings.

Data Management and Reporting

CommCorp staff created processes for tracking data and reporting at all stages of program development and implementation. They use Salesforce (a relationship management database) to track the procurement process and status of applications, track milestones and documentation, critical case notes, contacts, and modifications.

Staff also use data from Salesforce, internal reports, and grantee reports to create dashboards and other reports that track spending, enrollment activity, and progress toward grant outcomes.

Shared Learning and Events

There is continuous and growing interest from the grantees and the health care workforce development community to connect around common themes and issues and to learn from peers.

To support that need, CommCorp staff coordinated an event on *Payment Reform in Massachusetts: Impact & Opportunities for the Health Care Workforce* in partnership with Jessica Larochelle from the Blue Cross Blue Shield Foundation. CommCorp staff offered this event three (3) times at different locations across the state. In addition, in early 2015 CommCorp staff coordinated an event on Patient *Centered Medical Homes (PCMH): How New Approaches to Care are Affecting the Health Care Workforce* with Dr. Judy Steinberg from Commonwealth Medicine/UMASS Medical School and a panel of Training grantees working on the implementation of PCMH at their sites. Lastly, in late 2015 CommCorp offered an event on *Preparing the Healthcare Workforce to Achieve Effective Patient-Centered Care Transitions*. The MA Senior Care Association co-sponsored the event.

To further support grantees during the life of the Planning grants, CommCorp staff organized four (4) web-based learning sessions convened around areas of focus for their grants: Behavioral/Mental Health initiatives, Frontline Worker Skill Development, Practice Transformation, and Residencies/Fellowships/Transitions to Practice for Licensed Staff. These sessions gave grantees an opportunity to describe their activities and goals and share best practices with each other.

CommCorp staff developed and hosted similar grantee convening and learning events for Training grantees, including a meeting for grantees working on Residencies/Transitions to Practice for Newly Licensed Clinicians, and one for those organizations implementing Lean as a tool for process improvement. CommCorp is organizing additional events for 2016, covering topics such as Measuring the Business Impact of Training, Integrating Behavioral and Clinical Health, the Changing Roles of Medical Assistants, and a Community Health Center Peer-to-Peer session.

Part 2: Planning Grants

The purpose of the Health Care Workforce Transformation Fund Planning Grants was to support organizations in designing training strategies to address current or predicted workforce challenges

resulting from the implementation of Chapter 224 mandates. Fundable activities for the Planning Grants included one or more of the following:

- Assessing the skill/competency level of current employees.
- Assessing the relevance, quantity and quality of existing training or education programs that serve as a source of workforce supply.
- Developing a plan to deliver the required training/education to current employees.
- Developing a plan to fill vacancies created by training current workers for higher level positions.
- Developing a plan to improve or create programs to supply future workers with required skills/competencies.

Planning Grants Procurement

CommCorp issued a Request for Proposals (RFP) for Planning Grants in the summer of 2013. CommCorp held a bidder's conference via webinar on August 8, 2013; 108 individuals participated in the webinar. The RFP invited applicants to submit grant proposals for up to \$50,000 on a rolling schedule.

CommCorp received 56 applications in the three months following the release of the RFP. After conducting a review process, CommCorp staff recommended 51 applications for funding, totaling \$1,883,497 and with an average award of \$37,000. Then EOLWD Secretary Rachel Kaprielian reviewed and approved staff's recommendations.

Please refer to the Addenda section of this report for the complete list of Planning grantees.

Planning Grants Contracting and Grant Administration

CommCorp staff issued a four-month contract to each of the 51 Planning grantees, with start dates in February 2014 and March 2014. All contracts ended by July 2014.

CommCorp staff conducted grantee orientations on an individual basis. CommCorp required grantees to provide written progress reports and submit invoices mid-way and at the end of their contracts.

Overview of Planning Grant Projects

A diverse group of organizations led the 51 Planning Grant projects. These organizations spanned the entire state, but a high concentration of proposals and, therefore, grantees came from organizations in the Boston area (regions are based on the main location of the Lead applicant):







The following chart provides information on the major areas of focus for the Planning grant projects:





Planning Grants Summary of Spending

CommCorp awarded \$1,883,497 in Planning grant funds to 51 grantees for a period of up to four (4) months. Collectively, the grantees expended \$1,704,850, or 91%, of the total amount awarded. Under the Secretary's direction, CommCorp reallocated the balance to the pool of funding available for Training grants.

Planning Grant Outcomes

The Executive Office of Labor and Workforce Development's purpose for offering Planning grants was to help healthcare organizations analyze their workforce skill needs and plan for training. Planning grant deliverables consisted of needs analysis reports, curriculum outlines, and training materials. For example:

Massachusetts Hospital Association (MHA): Utilizing funds from this grant, MHA surveyed more than 430 of their members, including interviews with leaders from hospitals around the Commonwealth. Their project and, as a result, their comprehensive report, was designed to gain understanding of the hospitals' workforce training needs now and over the next 3-5 years. It was also intended to help MHA provide support, education, and training to their membership.

Regional Employment Board (REB) of Hampden County: Utilizing funds from this grant, the REB conducted a regional gap analysis of medical lab technologists/scientists and medical lab technicians to aggregate available labor market data; better understand issues related to the lab workforce and operational challenges; conduct skill analyses of current staff; and develop regional solutions. Their project and, as a result, their report summarizes the needs of employers and concludes with identified strategies that could be used to address workforce issues.

Home Care Aide Council (HCAC): HCAC used Planning Grant funding to develop a detailed outline for a new Mental Health Supportive Home Care Aide training curriculum. The basis of the curriculum outline derived from the review of current best practices for mental health trainings, and from interviews with home care aides, agency supervisors, and key industry stakeholders.

Not all Planning grantees applied for Training funds for a variety of reasons. Those that did used the Planning grant findings and products to create the foundation for their proposals.



Part 3: Training Grants

The goal of the Health Care Workforce Transformation Fund Training Grants is to support training and education activities that will help health care employers address workforce challenges that can be directly attributed to operational changes needed to meet the cost containment and quality improvement goals of Chapter 224. Funding priorities include:

- Training employees of health care organizations and/or training currently unemployed or underemployed individuals to fill jobs needed to respond to Chapter 224 challenges.
- Health care-related education or training at any level up to, and including, a baccalaureate level.
- Skills training for participants who have already completed a professional degree at the Bachelor's level or higher, as long as the training is not required for the degree or a subsequent degree. This could include skills that Chapter 224 will create a demand for, but which are not covered in current professional programs.

The Request for Proposals for Training grant required each applicant to propose one (1) or more business metrics to be monitored during the life of the grant to assess the success of their training strategies. The following are some examples of business impact metrics proposed by applicants:

- As a result of trainings of staff and clients, we expect to see a reduction of 30 % in unnecessary Emergency Room visits and hospitalizations within the targeted patient group.
- As a result of DSM-V and ICD10 training, billing staff will be able to bill more accurately for basic medical screening, resulting in 70% decrease in denied claims.
- Through a dedicated 6-month clinical residency program, we anticipate 0% turnover of clinical residents by the end of the contract, an improvement from the current 2.8%.
- Within 2 years, we anticipate an increase in PCP patient initiation and engagement rates in Behavioral Health/Substance use services by 20%.

Training Grant Procurement

CommCorp released an RFP for Training Grants in March 2014 and held a bidder's conference on April 10, 2014 via webinar. Letters of Intent were required and due by June 27, 2014. Proposals were due July 31, 2014. The RFP invited applicants to submit proposals for up to \$250,000 for projects that would last no more than two (2) years. The RFP did not offer a preference for applicants that had received a Planning grant.

CommCorp received 111 Letters of Intent, 44% of which came from Planning grantees. Organizations from all over the state submitted Letters of Intent, with a significant amount coming from the Boston area (regions were determined based on main location of the Lead applicant). 67% of Letters of Intent came from health care employers intending to apply as leads:

COMMONWEAL CORPORATION Building skills for a strong economy. Letters of Intent - Distribution of Leads Berkshire: 2% Boston: 29% 6% Bristol: 2% 4% 354 Brockton: 1% Cape & Islands: 2% 8% 29% by WIB Region Central MA: 13% Franklin/Hampshire: 5% 8% Greater Lowell: 3% Greater New Bedford: 6% Hampden: 5% 6% Merrimack Valley: 6% Metro North: 8% 5%

13%

6%

3% 5%



Metro South/West: 8%

North Central MA: 3%

North Shore: 4% South Shore: 6%

85.6% of organizations that submitted Letters of Intent followed through by submitting full proposals in July, totaling 95 applications for a combined total request of approximately \$21.7 million.

After conducting a review process, CommCorp staff recommended 55 proposals for funding, totaling \$12.7 million in requests and with an average request of \$231,000. Then EOLWD Secretary Rachel Kaprielian reviewed and approved staff's recommendations.

59% of lead applicants were health care employers; 25% of Leads were based in the Boston WIB region, as shown in the charts below:







Training Grants Contracting and Grant Administration

CommCorp staff issued contracts to each of the 55 Training grantees, most with start dates in January or February 2015 and for periods of 18-24 months. All of the Training grant contracts will end by March 31, 2017. After completing contract negotiations and subsequent modifications, the total amount awarded in Training grants is \$12,536,564.

CommCorp staff held two web-based grantee orientations for program and fiscal staff. CommCorp offered each orientation three times on different days.

Grantees submit written reports and invoices on a quarterly basis. Quarterly reporting consists of a Narrative and a Training Activity Report. Final reporting requirements will include a Final Narrative Report, an updated Training Activity Report, and a report on Business Impact Metrics which were defined in negotiation with each grantee. All curricula and product deliverables will be due at the end of the contract periods.



Overview of Training Grant Projects

Training grant projects address a wide range of workforce issues and operational/cost-containment strategies. Some common trends and training topics are shown in the chart below:



While the majority of programs are focusing on skill enhancement, this category is quite broad and encompasses a variety of sub-groups and themes. Some grantees are enhancing the skills of frontline, non-clinical workers such as Community Health Workers, while others are training licensed, clinical staff such as RNs on different techniques or approaches to care delivery, and others are providing training to MDs and NPs on advanced clinical topics. For example:

East Boston Neighborhood Health Center's (EBNHC) Medical Assistants (MAs) have diverse backgrounds and different levels of experience and expertise. Using grant funds, they will train them on specific, more advanced areas of patient care, so as to be able to provide consistent, continuous care with a focus on overall better patient outcomes and preventative care. One of the metrics they will monitor over the course of the grant is an increase in the number of preventative health screenings that MAs administer to patients.

Within Behavioral/Mental Health, most projects are focusing on the integration of primary care and mental health services, while others are working on the creation of new roles to support enhanced and/or new services to their patients. For example:

Lahey Health Behavioral Services understands the importance of integrating mental and physical health. In order to embrace the changes set forth by legislation, and in order to provide the best care to their patients, Lahey Behavioral's clinicians must work closely with medical health providers to coordinate care, and teach patients how to self-manage their chronic health conditions. Through Training funds, Lahey Behavioral aims to provide their clinicians with the necessary knowledge and skills currently missing in undergraduate and graduate programs. They will monitor and report on improvements in patients' markers such as blood pressure, HbA1c and BMI, as well as improvements in their self-report of functional status, exercise and adherence to health care appointments.

Within the group of grantees focusing on practice change and processes, LEAN and Patient Centered Medical Home (PCMH) readiness are predominant. Other grantees are working on the incorporation of electronic medical records (EMR) systems and getting their workforce ready to use the new technology. For example:

Beth Israel Deaconess in Plymouth plans to use Lean Continuous Improvement training and development as a means to improve the quality and efficiency of care provided to patients in order to align with Chapter 224. They anticipate seeing impact reflected in improved patient

experience and satisfaction scores, as well as in reduced length of stay in the emergency department.

Grantees that are working on residency-style models are directing their efforts at newly graduated or early career Registered Nurses and other clinicians transitioning into new settings or higher-skilled areas of practice. For example:

In the spirit of delivering care using a team centric approach, Baystate Medical Center/Baystate Health (BHS) will deliver an Advanced Practice residency for newly graduated physician assistants and nurse practitioners. BHS will also train their clinical staff on best practice utilization and integration of advanced practitioners into the care model, leading to reduced burnout and turnover of clinicians, and better patient experience and patient access rates.

A few projects are working on pipeline or pathways for unemployed or underemployed individuals. For example:

In view of health care reform, Managed Care Organizations and Health Insurance Companies have current and projected needs for properly qualified, knowledgeable Member Services Representatives and Claims Processing staff. YMCA Training Inc. will provide pipelines for employment for unemployed and underemployed individuals to fill these critical positions. With a better prepared workforce, they anticipate seeing a decline in negative terminations, and a decrease in the time-to-fill for these roles.

Please refer to the Addenda section of this report for a full list of Training grantees and a summary of their projects.

Training Grants Summary of Enrollments and Spending

As of December 31, 2015, the total expenditures reported by all 55 projects was at \$5,069,916, or 40 % of total awards. The total number of class/training enrollments in projects serving incumbent workers was 10,657 as compared to a cumulative goal of 32,911 (32%); the total number of enrollments in projects serving unemployed or underemployed workers was 120 as compared to a cumulative goal of 328 (37%). Grantees will report on Business Impact Metrics at the end of their contract period.

Part 4: Fund Allocation to the Massachusetts Technology Collaborative/Massachusetts eHealth Institute (MeHI)

MeHI, the Massachusetts eHealth Institute, is the designated state agency for promoting health IT innovation, technology and competitiveness to improve the safety, quality and efficiency of health care across the State. MeHI was created by legislation in Chapter 305 of the Acts of 2008. Chapter 224 of the Acts of 2012, Section 38 directs MeHI to:

"(...) establish a pilot partnership with community colleges or vocational technology schools in the commonwealth to support health information technology curriculum development and workforce development. Funding for the program shall be from the Health Care Workforce Transformation Fund established under section 2FFFF of Chapter 29."

Pursuant to this statutory language, CommCorp negotiated a contract with MeHI in the amount of \$185,431 from 2/1/2015 through 5/31/2016. MeHI committed to soliciting input from stakeholders in



long-term, post-acute and home care communities so as to develop a RFP, design and manage a procurement process, and provide ongoing grant oversight and technical assistance to grantees selected through the process.

MeHi Procurement and Project Scope

MeHI held a roundtable discussion with long-term, post-acute and home health care trade associations in the summer of 2014 to discuss the need for health IT workforce training in these industries. With the help of the associations, MeHI issued a survey to get a better sense of the desired curriculum topics and preferred methods of delivery.

Using this information, MeHI released a solicitation in October 2014 requesting proposals to develop a health IT curriculum module and to deliver the module to long-term, post-acute and home health care employees through a train-the-trainer pilot program. MeHI held an informational webinar and developed and posted a Q&A document addressing questions related to the RFP.

Through this procurement process, MeHI selected Springfield Technical Community College (STCC) and executed a contract in the amount of \$173,353. The contract start date was April 2015.

Under this contract, STCC, in partnership with Cape Cod and Middlesex Community Colleges, will develop, test, and pilot the delivery of a health information technology educational module to increase the health IT skill sets of Massachusetts long-term, post-acute and home care employees. After a pilot test, the refined and final version of the curriculum will be used to train staff from at least six (6) health care employers on how to deliver the curriculum module. This Train-The-Trainer model will support cost-effective training of all staff at each agency.

The Massachusetts Community College Executive Office will lead the efforts to analyze the effectiveness of this model and develop recommendations for future implementation to support sustainability of the project.

MeHI is providing CommCorp with quarterly reports on program progress and grantee activity. As of December 31, 2015, MeHI had expended \$46,169 of the total award amount of \$185,431, or 25%.

MeHi Deliverables

The deliverables associated with the grant are:

- a fully developed and comprehensive health IT curriculum module focused on direct care workers and administrative support staff in the long-term, post-acute and home health care industries;
- a module directed at training select staff from long-term, post-acute and home health care agencies, affiliated trade associations, and MeHI in how to deliver the curriculum to long-term, post-acute and home health care staff;
- a plan to recruit and incentivize long-term, post-acute and home health care agencies to participate in a train-the-trainer pilot program;
- conducting the train-the-trainer pilot program for the targeted employees, staff from the affiliated trade associations, and MeHI staff, and providing a report outlining the pilot program experience and lessons learned; and

 recommendations for best methods to disseminate the curriculum module to both existing and new workers in the long-term, post-acute and home health care industries in Massachusetts and on collecting data to analyze the effectiveness of the program. Respondent must collaborate with the Massachusetts Community College Executive Office when creating these recommendations.

Part 5: Fund Allocation to Department of Public Health (DPH)

OMMONWEA

Building skills for a strong economy

The Health Care Workforce Center, a program within the Massachusetts Department of Public Health (DPH), was established by Chapter 305 of the Acts of 2008 and expanded by Chapter 224. Its mission is to improve access to health care in the Commonwealth by supporting programs that assure an optimal supply and distribution of primary care and other health professionals. The Center strives to fulfill its mandate and to further the goals of Chapter 224 by focusing its work in three areas:

- data collection and analysis of the Commonwealth's health care workforce and to support development of targeted strategies for addressing workforce gaps;
- administration of federal and state programs that encourage recruitment and retention of primary care providers; and
- coordination of DPH health care workforce activities with those of other public and private entities to leverage primary care workforce development efforts.

Chapter 224 mandated that not less than 20%, or \$4 million of the \$20 million appropriated to the Health Care Workforce Transformation Trust Fund, be transferred to DPH over a period of four (4) years for loan repayment and primary care residency grant programs.

DPH Health Care Workforce Loan Repayment Program

DPH retained \$2 million of the \$4 million to support the MA Loan Repayment Program (MLRP) and the Center. Health Care Workforce Transformation Funds allow DPH to increase the number of loans they would ordinarily be able to support with existing funds. The MLRP supports the placement of primary care health professionals in shortage areas by providing funding that reduces outstanding health professional education loans. Resources for this program are limited and the demand is high. The MLRP receives two-to-three times as many applicants as they have funding to support. Applicants need to meet a series of conditions established by the Center to qualify for the programs.

In FY14, MLRP supported 16 of their total of 34 loan repayment awards through the Health Care Workforce Transformation Trust Fund appropriation for a total of \$250,500. The funding paid 100% of 15 awards, and a portion of one (1) award. In FY15, the Fund supported a portion of 18 awards for a total of \$550,215.

Through FY15, awards had been granted to a total of 10 Nurse Practitioners, 14 Physicians, five (5) Psychiatric Nurse Specialists, two (2) Certified Nurse Midwives, two (2) Physician Assistants, and a Mental Health Counselor practicing across the state:





The MLRP is an investment in the state's primary care infrastructure. Through surveys, the Center is identifying ways to support clinicians, increase their satisfaction, and improve their retention. Highlights of their most recent survey include:

- 83% of respondents indicated that they planned to continue working at the practice site of service.
- The majority of participants decided to work with underserved populations when they were in their health professional training program.
- The top four (4) sources of satisfaction with other aspects of their work site experience were the mission and goals of the work site, relationship with colleagues, the work site's reputation in the local community, and the benefits package.

DHP Primary Care Workforce Development and Loan Forgiveness at Community Health Centers

DPH has contracted with the MA League of Community Health Centers (MLCHC) to transfer \$500,000 annually through this Fund for a four-year period. Funding is primarily used to support a loan repayment program operated by MLCHC that is similar to the MLRP described above.

In FY14 and FY15, the Fund supported loan repayment awards to six (6) physicians and five (5) nurse practitioners for a total of \$450,000 each year. The remainder of the funds supported the MLCHC staff to administer the loan program and share data to support health workforce and residency programs.

DPH Primary Care Residency Program

DPH staff are in discussions with staff at the MA League of Community Health Centers (MLCHC) regarding residency programs for physicians and nurse practitioners, implementation, evaluation, and next steps. In FY15, the MLCHC spent approximately \$21,000 (of their \$500,000) on "Residency Teaching and Leadership Development Resources and Technical Assistance". In addition, the DPH Health Care Workforce Center provided in-kind staff to support discussion and additional research on residency programs. Discussion and analysis results will be provided in a future report.



Workforce Assessment

The DPH Health Care Workforce Center runs another initiative partially funded by Health Care Workforce Transformation funds: the Health Professions Data Series.

This initiative provides a current depiction of the Massachusetts licensed health workforce. Currently, the series reports on six (6) disciplines. Funding appropriations help support an Epidemiologist and a Program Coordinator:

- The Epidemiologist (0.5 FTE) guides and informs the data collection, analysis and reporting of essential health workforce supply data, and also supports needs assessment activities.
- The Program Coordinator supports overall program management, conducts loan repayment program welcome and exit survey process and reporting.

Part 6: Addenda

- Planning Grant, Summary of Awards
- Training Grant, Summary of Awards
- Health Care Workforce Transformation Fund Planning Grants Brief

Addenda

1199SEIU Training and Upgrading Fund

In response to Chapter 224, Lynn Community Health Center and Union Hospital are implementing new team-based care models and consolidating services to reduce duplication. This has led to a need for hundreds of ancillary and frontline staff to interact with disruptive and potentially violent patients. This grant convened a joint labor/management process to plan for the delivery of training to employees, targeting skills in the management of interactions with this complex population. Planning activities included interviews, focus groups and surveys, which provided highly detailed information for the training curriculum based on staff experience. A "train the trainer" delivery method will ensure institutional capacity and sustainability of the program.

Anna Jaques Hospital

Anna Jaques Hospital's Chief Nursing Officer, in partnership with Human Resources staff, the Massachusetts Nurses Association and Bay State College, developed a plan to encourage more nurses to enroll in a bachelor's degree program, specifically our on-site RN to BSN program piloted with Bay State College in 2013. The goal is to transition more of the nurse workforce to higher educational preparedness. Our fundamental strategy is to partner with the hospital's largest workforce and engage them in helping the organization increase efficiencies, reduce nurse-sensitive errors, and improve quality, safety and patient satisfaction scores.

Baystate Medical Center

Using a team-centric approach that focused on high-quality, cost-efficient care, Baystate Medical Center planned to increase its capacity to hire and train advanced practitioners in primary and specialty care, and created training plans for an advanced practice residency in hospital service lines. For the primary care practices, the top forty diagnoses were identified and didactic training was developed to give a common baseline through the advanced practice residency. A seminar training entitled "The Changing Role of the Advanced Practitioner" was also developed to educate physicians and staff around the capabilities, differences, and value of Nurse Practitioners and Physician Assistants.

Berkshire Health Systems

Berkshire Health Systems (BHS) used planning grant funds to: 1) Conduct a needs assessment among Certified Nursing Assistants (CNAs), registered nurses and senior management to determine the need and design for career ladder training for nursing assistants; 2) Research other CNA career ladder training models; 3) Develop program curriculum; and 4) Establish an application process. As a result, BHS aims to implement a CNA II training program that will expand the existing career ladder options for employees of Berkshire Medical Center, Fairview Hospital and Berkshire Healthcare's long-term care facilities.

Beth Israel Deaconess Hospital: Boston

The BIDMC planning grant allowed our group to identify how we would build teamwork and communication skills within our three inpatient medical-surgical units, all for the purpose of implementing and sustaining process improvements. We were able to analyze key needs and strategies for improvement, develop a training plan and approach, gain buy-in from leaders, and prepare to implement a foundational "Team Training" that will help teams communicate better, resolve conflict and help members identify roles and responsibilities of a functioning team.

Brockton Hospital (Signature Health)

Signature Medical Group (SMG) used the Planning Grant funds to assess the training needs of its practice staff in preparation for its transition to a Patient Centered Medical Home (PCMH) model. Through research, site visits, and individual interviews, SMG discovered a significant gap in knowledge of PCMH concepts among clinical and clerical staff in three key areas: organizational development (including strategies for change management and communication), PCMH foundations (including concepts and standards for PCMH recognition), and role-based skills (including clinical skills and care coordination). SMG has developed a training plan to guide its next steps in PCMH transformation.

WIB Region: Berkshire

WIB Region: Brockton

WIB Region: Boston



WIB Region: Hampden

WIB Region: Merrimack Valley

Boston University Center for Aging and Disability Education and Research WIB Region: Boston

The Center for Aging and Disability Education and Research (CADER) at Boston University and Commonwealth Care Alliance (CCA) formed a partnership to conduct a training needs assessment of CCA staff in order to strengthen their successful primary care model. Results showed that skill gaps still exist amongst their staff in three competency areas: 1) The Philosophy of Person-Centered Care; 2) Norms and Skills of Team-Based Care; and 3) Engagement and Communication. CADER will develop standardized, consistent training for all CCA staff around patient-centered, interdisciplinary care. These trainings will improve CCA's model, providing care through integrated, patient-centered, interdisciplinary teams to achieve cost containment goals and enhance quality care.

Cape & Islands Workforce Investment Board

Healthcare organizations in our region are focusing their efforts on cost containment and higher quality of care strategies, including placing more emphasis on wellness and prevention. The planning grant allowed us to convene partner organizations, facilitate interviews and focus groups, prepare a research report, and develop a survey instrument. Our goals were to gain a perspective on current functioning among partner organizations, solidify their commitment, identify their workforce challenges, and draft a plan outlining action steps and training opportunities.

Central MA Area Health Education Center

Cost and quality mandates of Chapter 224, Community Health Worker (CHW) certification, and federal reimbursement policy opportunities combined with the need to more effectively achieve health equity, are propelling the increased utilization of CHWs. In this initiative, the CMAHEC, Boston Public Health Commission, MA Association of Community Health Workers and the Edward M. Kennedy Community Health Center partnered to identify the needs of the CHW workforce, employers, and health providers to ensure the effective integration of CHWs in the health care delivery system. Recommendations focused on CHW training and assessment standards and employer/organizational policies.

Central MA Workforce Investment Board

Healthcare providers in our region have been speaking about a dire need to ensure that their licensed staff is trained in the best techniques and approaches to serve patients while, at the same time, contributing to more high-quality and cost-effective care. The Central MA Workforce Investment Board used planning grant funds to conduct a thorough needs analysis process to identify essential skills and knowledge, and then develop a training program that will reflect important competencies needed to improve the service provided to patients.

Clinical and Support Options

Integrated Health Treatment Education & Training is a program for behavioral health practitioners/professionals to develop skills in engaging patients, promoting their activation to improve their own health, connecting them to appropriate services, addressing questions and supporting integrated treatment plans. The planning period enabled the assessment of knowledge gaps in the workforce, surfaced barriers and impediments to supporting clients in managing their health and allowed us to feed these findings into a curriculum, course and training schedule design. It allowed us to reach beyond our original scope/audience to develop a peer certificate and Mental Health First Aid training.

Community Health Programs

COMMONWEALTH CORPORATION

Building skills for a strong economy.

The planning grant allowed CHP to prepare for the upheaval that is changing the health care landscape, especially those changes that will change how primary care is delivered and paid for. CHP was able to develop a broad-based training program that will give staff the tools they need to participate in a culture of excellence: both hard skills (the ability to work effectively in a complex EMR) and interpersonal skills that shape every interaction with a patient. CHP's multi-pronged approach will begin as soon as employees are hired and continue throughout their employment.

WIB Region: Central MA

WIB Region: Central MA

WIB Region: Berkshire

WIB Region: Cape & Islands

WIB Region: Franklin/Hampshire

Community Healthlink

Community Healthlink, in partnership with SEIU Local 509, engaged in a planning process to identify staff training needs in core competencies for providing integrated primary and behavioral health care, a key workforce challenge directly related to the implementation of MGL Chapter 224. A Planning Team developed, implemented, and analyzed data from a staff survey on core competencies that were identified by state and federal expert groups. The Planning Team used these data and this process to identify priority training needs for a diverse staff providing primary and behavioral health care services over a large geographic area.

Cooley Dickinson Health Care

Our goal for the planning grant was to further the development of our new Integrated Care Management Program (iCMP). The purpose of the iCMP is to provide extra support to patients with chronic illness to enhance their quality of life and to assist the local health system in using resources more efficiently. The planning grant allowed us to assess the training needs of staff and develop a training plan; incorporate a range of disciplines into program planning; assess infrastructure needs to support a fully implemented iCMP program; and to begin to prepare for program expansion.

Dorchester Multi-Service House

The goal of our planning grant was to conduct a general workforce skills assessment and make recommendations on the feasibility of an internal training department at Dorchester House. Through this process we identified skills gaps, staff capacity, and determined we have significant opportunities for improvement in how new workflows and processes are communicated and how managers evaluate staff performance. These findings and recommendations for improvement will guide our workforce activities over the coming year.

Fellowship Health Resources

It is the goal of FHR to provide Massachusetts staff with the education and the tools to provide and guide individuals with support and education through the health care system. Concurrently, staff will become more aware of their own health and wellness issues. Planning grant funds were used to develop curriculum in order to provide staff with several trainings, thus increasing the awareness and importance of Integrated Health Care in both the staff's and the client's lives. In addition, we developed training for our business associates in order to meet the changing needs of payment reform in the Commonwealth of Massachusetts.

Gandara Center

The Children's Behavioral Health Workforce Collaborative is a coalition of employers working to reduce mental health disparities and strengthen clinical care in racial, ethnic and underserved communities. Led by Gandara, we conducted a comprehensive Employer Needs and a Skills Gap Analysis survey, developed training plans and materials, and revised an existing Children's Behavioral Health Worker Certificate Program curriculum.

Greater New Bedford Workforce Investment Board

The Greater New Bedford WIB, as part of the Southcoast Healthcare Collaborative, used planning funds to analyze the workforce needs of local healthcare employers. Our education partners, UMass Dartmouth and Bristol Community College, met with interested employers to review existing training programs that could be made available or tailored. Through this planning period, we also identified a low rate of BSN-prepared nurses in our regions, and a strong interest in funding scholarships or tuition assistance programs for Associate degree nurses (ADNs) to advance in their education though the UMass Dartmouth online nursing program.

Greenfield Community College

The goal of this planning grant was to create advancement opportunities for direct care health workers through a dual-path training model that meets employer-identified needs for enhanced workforce training, while allowing for latticed entry points between credit-free and academic program coursework. GCC, working with regional acute and long-term care providers in the region, worked to identify employer needs in the direct care workforce that would enable their workers to achieve higher rates of retention in employment while increasing the value and mobility of those workers through increased skills, leading to lower costs of training and improved quality of care.

WIB Region: Greater New Bedford

WIB Region: Franklin/Hampshire

WIB Region: Greater New Bedford



WIB Region: Franklin/Hampshire

WIB Region: Boston

WIB Region: Hampden

WIB Region: Central MA

Hallmark Health System

The goal of the planning grant was to create a pharmacy technician training program to further grow and develop this necessary group of health care workers. During the grant period, the infrastructure for the program was developed with the hiring of a program coordinator, creation of the curriculum, course calendar and syllabus. Supplies and textbooks were also purchased to prepare for the start of the program. This time was also spent marketing and recruiting for the program by creating a brochure, application, math assessment exam and having information sessions for interested candidates.

HealthFirst Family Care Center

As a member of the Community Health Worker (CHW) Collaborative, the planning grant allowed us to continue to define and establish a Training Collaborative for our South Coast region, securing commitments from partner organizations to become training/internship sites, and from providers to serve as faculty. In addition, we were able to pursue and successfully establish a Professional CHW Networking Organization. These milestones achieved have taken us a long way towards advancing the role and identity of CHWs in our region.

Holyoke Community College

To meet the ever-rising need for Certified Nurse Aides and Home Health Aides, Holyoke Community College (HCC) worked in partnership with Loomis House and the Soldier's Home of Holyoke to assess the relevance of HCC's existing CNA training program, and to develop a program that would meet the training and skill needs of both students and employers. Developed with both non-traditional and traditional students in mind, HCC developed a Direct Care Worker Certificate that gives students pathways into the health care field, allowing them to obtain work immediately upon completion of this certificate or to continue working toward another allied health degree.

Home Care Aide Council

The goal of the Home Care Aide Council's project was to determine the training needs of home care aides who provide care to individuals with mental and behavioral health diagnoses. The Council conducted focus groups and interviews with home care aides, home care supervisors, community stakeholders, and key informants to inform the new curriculum. In addition, eighteen curriculums were reviewed to determine best practices for training healthcare workers on mental and behavioral health. A final report was produced, which includes the curriculum review, results from the focus groups and interviews, and the mental health curriculum outline.

Justice Resource Institute

JRI Health received a planning grant for the purpose of developing a plan to create a trauma-informed system at the agency. We formed a Trauma Leadership Team, developed a curriculum, performed pilot trainings, and collected feedback in the form of evaluations. We then held three initial trainings and one program assessment to build staff knowledge about trauma and resilience. The team developed several tools that will be used to help staff members assess their own capacity to work with clients with trauma histories and maintain their own wellness.

Jewish Vocational Service

JVS, in partnership with Boston Children's Hospital, Brigham and Women's Hospital, and Hebrew SeniorLife, set out to explore new approaches to reshaping healthcare workforces to achieve improvements in cost containment and quality of care. We identified key front line roles in ambulatory services, patient care, and food service where there is a need for increased customer service, communication, critical thinking, and technology skills in order to successfully meet the demands of the changing healthcare landscape. We developed customized and highly contextualized training programs to support each employer partner in addressing their unique challenges.

WIB Region: Boston

WIB Region: Metro North



WIB Region: Bristol

WIB Region: Hampden

WIB Region: Metro North

WIB Region: Metro South/West

Lahey Clinic

Through a multi-level gap analysis including surveys, focus groups, and site visits, the planning grant enabled us to develop a much-needed training curriculum to provide Lahey Hospital & Medical Center Medical Assistants and Clinic Assistants with the skills needed to join the PCMH team model of care. Responding to both Chapter 224 and the goals of the Health Care Workforce Transformation Fund, the project will significantly improve coordination among LH&MC practices, assess the skills of current staff, and develop a plan to provide current and future workers with required skills and competencies in emerging models of healthcare delivery.

Lowell Community Health Center

Lowell Community Health Center's Planning Grant goal was to develop a Community Health Worker (CHW)/Medical Assistant (MA) bi-directional Training Program, which incorporates aspects of community health and patient-centered care. We established a partnership with the MA League of Community Health Centers to develop a bi-directional training curricula, obtained feedback from Lowell CHC's CHWs and MAs to inform training curricula, engaged in discussions with Northern Essex Community College on obtaining credits for training, and began seeking input from Lowell CHC's Human Resources department to integrate pieces of a current successful Management Leadership Training Series for supervisors of CHWs and MAs.

MA Coalition for the Prevention of Medical Errors

The MA Coalition for the Prevention of Medical Errors, in collaboration with Hallmark Health Medical Associates (HHMA), used Planning funds to set the foundation for quality improvement skills within HHMA, beginning with the training of a coach to work with office practices to improve their care processes. This model is valuable, as an internal coach can train practice staff in strategies to improve quality and efficiency without disrupting daily patient care. Further, the MA Coalition developed a plan to collaborate with physician organizations in implementing performance improvement, including activities to share lessons learned and sustain ongoing improvement.

MA Hospital Association

The planning grant was instrumental for our organization, allowing us to outreach to our members to assess their training and educational needs to fill the immediate and longer-term challenges presented by health care reform. The grant enabled us to hire a consultant who interviewed fifteen hospital leaders and helped us implement and interpret a survey. We now have a roadmap with programming identified to help healthcare providers adapt to the new care delivery system. We also published a report, Changing the Conversation: Accelerating Workforce Transformation in Healthcare, which is available on our website.

Merrimack Valley Workforce Investment Board

The Merrimack Valley Workforce Investment Board and three Merrimack Valley skilled nursing/long-term care facilities collaborated to address workforce challenges arising from alignment with Chapter 224. Strengthening team-based, person-centered care was identified as key for facilities to contain costs while improving care quality. To do so requires improved communication, teamwork, and cultural competency among direct care staff, especially Certified Nurse Assistants and their Nurse Supervisors. Our team evaluated existing curricula and then planned trainings in palliative/end of life care, English, and cultural competency. We also planned the establishment of a CNA mentoring program, and a coaching approach to CNA supervision.

Metro North Regional Employment Board

With a focus on clinic and primary care office settings, we identified key roles of healthcare workers within the Patient Centered Medical Home model, assessed skill gaps, and identified needs for training in the emerging fields of PCMH care delivery. Collecting data from surveys, interviews, and focus groups conducted at two healthcare institutions, an evaluation report was prepared. Those results provide insight to how teamwork and patient engagement can reduce costs for providers and will be used as basis for the training grant proposal, aimed at enhancing current healthcare trainings to develop a pipeline of workers ready to provide quality care aligned with PCMH.

WIB Region: Merrimack Valley

WIB Region: Metro North



WIB Region: Metro North

WIB Region: Greater Lowell

WIB Region: Metro North

WIB Region: Metro North

Metro South/West Employment & Training Administration

MSWETA planned to provide healthcare facilities with the ability to deliver higher quality healthcare. By building the skills and careers of healthcare workers, as well as providing an entryway to the healthcare field for jobseekers, we can support a workplace that promotes the development of employees and that strives to provide quality patient care. We have partnered with Cataldo Ambulance to develop a strategy to advance lower wage EMTs through training leading to paramedic credentials, and to fill vacated EMT positions with qualified Career Center applicants.

North Shore Community Action Program

North Shore Community Action Programs, in partnership with Salem State University, executed planning activities for North Shore Community Health, Inc. (NSCHI). The goal was to conduct a needs assessment and develop a curriculum scope and sequence addressing workforce development needs necessitated by Chapter 224 reform, with a focus on the communication and teamwork skills of front line employees. The needs assessment included a staff survey, NSCHI Work Group focus groups, and on-site employee interviews. Gathered data informed training recommendations that include Medical Assistant training, advanced inter-professional communication training for key management, and career development for entry-level staff.

North Shore Workforce Investment Board

The Patient Center Medical Home (PCMH) model involves the patient and family in their own care, in partnership with the entire team of primary care professionals. Fully focusing on healing, prevention and on-going wellness without emergency room or (re) hospitalization responses, this model can result in cost containment and improved health care outcomes. Primary Care staff, and especially Medical Assistants as the hub of the care team, require extensive training with regard to this new system. This grant focused on surveying employers to understand current skill levels existing in their organizations in relation to PCMH standards, and developing curriculum for Medical Assistants and others that allow for the implementation of PCMH.

Organization of Nurse Leaders

This planning grant resulted in the convening of key stakeholders in healthcare across the Commonwealth. Our goal was to discuss and plan innovative and cost effective solutions for recruiting and retaining newly licensed nurses. This effort is important given the current turnover and anticipated nursing shortage we are experiencing in Massachusetts. Addressing the nursing workforce issues in diverse healthcare settings is imperative to the future implementation of Chapter 224.

Partners HealthCare

Partners HealthCare's Planning Grant goal was to develop the curriculum plan for an online, competency-based, self-paced certificate program to prepare non-clinical staff for revised, expanded and/or new roles in its community health centers and ambulatory practices that are currently engaged in PCMH transformation as a strategy to control costs, expand access and improve outcomes. In collaboration with College for America and with the engagement of practice leaders, managers, clinicians and staff, the planning grant resulted in the identification of the goals, competencies and healthcare contextualization that will inform the design of the certification program.

Partners Home Care

Partners Home Care conducted a survey of clinical and non-clinical staff across our Continuing Care network, including two acute inpatient rehabilitation hospitals, two long-term acute care hospitals, two skilled nursing facilities, and a home care agency. The survey was designed to assess self-reported training and competency in palliative care and advanced illness management. Staff members were asked to assess their own skills, their training needs, and the needs they saw in their departments. The survey was designed to inform the design of palliative care and advanced illness management training for the Network.

WIB Region: Metro North

WIB Region: North Shore

WIB Region: North Shore

WIB Region: Boston

WIB Region: Metro North

WIB Region: Metro South/West



Partnerships for a Skilled Workforce

The Planning Grant had two objectives: (1) to determine the feasibility of adapting Hebrew SeniorLife's senior nursing assistant curriculum to a community college setting; and (2) to determine if skilled nursing facilities and community health centers in our region valued and needed senior nursing and/or medical assistant roles in their organizations. As a result of a positive response, Quinsigamond, MassBay and Middlesex Community Colleges will offer the senior assistant programs to 30 front-line workers from Epoch Senior Healthcare of Sharon, Mary Anne Morse Senior Health Care of Natick and Family Health Center of Worcester.

Quinsigamond Community College

Quinsigamond Community College (QCC) focused the planning grant activities on the large, non-English speaking community living and working in central Massachusetts. Research revealed this population cannot take advantage of their access to quality care or their required course of care. QCC conducted a thorough needs assessment of local health care and high school organizations, analyzing their alignment with Chapter 224 goals and current skills gaps. QCC then analyzed results, outcomes and competencies in order to develop curriculum, syllabi, and a training plan for a new Medical Interpreter program in Spanish.

REB of Hampden County

The Healthcare Workforce Partnership of Western Massachusetts, an initiative of the Regional Employment Board of Hampden County, conducted the Western Massachusetts Clinical Lab Workforce Analysis to understand workforce supply/demand issues and develop training and education strategies for medical technologists (MTs), medical lab technician (MLTs) and clinical lab assistants (CLAs). Recommended strategies include establishing clinical ladders that clearly differentiate the roles and responsibilities of these occupations, increasing the proportion of MLTs to MTs to address impending MT retirements and reduce labor costs, increasing utilization of and adopting a formalized on-the-job training that includes enhanced preceptor training.

Riverside Community Care

Riverside's grant focused on refining a workforce training strategy to effectively implement an electronic health record system rollout organization-wide. We identified: 1) technological and operational aspects of interfacing with partners in the broader health care system that we must ensure our IT staff understand and can communicate effectively to our workforce, 2) priority areas of need for training on work process flows, and data use, 3) best methods for staff training, and 4) suggestions from staff for what Riverside should address to remain an organization where staff want to stay and work as they attain skills and the organization transforms.

Royal Health Group

Royal Health Group had set forth goals during the planning grant period to review, assess, and standardize our orientation, on-boarding and training programs. As a result of our focus groups, meetings, and assessments, the Royal Odyssey Mentor Program has been established to assist in the retention of our valued employees.

South Shore Hospital

During the planning grant period, our focus was on creating an education curriculum framework to train transitional RNs with 2-5 years of nursing experience in new areas of nursing practice, and to ensure understanding and advance knowledge related to providing high quality, cost-effective care while utilizing evidence-based research and best practices.

Southcoast Physicians Group

COMMONWEALTH CORPORATION

Building skills for a strong economy.

The Southcoast Health and Bristol Community College's Quality Enhancement Through Employee Development initiative goal was to identify the skills gap among current Southcoast Medical Assistants, to uncover key health, wellness and prevention skills applicable to the Southcoast region, and to develop the training that will ensure the alignment of Southcoast Health with the goals and objectives of Chapter 224. The purpose of the development plan is to incorporate and implement evidence-based methods for employee acquisition of the emerging "health management and prevention" skills and knowledge critical to affordable healthcare in the 21st century.

WIB Region: Metro South/West

WIB Region: Central MA

WIB Region: Hampden

WIB Region: Metro South/West

WIB Region: Greater New Bedford

WIB Region: South Shore

WIB Region: South Shore

Spaulding Rehabilitation Hospital

Spaulding Rehabilitation Hospital led an initiative across Partners Continuing Care Affiliates to assess career ladder services for staff, identify gaps, and create a plan to provide more comprehensive and seamless services. Improved career ladder supports will improve retention of staff and patient care. Planning Grant milestones included interviews with Human Resource staff and leaders, staff focus group and recommendations that will support an initiative to improve staff career ladder and career development supports.

UMASS Memorial Medical Center

UMASS Memorial Medical Center used the planning grant as a foundation for an updated, formal approach to skills assessment, education and training. This funding helped us implement an initial skills identification and assessment project that will be a model for future organization-wide efforts. We gained valuable insight into skill gaps (and eventual skills gap training) that will lend itself to a more effective organizational goal accomplishment and better service and care for our patients.

VNA & Hospice at Cooley Dickinson

Our goal for the planning grant was to jumpstart the VNAH's residency program in order to provide newly graduated occupational therapists and nurses with a paid, six-month, cross-continuum, multidisciplinary residency experience that prepares them for success in the home health care setting. We formed higher education and continuum care stakeholder partnerships in order to develop a cross-continuum fellowship experience, review higher education curriculum, and develop candidate criteria. We hired a Director of Workforce Training and Residency Programs for ongoing program development and oversight. We anticipate preparing preceptors in 2014 and starting our first residency program in 2015.

VNA Care Network Foundation

The VNA Care Network Foundation and Simmons College School of Nursing and Health Sciences recognize the critical place of home care in the health care continuum. Physical Therapy is a crucial service for elders receiving care at home, and yet there is a chronic shortage of Physical Therapists entering home care practice. The institutions have partnered and created a Geriatric Home Care Intensive Program that will introduce PT students to home care practice during their academic program, and then provide knowledge, skills and mentorship needed for newly licensed Physical Therapists to successfully start their careers in home care.

Western MA Public Health Training Center/University of MA, Amherst

The University of Massachusetts Amherst and Caring Health Center in Springfield, MA, recognized that higher health care costs are linked to shortfalls among healthcare team members in areas of cultural competency and goal-setting. We administered a cultural competency survey and also conducted focus groups and developed a goal-setting survey; surveys were distributed to all Community Health Center staff. Respondents acknowledged the value and need for additional cultural competency skills and training. Beyond the role of clinical professionals in goal-setting, non-professional staff within every job category identified their occupation as having additional contributory roles in setting and reinforcing goals and problem-solving barriers.

YMCA Training Inc.

The grant goal was to develop a training program to address the staffing needs faced by Managed Care Organizations for skilled Member Services staff in response to CH 224 and the Affordable Care Act. Our activities and completed work include: needs assessment of current and anticipated staffing; development of a training curriculum; development of a simulated Managed Care Organization for training purposes; and development of an internship, referral and employment process.

WIB Region: Boston

WIB Region: Boston

WIB Region: Hampden

WIB Region: Boston

WIB Region: Central MA

WIB Region: Franklin/Hampshire



Summary of Proposal: The proposed Project will incorporate a Train- the Trainer model to train 600 employees of LCHC and Union Hospital in the management and de-escalation of patients and visitors that present difficult behavioral issues in their interactions with staff and other patients. Managers will receive additional coaching training to support their staff in implementing the safety training and skills.

Grantee: Anna Jaques Hospital

Grantee: 1199SEIU Training and Upgrading Fund

Summary of Proposal: Anna Jaques Hospital seeks to develop a robust RN to BSN program to build nursing skills, help strengthen the culture of nurse critical thinking and, as a direct result, decrease nurse sensitive errors.

Grantee: Baystate Medical Center

Summary of Proposal: Using a team centric approach, Baystate Medical Center will deliver an Advanced Practice residency and prepare newly graduated physician assistants and nurse practitioners to practice to the fullest extent of their license. BMC will also train ambulatory practice staff, incumbent advanced practitioners, and attending physicians on best practice utilization and integration of APs into the care model maximizing quality and minimizing costs. Measurable objectives will include advanced practitioner turnover, patient access rates, and patient experience scores. BMC will educate AP residents on care transitions and link them with an integrated health delivery system.

Grantee: Berkshire Medical Center

Summary of Proposal: Berkshire Medical Center will offer career ladder training for nursing assistants enabling them to advance to CNA IIs or into a mentoring role for other CNAs. Nursing assistants will be selected to participate based on their interest in advancing within the CNA and/or nursing field, past performance and supervisor recommendations.

Grantee: Beth Israel Deaconess Hospital: Milton

Summary of Proposal: The BID-Milton workforce transformation fund initiative will focus on training CNAs and Phlebotomists in advanced geriatric care. The curriculum will be designed as a result of developing a NICHE hospitalbased culture. NICHE (Nurses Improving Care for Health system Elders) is a nationally-recognized program designed to stimulate a change in the culture of healthcare facilities to improve the care of older adults by enhancing hospital practices and sensitivity to the needs of this patient population. Simulation training will be a critical component of the proposed training.

Grantee: Beth Israel Deaconess Hospital: Plymouth

Summary of Proposal: BID-Plymouth staff plan to use Lean Continuous Improvement training and development as a means to improve the quality and efficiency of care provided to patients in order to align with Chapter 224. The training will be centered on developing our hospital leaders to be lean practitioners. Training will be provided by expert Lean practitioners from Greater Boston Manufacturing Partnership. Emphasis will be placed on hands-on simulations and workplace practice to enable these practitioners will to address the waste and challenges that interfere with the provision of efficient and quality care, both now and well beyond the grant period.

Grantee: Beth Israel Deaconess Medical Center: Boston

Summary of Proposal: Toward the goal of providing more efficient and effective care for hospitalized patients, BIDMC seeks to implement innovative team-based modes of delivering health care services. We will provide three phases of comprehensive team training to all staff members on three medical-surgical inpatient units. Our goal is to develop high-functioning teams that can then improve standard processes, ultimately resulting in a decreased acuity-adjusted length of stay for patients.

Grantee: Boston Center for Independent Living

Summary of Proposal: This training project is a joint effort of BCIL, GBLS and BMC to address historical barriers to quality care for patients with disabilities that have negatively affected health outcomes. Since 2010, the three organizations have worked to identify areas of improvement in the care of patients with disabilities. This training will help workers improve cross-cultural communication and listening skills to create a more patient focused approach that allows patients to more effectively participate in their care.

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WIB Region: Boston

WIB Region: Boston

WIB Region: South Shore

WIB Region: Berkshire

WIB Region: South Shore

WIB Region: Hampden

WIB Region: Merrimack Valley

WIB Region: Boston

Grantee: Boston Health Care for the Homeless Program

Summary of Proposal: Providing care in a way that legitimizes and addresses both substance use disorders (SUDs) and the multiple traumas our patients endure is a most important challenge our organization faces as it readies to meet the demands and opportunities of Chapter 224. We will offer trainings in motivational interviewing and trauma-informed care to clinical staff. This will significantly enhance the ability of our staff to address the needs of a special population – people who experience homelessness.

Grantee: Boston University Center for Aging & Disability Education & Research WIB Region: Boston

Summary of Proposal: This project will provide blended training to address the operational change Commonwealth Care Alliance (CCA) is undertaking in an effort to strengthen the capacity to provide team based, person-centered care, including patient engagement. We will implement and create competency informed training in key domains identified in the planning grant: 1) Philosophy of Person-Centered Care; 2) Norms and Skills of Team-Based Care; and 3) Engagement and Communication. We will use CADER's online courses and create a new course that is particular to CCA's needs and to the aims of Chapter 224. This training will be followed by in-person trainings at CCA.

Grantee: Brigham and Women's Hospital

Summary of Proposal: The overall goal of the Patient Care Assistant Technology (PCAT) Project is to train Patient Care Assistants (PCAs) to be competent in the use of emerging technologies so that they can work to the maximum capacity of their training to achieve increased efficiencies and improved quality of care. Aim 1 is to provide technology training to a selected group of PCAs to transition them into a new role as Monitor Technicians. Aim 2 is to provide Basic Computer Skills Training to all PCAs in order to prepare them for future training in electronic medical record documentation, which is being implemented in 2015.

Grantee: Care Dimensions

Summary of Proposal: This proposal will fund the initial costs of developing two training initiatives in collaboration with Regis College to address recruitment and retention impacting the cost and quality of hospice/palliative care. I - Care Dimensions proposes to develop a nurse residency program in hospice and palliative care. This upfront investment fills a gap in professional education, allowing nurses to develop the expertise to work to the maximum capacity of their license in a shorter time frame. II - The second component is the development of online learning modules for staff in the residency program and for current nursing staff practicing in the field.

Grantee: Central Massachusetts AHEC

Summary of Proposal: This project will address the need to re-train Community Health Workers at the Edward M. Kennedy Community Health Center (EMK), in order to provide them with a more comprehensive skills set. The enhanced skills align with the upskilling and certification efforts at the state level, and will help EMK address operational challenges as they respond to the needs of CH 224.

Grantee: Clinical and Support Options

Summary of Proposal: Integrated Health Treatment Education and Training is a program of education and training to develop general skills for Mental Health and Substance Abuse practitioners/professionals in engaging patients, promoting their activation to improve their own health, using general medical knowledge to be able to connect them to appropriate services, to address questions and to support integrated treatment plans. The education and training program will enable staff to target people coping with chronic illnesses that put their health and/or social functioning at risk and to take an integrated approach to addressing their problems.

Grantee: Community Healthlink

Summary of Proposal: Community Healthlink proposes to train current and newly hired staff in two essential areas directly related to the implementation of MGL Chapter 224: Core Competencies for Integrated Primary and Behavioral Health Care, and Core Competencies for the Use of a Fully Integrated Electronic Health Record. Community Healthlink will train staff in core competencies for integrated care and in core competencies for the use of the integrated electronic health record using a training strategy including expert trainers and staff trained as trainers by the experts. This model provides Community Healthlink with sustainable capacity to train new staff.

Grantee: Community Health Programs

Summary of Proposal: CHP seeks funding to implement a Performance Excellence training program for its employees that will decrease turnover by 20%, improve patient satisfaction by 10%, and reduce unplanned hospitalizations by 8%.

WIB Region: Franklin/Hampshire

WIB Region: Berkshire

WIB Region: Central MA

WIB Region: Boston

WIB Region: Boston

WIB Region: North Shore

WIB Region: Central MA

Commonwealth Corporation

Health Care Workforce Transformation Grant – Training Grants Summary of Grant Awards 2014 Grants Funded: 55 | Total Request: \$12,697,000

Grantee: East Boston Neighborhood Health Center

Summary of Proposal: East Boston Neighborhood Health Center's (EBNHC) Education and Training Institute (ETI) will coordinate two in-house training series. One will target all EBNHC Medical Assistants to attend a mandatory eight hours of hands-on classes focused on specific areas of patient care. For the other one, ETI will coordinate with a training partner, CHEC (Community Health Education Center), to custom tailor their Comprehensive Outreach Education Certification Program (COEC) for second-year HealthCorps Members from EBNHC and Boston Health Care for the Homeless Program. These COEC training modules will also be offered to targeted EBNHC front line staff as it relates to their various department patient populations.

Grantee: Fellowship Health Resources, Inc.

Summary of Proposal: FHR has developed a program utilizing the planning grant funds received to provide training and education to current and new employees on the operational changes which will be made in order to ensure alignment with Chapter 224. The curriculum which has been designed will address some of the key Primary Care issues we have found in our Transitional Age Youth Population, which include smoking cessation, weight issues, and abuse of illicit substances. In addition, our finance department, specifically the billing division, will receive training on the ICD10 Codes and how to effectively bill for the additional services FHR provides to the TAY in Massachusetts.

Grantee: Gandara Center, Inc.

Summary of Proposal: The project's goal is to reduce health disparities by increasing patient-centered care and improving the quality and efficiency of care for the most vulnerable, low-income, multicultural youth and families in Western & South East MA. Project includes the delivery of a Children's Behavioral Health Worker Certificate Program in Springfield & Taunton for workers from 4 employer sites. This training will improve home-based clinical care for culturally-diverse families struggling with multigenerational trauma. Grantee will also launch a demonstration pilot with a Community Health Center to integrate Behavioral Health Intensive Care Coordination services with pediatric care.

Grantee: Gosnold on Cape Cod

Summary of Proposal: Gosnold is seeking training that will focus on improving our staff's ability to manage and communicate patient data, work in a community-based setting, and maintain compliance in electronic health record (EHR) and coding mandates. Major training activities include communication skills; recovery and intervention coaching; primary care integration for clinicians; computer skills training ranging from basic skills to EHR modules; ICD-10 and DSM-5; and training for program enrollment facilitators.

Grantee: Home Care Aide Council

Summary of Proposal: Through this grant, the Council will develop two new curricula: a Supportive Home Care Aide Mental and Behavioral Health training and a "Partners in Care" Supervisor Training. These curricula will be piloted in two-phases. To begin dissemination, a Train-the-Trainer structure will be developed and a pilot session will be held. Additionally, five regional workshops will be hosted to inform the aging network about the new curricula.

Grantee: Jewish Vocational Service

Summary of Proposal: JVS and Boston Children's Hospital propose an Essential Skills Training Program to develop communication, time management, critical thinking, teamwork, change management, and technology skills in entry level and frontline employees. The goal of this program is to increase efficiency in clinic operations by decreasing disruption of services and costs associated with a high level of turnover in Ambulatory Service Representative positions, and improving the quality of care delivered to patients.

Grantee: Lahey Clinic

Summary of Proposal: Lahey Hospital & Medical Center (LHMC) seeks to develop and deliver a comprehensive and sustainable in-house training curriculum ensuring the successful, networked Patient-Centered Medical Home transformation of all LHMC primary care practices. The proposed training will target two PCMH roles, Medical Assistants and Clinic Assistants. The training program supports LHMC's efforts to enable MAs and CAs to work to the maximum capacity of their license, and to increase hospital efficiency and effectiveness through team-based models of delivering healthcare.

WIB Region: Cape & Islands

WIB Region: Metro North

WIB Region: Boston

WIB Region: Metro North

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WIB Region: Boston

WIB Region: Bristol

WIB Region: Hampden

Grantee: Lahey Health Behavioral Services

Summary of Proposal: Lahey Health Behavioral Services understands that health care must integrate mental and physical health, consistent with patient-centered care. The behavioral health (BH) clinic is an opportune setting for clinicians to teach patients self-management of chronic conditions. BH clinicians must also work closely with medical health providers to coordinate care. The BH workforce requires training to educate patients in Chronic Disease Self-Management (CDSM). Current degree programs do not include this training, nor are there post-degree trainings tailored for BH clinicians practicing in ambulatory clinics. This project, "Embracing Integrated Health Care", will be piloted at the Beverly Clinic and aims to fill this void.

Grantee: Lowell Community Health Center

Summary of Proposal: Our goal is to ensure that the Northeast Region of Massachusetts has a skilled workforce that has the talent, abilities, and credentials necessary to deliver high quality and cost effective patient care. This program will focus on Medical Assistants and Community Health Workers (CHW) working at Lowell Community Health Center (Lowell CHC), CHWs currently serving the Northeast region, and supervisors supporting these important front line worker roles.

Grantee: Lowell General Hospital

Summary of Proposal: Lowell General Hospital, in partnership with Middlesex Community College and the Greater Boston Manufacturing Partnership, will train leaders to implement Lean practices. Training addresses the operational challenge to improve significantly the quality and efficiency of care. Courses focus on: (1) Introduction to Lean in Healthcare and a Lean in Healthcare Certificate; (2) Leadership skills required to implement Lean; and (3) Processes and tools for consistent application of Lean practices across the organization.

Grantee: L.U.K. Crisis Center

Summary of Proposal: The proposed Electronic Health Records (EHR) Training and Implementation project seeks to provide training to staff in order to effectively and efficiently implement a new EHR system within the BHS Division at LUK, Inc.

Grantee: Massachusetts Coalition for the Prevention of Medical Errors

Summary of Proposal: The MA Coalition for the Prevention of Medical Errors will collaborate with Mount Auburn Professional Services (MAPS), a physician organization, to train MAPS coaches and selected office practice clinicians and staff in the use of quality improvement techniques that will enable them to address inefficient or ineffective processes as they implement the provisions of Chapter 224. This collaboration will build a quality improvement infrastructure within MAPS that includes trained, experienced coaches, and a collaborative learning environment for all MAPS practices. This training project is built on the successes and learnings from the PROMISES project and the HCWFT planning grant.

Grantee: Massachusetts League of Community Health Centers

Summary of Proposal: The MA League of Community Health Centers will partner with community health centers in diverse geographic communities of the state to implement an Advanced Medical Assistant Training curriculum to enhance the knowledge and skills necessary for effective team based roles in delivering Patient Centered Medical Home primary care. The goal is to enhance the professionalism of CHC Medical Assistants and build career opportunities for this workforce. Participant health centers will participate in technical assistance to develop their own sustainable, continuous Medical Assistant workforce training program using the curriculum, facilitators guide and other tools implemented through this project.

Grantee: Massachusetts Hospital Association

Summary of Proposal: Through the Workforce Transformation Fund Planning Grant research, the MA Hospital Association identified the skills training needs of local members. The Training Grant will support training in Motivational Interviewing for Enhanced Care Delivery and Interdisciplinary Team-Based Care. Training in these two areas will help healthcare workers improve patient care, increase morale and resilience, and provide staff with the skills to ensure patient-centric, population health management.

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WIB Region: North Shore

WIB Region: Metro North

WIB Region: North Central MA

WIB Region: Boston

WIB Region: Metro North

WIB Region: Greater Lowell

WIB Region: Greater Lowell

Grantee: Massachusetts Nurses Association

Summary of Proposal: This project will provide for training of specialized nursing personnel to meet future staffing requirements that are anticipated due to the upcoming retirement or early separation of many in our current nursing work force. Participating hospitals anticipate attrition of perioperative nurses at each facility within the next couple of years with potential implications for appropriate staffing if replacement nurses are not trained. The area of perioperative nursing requires a 6-12 month orientation period. Perioperative nursing practice is highly skilled and is no longer included in basic nursing curriculum.

Grantee: Massachusetts Senior Care Association

Summary of Proposal: Care Transitions Education Project Phase 2 Demonstration Sites will increase the capacity of frontline nurses from across the continuum of care to lead and improve patient-centered care transitions. MA Senior Care Association will work with 9 regionally diverse employers, 1 union and Central MA AHEC to deliver an evidence-based training to nurses caring for patients in Lowell, Berkshire County and South Shore. Nurse educators from each employer will be trained to deliver the curriculum, facilitate patient tracer experiences, and implement a quality improvement initiative focused on reducing avoidable hospital readmissions and improving patient satisfaction.

Grantee: Merrimack Valley Workforce Investment Board

Summary of Proposal: Chapter 224 compels skilled nursing/long-term care facilities to contain costs while improving care quality. To do so requires operational changes, but workforce challenges make it difficult to implement them. MVWIB and three employer partners address these challenges by proposing a workforce training strategy to strengthen team-based, person-centered care. Direct care staff, with a focus on Certified Nurse Assistants, will receive training to improve English skills and cultural competency, and build ability in palliative/end of life care. A CNA mentoring program, and a coaching approach to supervising CNAs, will be instituted to reduce CNA turnover and build staff morale.

Grantee: Metro North Regional Employment Board

Summary of Proposal: Through the grant we will train two groups in team-based care and prevention and wellness. The first group is incumbent clinical staff in the health clinic setting, and the second group is college students enrolled in programs for patient care technicians and medical assistants. The training will include information about the PCMH model, team-based modes for delivering healthcare services, the roles of different team members, and the practices they use to coordinate and communicate about care. This training will provide detailed information on the social determinants of health.

Grantee: Nashoba Valley Medical Center

Summary of Proposal: The training program will consist of Lean Transformation for Healthcare, including Green Belt Training, Kaizen events, and 5S, as well as a White Belt Employee Overview for all 448 members of the hospital staff, and an Executive Overview for an executive advisory board. The training will impact all areas of the hospital but will focus primarily on the improving the Patient Discharge Process, improving the patient experience by reducing wait time, and saving the hospital thousands of dollars in staff productivity. We also expect to impact (decrease) readmissions; enhance patient flow within the acute care experience and within the continuum of care; and impact length of stay, decreasing costs through increased productivity both within the acute care setting and in the community.

Grantee: New England Quality Care Alliance

Summary of Proposal: New England Quality Care Alliance, in partnership with Tufts Health Care Institute, is seeking funding to develop and deliver a comprehensive training program for our care managers. The proposed training will strengthen the knowledge and skills of our care managers and improve the outcomes of their interventions with patients and practices. The new curriculum includes motivational interviewing, documentation standards and requirements, behavioral health training, workflows, warm-handoffs during introductions between providers and patients, and transitions of care. The implementation of the training will strengthen the care managers' capacity to provide patient-centered care and integrate behavioral health care with medical services.

Grantee: North Shore Workforce Investment Board

Summary of Proposal: Building upon the results of our HCTTF Planning grant, this project will provide training to Medical Assistants employed at the NEPHO and NEHS in skills that will lead to the certification of physician practices as Patient Centered Medical Homes. This certification will lead to enhanced patient care and satisfaction, along with cost growth containment.

WIB Region: Metro South/West

WIB Region: Metro South/West

WIB Region: Merrimack Valley

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WIB Region: South Shore

WIB Region: North Shore

WIB Region: Metro North

WIB Region: North Central MA

Commonwealth Corporation

Grantee: Notre Dame Health Care Center

Summary of Proposal: Notre Dame and Oriol leaders have identified a multi-faceted training strategy to address the following goals relating to CH 224 operational challenges: 1) Educate staff on the multiple aspects of transitions of care, training staff on early identification of patient status changes; 2) Increase leadership commitment and abilities to lead and manage teams in order to improve relationships and communications of care staff; 3) Increase observations skills and train staff on communication tools (SBAR) to increase team communication as it relates to resident care and transitions of care; and 4) Increase staff's ability to provide palliative/end of life care effectively.

Grantee: Partners Healthcare System

Summary of Proposal: Partners HealthCare, in partnership with College for America (CfA), will pilot a thirty (30) credit online, competency-based health care certificate program with a cohort of non-clinical staff and frontline clinical staff with non-clinical administrative responsibilities from our Community Health and Ambulatory Practices who are at various phases of transitioning to the Patient Centered Medical Home model of care delivery. We will also improve our existing Online College Preparation Program to serve as a better onboarding resource for the new health care certificate program.

Grantee: Partnerships for a Skilled Workforce, Inc.

Summary of Proposal: A group of experienced CNAs at Epoch Senior Health Care of Sharon and Mary Ann Morse Healthcare Center in Natick and medical assistants at Family Health Center of Worcester will be trained in advanced geriatrics to improve the care of elderly patients and in leadership, critical thinking and conflict resolution so that they strengthen their roles as members of the patient care team. MassBay, Quinsigamond and Middlesex Community College faculty will teach the course Creating Frontline Leaders, developed by Hebrew SeniorLife. Costs will be reduced as both the nurses and the assistants work to the top of their job descriptions.

Grantee: Partners Home Care

Summary of Proposal: We will improve delivery of Advanced Illness and Injury Management and Palliative Care through training clinicians and other staff in the post-acute environment. The project will create a replicable model for delivering these services through improving clinical expertise and creating unit-specific teams in each institution. The project will improve patient quality of life and has the potential to reduce cost while enhancing clinicians' skills.

Grantee: Riverside Community Care

Summary of Proposal: To ensure our workforce and systems are ready for effective collaboration with health care provider and insurer partners, we propose to use grant funds for a Riverside team to lead a cross-organization, site by site, EHR training and implementation strategy over two years. We are committed to communicating regularly with our workforce during this process, and providing information and training materials through web-based mechanisms that will help them understand and appreciate the need for this shift in the work environment, be equipped to work more effectively, and remain invested in working at Riverside when our transformation has concluded

Grantee: Salem State University

Summary of Proposal: The project proposes three major trainings designed to implement organizational changes needed for North Shore Community Health to address identified workforce challenges, implement Chapter 224, and lay foundation for future certification as a PCMH. Salem State University will implement and oversee: Medical Assistant Training; Frontline Staff Training on Communication and Documentation for Health Care; and Inter-professional Education for NSCHI Clinical Leadership. Organizational changes include enabling employees to work to maximum capacity of their training, and strengthening employees' capacity to provide patient-centered care. Trainings incorporate content on inter-professional, team-based practice as central to achieving identified organizational changes.

Grantee: Signature Healthcare Medical Group

Summary of Proposal: Signature Medical Group (SMG) will implement a Patient Centered Medical Home (PCMH) model of care in 7 of its 11 ambulatory care practices by April 2016. However, a recent assessment revealed a significant gap in skills sets and knowledge of PCMH concepts among the practices' clinical and administrative staff. To address this need and prepare its workforce for a PCMH transition, SMG will implement a customized training for all practice staff in each practice, focusing on three areas: organizational development, PCMH concepts, and role-based skills.

WIB Region: Central MA

WIB Region: Boston

WIB Region: Metro South/West

WIB Region: Metro North

WIB Region: Metro South/West

WIB Region: North Shore

WIB Region: Brockton

Grantee: Simmons College

Summary of Proposal: Simmons College will take the lead in coordinating primary and secondary palliative care education to South Shore Hospital, South Shore Visiting Nurses Association, Hospice of the South Shore, Home & Health Resources and affiliated physician group practices through a combination of ELNEC train the trainer registrations, registration to national palliative care conferences, an intensive 6 month fellowship through the Harvard Medical School Center for Palliative Care as well as a series of professional development offerings on site by well-regarded palliative care specialists in the Boston area. Additionally institutional membership to the Center to Advance Palliative Care (CAPC) will offer access to free continuing medical education to all institutional staff to expand the reach of our palliative care education initiative.

Grantee: Southcoast Health Physician Group

Summary of Proposal: The Southcoast Health Quality Enhancement through Employee Development (QED) for Health Project will transform Southcoast Health Office Practice operations by establishing consistency in approach and treatment for all patients. This will be accomplished through competency-based education for 200 incumbent Medical Assistants (MAs) and 40 Office Practice Managers (OPMs). Education will standardize approach as well as teach MAs to apply health management and disease prevention strategies. Additionally, MAs will achieve certifications allowing them to work up to the full scope of their profession. OPMs will be fully integrated in employee development as trained Skills Mentors. QED provides a career path to industry certifications, higher education, and wage advancement for MAs.

Grantee Southcoast Visiting Nurse Association, Inc.

Summary of Proposal: Southcoast VNA, in partnership with SEIU 1199 and the Sutter Center for Integrated Care, will conduct a training and development program using an Integrated Care Management Model (ICM). Southcoast VNA's clinical staff will receive advanced training on ICM, to provide person-centered evidenced based care in line with CH224. Southcoast VNA aims to deliver better care at lower costs to patients being treated at home for chronic medical and behavioral health diseases including many receiving palliative and end-of-life care.

Grantee: Springfield Technical Community College

Summary of Proposal: Four long-term care employer facilities will assemble a team of management and CNA employees to train in lean practices and problem-solving techniques. Teams will identify operational obstacles preventing improvement to delivery of patient services and/or resulting in waste. Teams apply value stream mapping techniques to identify waste, process improvement opportunities and recommend cost saving solutions. Teams will learn in a train-the-trainer structure to promote post-grant scalability. STCC will design and deliver on-site patient simulation for assessment and remediation of CNA skill deficiencies identified during the analysis phase obstacles to solution implementation.

Grantee: The Carson Center for Human Services

Summary of Proposal: The Carson Center proposes to use training funds to help launch local child and adult healthcare practices in two western MA regions that can skillfully integrate behavioral health and medical services at multiple access points: onsite in primary care practices, in the communities with the help of specialized training in chronic illnesses and integrated care management for its behavioral health care coordination and outreach workforce, and, finally, in its mental health clinics where newly trained and employed medical assistants will routinely measure and track vitals of psychiatric patients in an efficient and cost-effective way.

Grantee: The Home for Little Wanderers

Summary of Proposal: The project will address workforce challenges attributable to operational changes needed to implement and align with CH 224, and will have a direct impact on reducing health care disparities, strengthening capacity to provide patient-centered care, improving the quality and efficiency of patient care, and integrating behavioral health and medical care. We will deliver three tracks of education and training, each targeting a different workforce component. These include: (1) a children's behavioral health worker certificate program, (2) training on treating family trauma in multicultural communities to improve long-term health outcomes, and (3) training on integrating children's behavioral health and pediatric care.

WIB Region: Boston

WIB Region: Hampden

WIB Region: Boston

WIB Region: Greater New Bedford

WIB Region: Greater New Bedford

WIB Region: Hampden

Grantee: UMASS Amherst, Western MA Public Health Training Center

Summary of Proposal: Healthcare workers, organized into patient centered medical homes, need new skills to coordinate care and achieve healthcare goals. Using Planning Grant funds, UMass Amherst and Caring Health Center (CHC) in Springfield identified three areas for new training: cultural competency, goal-setting and increased awareness of available resources. With this Grant we will train CHC staff members in these areas in order to engage patients by impacting CHC's no-show rate. In addition, a pilot project focused on one CHC care team will test these new skills in a shared medical appointment to provide multidisciplinary team based care to adults with type 2 diabetes.

Grantee: UMass Memorial Medical Center

Summary of Proposal: Using the perspectives gained from our planning grant efforts, the outcome of our training and development activities will be an employee who is capable at his/her role, who everyday creates the positive patient experience that will support UMass Memorial success, and who is capable of guiding his/her own career development. The grant will fortify our efforts to create, deliver, and support programs and models that enhance our employees' present and future success in their current roles and will help prepare them for the future opportunities in other career paths at UMass Memorial Healthcare.

Grantee: VNA and Hospice of Cooley Dickinson

Summary of Proposal: The Cross-Continuum Inter-professional Residency Program is designed to provide newly graduated nurses and occupational therapists with guided exposure and experiences that allows each to transition from student to competent clinical professional able to manage complex patient needs safely and effectively in patients' homes. The program supplies graduates with a cross-continuum experience in hospital, extended care, and home settings, providing an experiential understanding of those care settings that patients are likely to be transitioning from, as well exposing residents to the challenges and benefits specific to home health care.

Grantee: VNA Care Network Foundation

Summary of Proposal: We plan to an innovative Geriatric Home Care First Work Experience for Newly Graduated Physical Therapists as means of addressing increasing demand for and shortage of Physical Therapists in home care. The VNACNF is partnering with Simmons College to increase content in home care practice for Doctor of Physical Therapy students. Additionally, the program will include preceptor development for current home care Physical Therapists, Physical Therapy specific orientation content, and content specific to the home care of elders with common chronic illnesses. The program is designed to decrease Agency vacancy rates, improve efficiency of care, and achieve improved patient outcomes.

Grantee: YMCA Training, Inc.

Summary of Proposal: The project will provide pipelines for employment for newly trained Member Services Representatives and Claims Processing staff at Managed Care Organizations and Health Insurance Companies. We will train unemployed and underemployed men and women to fill these critical positions within our employer partner organizations. Ch224 will lead to significant changes including: eligibility, benefits, service delivery payment options, payment processes, and reporting. These will lead to a significant increase in calls for enrollment and for information, and therefore will require an increase in the number of Member Services Representatives who are knowledgeable and prepared to fill this role.

WIB Region: Boston

WIB Region: Boston

with type 2 diabetes. WIB Region: Central MA

WIB Region: Franklin/Hampshire

WIB Region: Franklin/Hampshire

COMMONWEALTH CORPORATION Building skills for a strong economy.

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Health Care Workforce Transformation Fund Planning Grants

his 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 othcare workforce organier health zations 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.

The diverse array of employers and other lead organizations challenges of their region's health care 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.

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 frontline 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 associa-

> tions to better understand the workforce 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).

