

Transition Roadmap

MILLENNIUM COLLABORATIVE CARE

Baseline Report



PREPARED BY WNY R-AHEC SEPTEMBER 2016

Introduction

This Transition Roadmap is being developed as a baseline strategic document to guide the training, retraining, redeployment, and hiring of staff affected by DSRIP with respect to the Millennium Collaborative Care PPS (Millennium) Implementation plan. This document is based on information collected from the organizational application, organizational assessments, project manager interviews, and workforce workgroup meetings.

Upon its completion, this roadmap will reference protocols and procedures developed by the PPS, partner facilities, and key stakeholders and will offer practical guidance to Millennium partner facilities for addressing their training, retraining, redeployment and new hire efforts as the DSRIP initiative rolls out over the next five years and continues to achieve the goal of a reduction of avoidable Emergency Department visits by 25% by 2020.

Attached to this document is the projected timeline for fulfillment of anticipated job titles. It is important to state here that the partners of the Millennium Collaborative Care PPS expect a miniscule number of deployments, and instead, anticipate a greater need for new hires as there is an unreasonably large shortages of qualified professionals in the Western New York region. These shortages include, but are not limited to, Primary Care Physicians, Care Coordinators, MSWs, RNs, Psychologist, and Psychiatrists. New and emerging positions include Outpatient Specialists and Community Health Workers.

Finally, this baseline report includes basic approaches to access information and training. Procedures and protocols are presently being developed by the Workforce Workgroup which included representatives from unions, partner healthcare facilities, CBOs, and other key stakeholders. As they receive approval on their policies, they will be added to this document.

Procedures for obtaining and allocating resources

The first place a facility should look toward for funding any training is to its own budget. In the event that they do not have the resources to fund training, they should reach out to organizations offering grant-funded trainings such as HWRI workshops through WNY Rural AHEC or other such Community-based organizations. Thirdly, a facility should research training grants and scholarships and contact local training/education facilities to ascertain if they offer discounted classes or grants and scholarships. Finally, a facility could inquire of the regional PPS to the availability of training funds or classes which they could employ to meet their objectives.

Providing Training

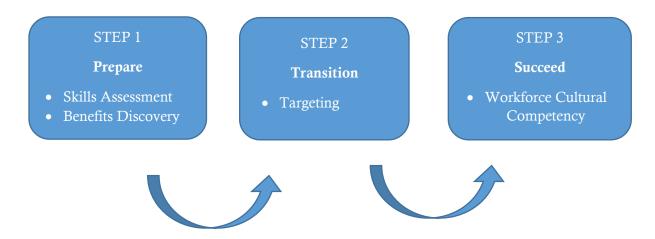
There are a multitude of training facilities in Western New York. The easiest avenue to access this information is through WNY Rural AHEC who keeps a database of training providers/educational institutions and training locations available across the western New York region, many of which are e-learnings. Additionally, the Millennium Collaborative Care PPS is employee an internet-based platform called HWapps which will also allow access to trainings.

Recruiting new staff

There are several avenues for recruiting new staff. Many facilities have an employment page on their website which could be linked to the PPS website as well as HWapps (a workforce platform in use at Millennium). There are also web-based search engines such as Monster, Indeed, Simply Hired, ZipRecruiter, CareerBuilder, etc. and professional networks such as LinkedIn which can be used to networking with healthcare professionals and agencies during the recruitment phase. Additionally, the PPS has plans for holding specialty-specific job fairs over the next five years.

Retraining and Redeploying Staff

Although Millennium Collaborative Care anticipates a less than 1% redeployment rate, it is important for facilities to approach the redeployment of staff in an informed and logical method. Facilities need to identify staff that needs to be redeployed because of reductions in ED services. If the staff member is a union member, they will need to follow appropriate protocols and policies for transition of union members proceeding in compliance and consideration of those guidelines. If the staff member is non-union, the institute will need to develop a facility-specific procedure for retraining and redeploying the staff member to a new position. The unemployment office offers this graphic in consideration of transferring an employee from one position to another.



Reporting Data

Partner facilities are required by MPA contract to report certain data periodically to their PPS. This information will include, but not be limited to, DSRIP workforce spending, compensation and benefit, staffing, employee training, retraining, and redeployment of staff affected by the DSRIP projects. This information will be collected by a third-party provider and any anti-trust data will be secured on a private server at that provider's location. This information may be collected through surveys, emails, and personal interviews.

The following tables are based on project title

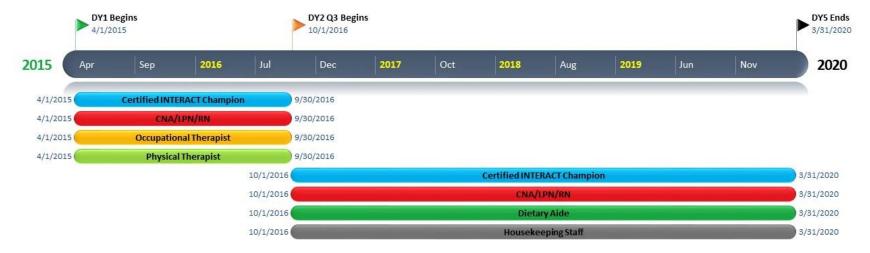
2ai. Integrated Delivery System



2biii. ED Care Triage



2bvii. INTERACT



^{*}While it has been forecasted that the listed job titles will have vacancies during DY3-DY5 among participating facilities, it has been determined that there will be minimal need for redeployment and retraining of any job titles as a result of DSRIP project implementation.

2bviii. Hospital Home Care



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2di. PAM

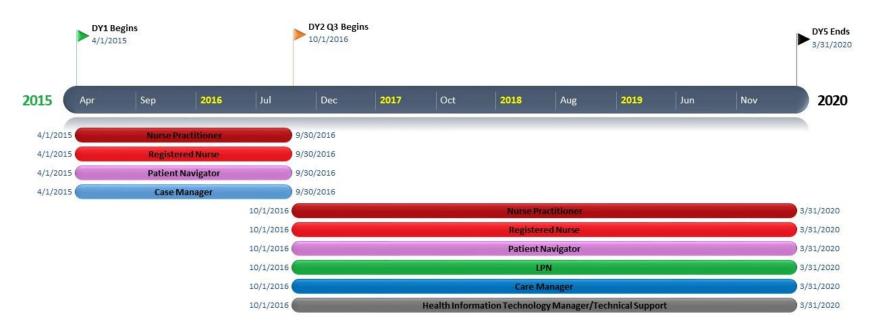


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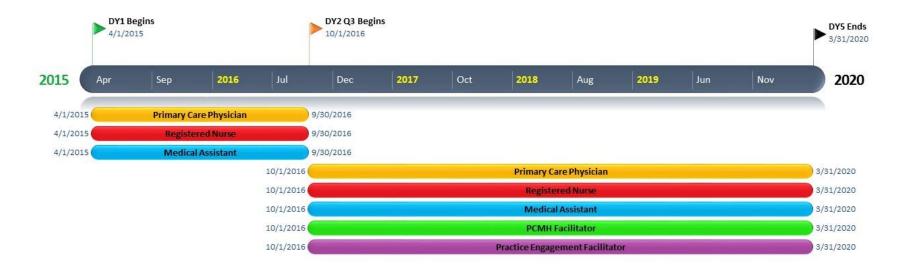
3ai. Behavioral Health Integration



3aii. Crisis Stabilization



3bi. Cardiovascular Disease



3fi. Maternal & Child Health



4ai. Mental, Emotional, Behavioral Well-Being



4di. Reduce Premature Births



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