NewYork-Presbyterian
Queens

NewYork-Presbyterian/Queens PPS
DSRIP Workforce Gap Analysis & Transition Roadmap

PLAN OVERVIEW

Organization:	NewYork-Presbyterian/Queens PPS
Name of Analysis:	DSRIP Workforce Gap Analysis & Transition Roadmap
Approval Required:	NYP/Q PPS Executive Committee
Approval Date:	January 26, 2017

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INTRODUCTION

The NYP/Q PPS has completed the workforce gap analysis based on the requirements provided by the IA / DOH. The PPS workforce Target State and Compensation and Benefit Analysis were completed in DY1 and early DY2 and set the ground work for the Gap Analysis and Transition Roadmap deliverables. The PPS has completed a Gap Analysis to ensure alignment and reconciliation between the DSRIP application submitted in December 2014, the workforce implementation plan, the workforce milestone deliverables, and the forecasted and actual workforce impact reports. The Gap Analysis will be used to build the Transition Roadmap for the PPS.

The NYP/Q PPS partner network is comprised of over 100 unique organizations and employ over 10,000 employees, majority of which are located in Queens County. Due to existing healthcare transformation efforts as well as the focused selection of PPS network partners, the NYP/Q PPS anticipates minimal changes to the workforce over the 5 years of the DSRIP program (2015-2020). The following includes information on the workforce current state, the gap analysis for FTEs within the PPS network and the next steps for moving the workforce deliverables forward.

MILESTONES

This document will serve as a PPS strategy to address the following workforce milestones and tasks:

- Milestone #2 – Create a workforce transition roadmap for achieving your defined target workforce state.
- Milestone #3 – Perform a detailed gap analysis between current state assessment of workforce and projected future state

CURRENT STATE

The NYP/Q PPS completed an inventory of the current state of the PPS workforce to inform the target state, gap analysis, and transition roadmap deliverables. This data was collected via survey and is representative of the partner network of the PPS. The job titles utilized for reporting were aligned with the DOH job title classification for PPSs to ensure standardization across partner types. The PPS received 56 responses from partner organizations, which represent 8 DOH classified partners types and together employ 12,932 employees / 10,228 FTEs. The PPS submitted an inventory of current FTEs by job title in the PPS, which is available in the Workforce Target State Document and was completed to ensure compliance with all regulations.

In the DSRIP application, the PPS anticipated having shifts in the workforce inclusive of new hires (30%), retraining (50%), and redeployment (20%). Based on the implementation of the DSRIP program and clinical projects to date, the PPS now anticipates requiring some new hires, detailed in the below table, across partner organizations and providing training to significant portions of the PPS. The PPS no

longer anticipates any redeployment or reduction in workforce due to the impact of DSRIP as Queens County is appropriately bedded[1] for the population and community needs.

GAP ANALYSIS

Based on the data collected for the current state analysis and implementation of clinical project requirements and part participation, the PPS anticipates the partner network hiring approximately 63 FTEs across job title categories. The anticipated new hires by project and job title are detailed in the below table by job category and impacted clinical project for the PPS.

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[1] See NYP/Q PPS community needs assessment – nyp.org/queens/dsrippps

	Anticipated New Hires	PCMH 2.a.ii	Care Trans. 2.b.v	INTERACT 2.b.vii	Hosp – Home 2.b.viii	PC/BH 3.a.i	Cardio 3.b.i	Asthma 3.d.ii	Palliative 3.g.ii	HIV 4.c.ii
Administrative Staff	**3**									
Executive Staff	2	✓	✓	✓	✓	✓	✓	✓	✓	✓
Financial	0									
Human Resources	0									
Other	1	✓	✓	✓	✓	✓	✓	✓	✓	✓
Administrative Support	**6**									
Coders/Billers	0									
Dietary/Food Service	0									
Financial Service Representatives	1	✓	✓	✓	✓	✓	✓	✓	✓	✓
Housekeeping	0									
Medical Interpreters	0									
Office Clerks	0									
Other	4	✓	✓	✓	✓	✓	✓	✓	✓	✓
Patient Service Representatives	0									
Secretaries and Administrative Assistants	1	✓	✓	✓	✓	✓	✓	✓	✓	✓
Transportation	0									
Allied Health	**0**									
Nutritionists/Dieticians	0									
Occupational Therapists	0									
Occupational Therapy Assistants/Aides	0									
Other	0									
Pharmacists	0									
Pharmacy Technicians	0									
Physical Therapists	0									
Physical Therapy Assistants/Aides	0									
Respiratory Therapists	0									

Impacted Projects

	Anticipated New Hires	PCMH 2.a.ii	Care Trans. 2.b.v	INTERACT 2.b.vii	Hosp – Home 2.b.viii	PC/BH 3.a.i	Cardio 3.b.i	Asthma 3.d.ii	Palliative 3.g.ii	HIV 4.c.ii
					Impacted Projects					
Speech Language Pathologists	0									
Behavioral Health	**1**									
Licensed Clinical Social Workers	1					✓				
Other	0									
Other Mental Health/Substance Abuse Titles Requiring Certification	0									
Psychiatric Aides/Techs	0									
Psychiatric Nurse Practitioners	0									
Psychiatrists	0									
Psychologists	0									
Social and Human Service Assistants	0									
Substance Abuse and Behavioral Disorder Counselors	0									
Clinical Support	**0**									
Clinical Laboratory Technologists	0									
Medical Assistants	0									
Nurse Aides/Assistants	0									
Other	0									
Patient Care Techs	0									
Emerging Titles	0									
Care Manager/Coordinator	0									
Community Health Worker	0									
Patient or Care Navigator	0									
Peer Support Worker	0									
Health Information Technology	**2**									
Hardware maintenance	0									

	Anticipated New Hires	Impacted Projects								
		PCMH 2.a.ii	**Care Trans.** 2.b.v	**INTERACT** 2.b.vii	**Hosp – Home** 2.b.viii	**PC/BH** 3.a.i	**Cardio** 3.b.i	**Asthma** 3.d.ii	**Palliative** 3.g.ii	**HIV** 4.c.ii
Health Information Technology Managers	0									
Other	2	✓	✓	✓	✓	✓	✓	✓	✓	✓
Software Programmers	0									
Technical Support	0									
Home Health Care	**0**									
Certified Home Health Aides	0									
Other	0									
Personal Care Aides	0									
Janitors and cleaners	**0**									
Janitors and cleaners	0									
Midwifery	**0**									
Midwives	0									
Nurse Practitioners	**10**									
Other Specialties (Except Psychiatric NPs)	10	✓				✓	✓		✓	
Primary Care	0									
Nursing	**0**									
LPNs	0									
Nurse Managers/Supervisors	0									
Other	0									
Other Registered Nurses	0									
Staff Registered Nurses	0									
Nursing Care Managers / Coordinators / Navigators / Coaches	**1**									
LPN Care Coordinators / Case Managers	0									
RN Care Coordinators / Case Managers / Care Transitions	1	✓	✓		✓					
Patient Education	**6**									

	Anticipated New Hires	Impacted Projects								
		PCMH 2.a.ii	Care Trans. 2.b.v	INTERACT 2.b.vii	Hosp - Home 2.b.viii	PC/BH 3.a.i	Cardio 3.b.i	Asthma 3.d.ii	Palliative 3.g.ii	HIV 4.c.ii
Certified Asthma Educators	1							✓		
Certified Diabetes Educators	0									
Health Coach	0									
Health Educators	0									
Other	5	✓	✓			✓	✓	✓	✓	✓
Physician Assistants	**0**									
Other Specialties	0									
Primary Care	0									
Physicians	**3**									
Other Specialties (Except Psychiatrists)	0									
Primary Care Physician	3	✓				✓	✓			
Social Worker Case Management / Care Management	**11**									
Bachelor's Social Workers	0									
Licensed Masters Social Workers	1	✓				✓				
Other	0									
Social Worker Care Coordinators/Case Managers/Care Transitions	10					✓				
Emerging Job Titles	**20**									
Care Manager/Coordinator	14	✓								
Patient or Care Navigator	6	✓	✓	✓	✓	✓	✓	✓	✓	✓
Community Health Worker	5	✓	✓	✓	✓	✓	✓	✓	✓	✓
Peer Support Worker	5									✓

The PPS has created a budget to support DSRIP workforce needs based on forecasted revenue and project needs over the 5 years of the program. The majority of the committed workforce budget will be spent on providing training for existing workforce, there is funding set aside to support the recruitment of new hires. The PPS budget includes training as well as recruitment for PMO and project positions associated with the cost of implementation while partners will maintain internal budgets for on-site positions needed within each clinical setting to meet the milestones of each project. The following is a breakdown of the PPS Workforce Budget:

Funding Type	Total Spend (DY1-DY5)
Retraining	$332,048
Redeployment	$32,078
Recruitment	$153,000
Other	$0

The process of recruitment will be managed locally by the partner organizations who require new or additional FTEs to support the transformational work associated with DSRIP. The NYP/Q PPS will hire staff for the centralized project management office, which will support the entirety of the DSRIP program, including the clinical projects.

TRAINING STRATEGY

In addition to the 63 FTEs that the PPS anticipates needing as New Hires, the PPS will also ensure existing workforce staff are adequately trained to care for patients based on population health needs. The PPS has committed a majority of workforce spend (64%) to training and retraining existing workforce. The PPS has completed a robust training strategy, submitted and approved by DOH / IA during DY2/ Q1, which includes training needs by organizational function, i.e. funds flow, population health, IT, and clinical project, i.e. care transitions, INTERACT, pediatric asthma action plans. The trainings will be offered to the workforce, from both the PPS PMO and partner vendors such as Healthstream and 1199TEF, across partner organizations based on need and DSRIP requirements. Some trainings, such as cultural competency and health literacy, will be embedded into annual training programs for all workforce, while tools like INTERACT will be targeted for appropriate SNF workforce.

The PPS has begun a staggered roll out of trainings based on DSRIP requirement deadlines and partner organization needs. The PPS will continue to roll out programs and support ongoing trainings throughout DSRIP.

Training Inventory	Roll Out Start Date	Frequency	Training Mechanism
Organizational Functions			
DSRIP 101	DY1, Q1	Quarterly	Town Hall & PAC Meetings
Compliance	DY1, Q1	PRN	Town Hall & PAC Meetings, Newsletter
Cultural Competency	DY2, Q2	Annual	Healthstream e-Learning Module, GNYHA Classroom Training
Health Literacy	DY2, Q2	Annual	Healthstream e-Learning Module

Training Inventory	Roll Out Start Date	Frequency	Training Mechanism
IT Systems – RHIO	DY1, Q3	Ongoing	In person meetings with Partner & Healthix RHIO
IT Systems – ACD	DY2, Q4	Ongoing	Webinar & PRN On Site Meetings
IT Systems – Cureatr	DY2, Q2	Ongoing	Email Instructions
IT Systems – eMOLST	DY2, Q4	Once	Classroom training
Clinical Projects			
PCMH	DY1 Q1	Ongoing	Webinar & GNYHA Classroom Training
INTERACT	DY2 Q3	Once	Classroom Training
Million Hearts Campaign	DY2 Q2	Ongoing	Partner Site Visit & Classroom Training
BP Competency	DY2 Q2	Annual	Partner administered
Asthma Action Plans	DY2 Q2	Ongoing	Partner Site Visit
EPEC Palliative Care	DY1, Q4	Bi-Monthly	Classroom Training
HIV Peer Interventions	DY3, Q1	Ongoing	Partner administered

MITIGATION STRATEGIES

The PPS is aware of the challenges associated with recruitment of new hires across the PPS organization. Partners have identified recruitment risks associated with hiring behavioral health providers, bilingual practitioners and administrative staff, and experienced nursing staff. The PPS will work with partners to identify risks to recruitment and provide assistance as needed. The recruitment assistant from the PPS may include recruitment firm assistance, connecting the partner to the 1199TEF job board and identifying existing capabilities in the network for subcontracting or collaboration opportunities.

The PPS will provide a significant amount of funding and attention to training the current workforce. Training for existing employees will include topics that are disease and/or clinical project specific, best practices, cultural competency, care coordination, PCMH physician champion training, and HIT tool training. These trainings will help the current workforce and new additions to the workforce ensure that they are meeting the growing needs of the patient population as the shift in healthcare moves from volume to value based care.

NEXT STEPS

The NYP/Q PPS will utilize this Gap Analysis / Transition Roadmap to continue the implementation of the workforce strategy including recruitment and training. Additionally, the PPS will continue to work with partners on reporting impact to the workforce due to DSRIP, specifically in recruitment, redeployment, and retraining. The PPS will partner with 1199TEF[2] to provide expertise in workforce to the partner organizations and provide access to the 1199TEF job bank. The PPS will continue to work with partners to ensure workforce needs are met and that changes to the forecasted new hire needs can be documented and reported to DOH / IA as needed based on the implementation of the projects and quality measure outcomes.

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[2] At the time of submission, the contract for 1199TEF was pending