

Workforce Current State Assessment and Gap Analysis

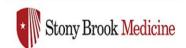


Workforce Current State Assessment and Gap Analysis



Based on findings from the SCC PPS 2015 Workforce Survey







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Executive Summary

The vision of Suffolk Care Collaborative (SCC) Performing Provider Systems (PPS) is to become a highly effective, accountable, integrated, and patient-centric delivery system. To achieve this vision, we are committed to restructuring, educating and equipping our workforce to provide comprehensive care to our targeted population. To achieve this objective, we performed a comprehensive Current State Assessment and Gap Analysis of the human capital within our network.

In 2015, we administered a comprehensive Workforce Survey across all three health systems to assess the incumbent workforce. We compared the survey results to our target workforce state projection model to understand and identify the workforce gaps over the 5-year DSRIP period. The findings have provided us with an understanding of where workforce gaps exist, which gaps represent potential risks to our PPS, what actions need to be taken to close the gaps and therefore mitigate any associated risks.

In collaboration with our health systems and partners, we have already begun designing a gap closing strategy and transition roadmap for each DSRIP project. Our gap closing strategy will essentially become our workforce management plan and will outline practical and actionable strategies that can be implemented over the remaining DSRIP years.

This document serves as the official Current State Assessment Report and Gap Analysis for the SCC PPS. It summarizes our workforce survey results, the evaluation of our current workforce state, and the estimation of gaps between the current workforce and future workforce state.





Suffolk Care Collaborative PPS 2015 Workforce Survey

Methodology

To meet the objectives of the survey and assessment criteria outlined by the NYS DOH, a comprehensive, electronic survey was designed and used for collecting and analyzing the workforce data. Data were collected through a web-based questionnaire that was emailed to partner organizations across each health system. We used two (2) distinct surveys segmenting the following groups of providers:

- 1. Primary Care Practices
- 2. Hospitals, Skilled Nursing Facilities (SNFs), Community Based Organizations, and other provider/facility types

Survey Objectives

The objectives of the SCC Current State Workforce Survey were:

- To determine current workforce supply at the organizational level, and where possible, at the site level for various job categories
- To quantify distinct headcounts and attrition rates of the existing workforce at the position level
- To develop a quantitative model of various job families/job types including Incumbents-Ready Now, Redeploys-Ready Now, Redeploy-Retrains, New Hire & Retrains by Project



Survey Questionnaire

A core group of our PPS staff members, representing all three Hubs, collaborated with our workforce vendor to develop the survey questions. The survey questions were tailored to the two provider groups and were based on the DSRIP projects, the population served, and the workforce positions needed to obtain the desired care management outcomes. The survey questionnaire included six sections: 1) General Information, 2) Training, 3) Cultural Competency / Health Literacy; 4) Health Information Technology; 5) Services Provided; and 6) Workforce.

Survey Administration

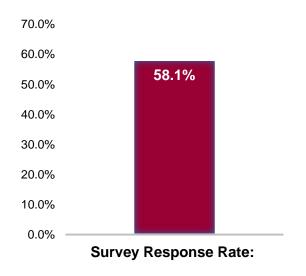
The survey was administered in two waves and the process included: a pre-notification email letter, the main survey mailing (with pre-populated fields for the Primary Care Practices), and a number of reminder emails and phone contacts by the PPS PMO office to partners who did not respond to the initial email or complete the survey.

The graphic on the right highlights the sections and contents included in our Workforce Survey.

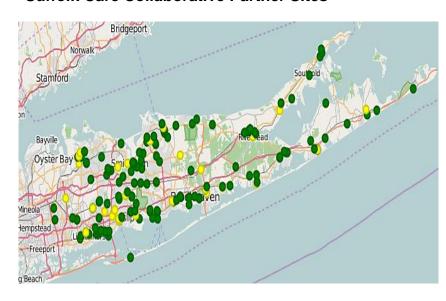
Suffolk Care collaborative						
SCC DSRIP WORKFORCE SURVEY CHECKLIST						
General Information:						
 □ Physical Site/Service Location name and address □ Organization official name and location □ Cities (also known as hamlets and villages) where services are provided □ Hours of service □ Quality Improvement Process □ Facility types and services provided □ Patient Population Served 						
Training:						
 □ Types of internal employee training provided □ External training available at your organization 						
Cultural Competency / Health Literacy:						
□ Strengths and Challenges □ Populations Served □ CC/HL Activities						
Health Information Technology:						
☐ Electronic Health Record (EHR) ☐ Meaningful Use ☐ Regional Health Information Organization (RHIO)						
Services Provided:						
☐ Service Location Classification ☐ Service Provided by Site						
Workforce:						
□ NYS DOH Workforce Job Categories (Only complete for positions that are applicable to your site or organization)						
Administrative Staff						
□ Total number of employees (FT, PT, Hourly, Contractor) □ Number of employees receiving benefits (FT, PT, Hourly, Contractor) □ Number of Expected Retirements (FT, PT, Hourly, Contractor) □ Number of Separations/Terminations (FT, PT, Hourly, Contractor) □ Number of New Hires (FT, PT, Hourly, Contractor) 7						

Response Rate

We administered a web-based workforce survey to Primary Care Practices on November 1, 2015 and to all other Partners on November 16, 2015. In total, we sent surveys to 267 network partners. The survey was released with an explanatory email, checklist and glossary. Workforce Surveys were accepted through late February 2016 and our partners were provided with technical assistance, as needed. The survey resulted in a total of 155 responses, which included partially completed surveys. An overall response rate of **58.1%** was achieved (155/267).



Suffolk Care Collaborative Partner Sites





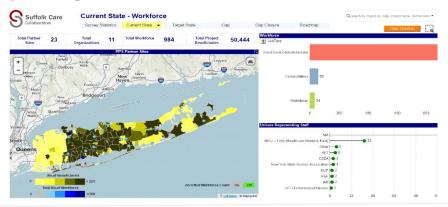
The response rate is a metric of surveys distributed and received and not a measure of completeness or accuracy of the survey data. The map above provides a geographical display of the surveys received with and without responses to all of the survey questions.

The data collected through our workforce survey is housed in our workforce vendor's Data Analytics Workspace; a protected, web-based tool, which allows querying and filtering of the data to perform standard what-if analyses.

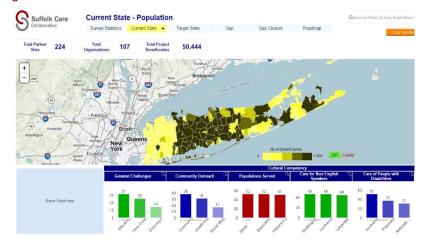
The KPMG Workforce portal **houses**, **analyzes** and **visualizes** our data for strategy, planning and reporting



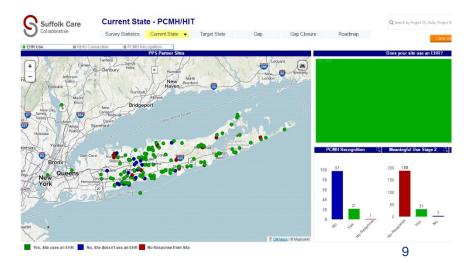
Current state survey findings can be viewed & analyzed for specific **partner organizations**



Facility types, services provided and PCMH status by partner organizations



Job families, types, and functions; and union affiliation



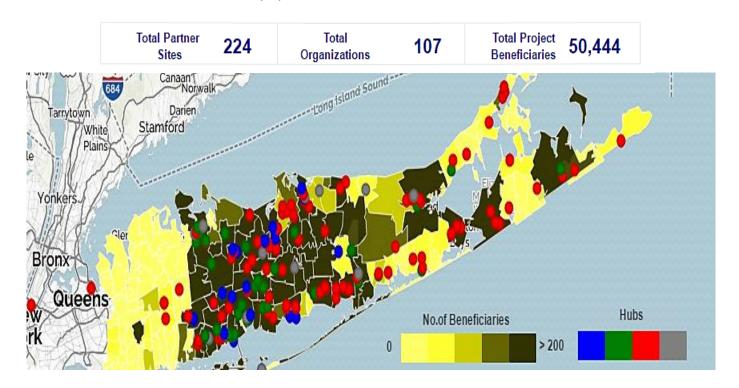


Suffolk Care Collaborative PPS Workforce Current State

Workforce (Organization Data)

Physical Sites & Service Locations

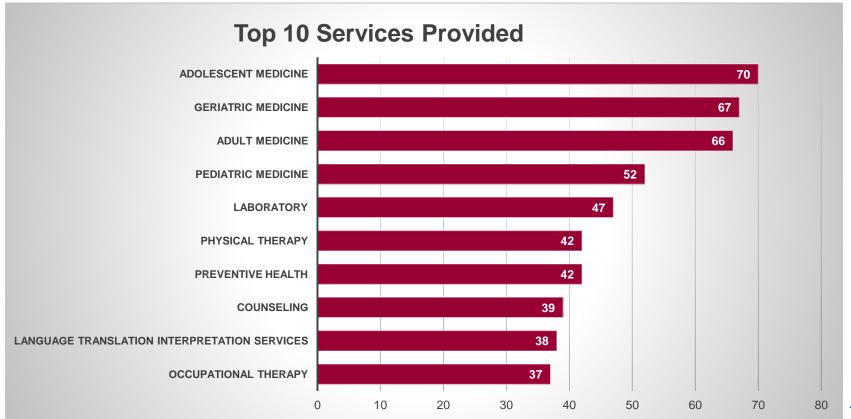
Our Community Needs Assessment (CNA) used geographic information to identify particular population-based health issues. To align our workforce planning model with the needs of our targeted population, we gathered general information about our partner organizations and their service sites in our workforce survey. Survey respondents were asked to provide information regarding their Physical Site/Service Location and the Cities in which their services are provided. We used this information to strategically determine the areas within our region with the greatest workforce needs based on the location of our attributed population.



Workforce (Organization Data)

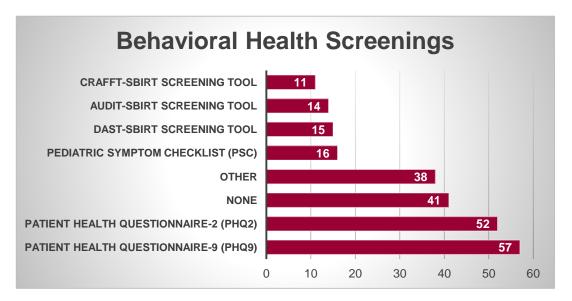
Services Provided

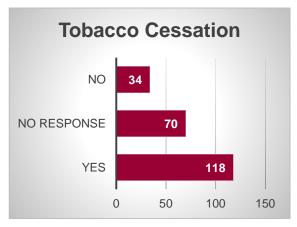
In addition to our geospatial data analysis, we also assessed the type of services provided by our network partners. Understanding the provision of services by partner within key geographical areas enabled us to identify where we had the greatest workforce needs based on the requirements of our DSRIP projects. The top 10 Services reported in the survey align with our three projects estimated to have the highest workforce needs. (i.e. INTERACT, Cardiovascular Disease Management and Integration of Primary Care & Behavioral Health)

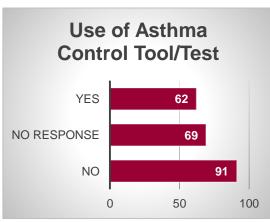


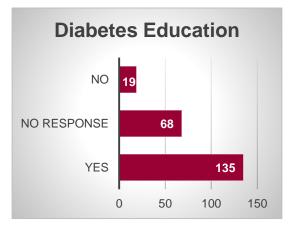
Workforce (Organization Data)

Our Workforce Survey included questions related to the other services and screenings that are required offerings in several of our DSRIP projects.





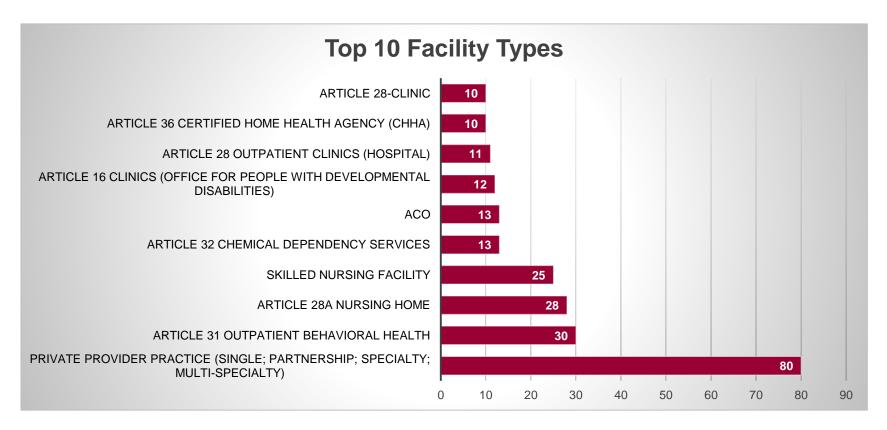




Workforce (Organization Data)

Facility Types

As the healthcare landscape is transformed through DSRIP, the impact on workforce positions will vary by facility type. Our Workforce Survey respondents were asked to provide a facility designation for their organization and/or service site. The survey allowed respondents to select all applicable designations. Information regarding facility types was a key variable in determining future workforce needs.



Workforce (Position Data)

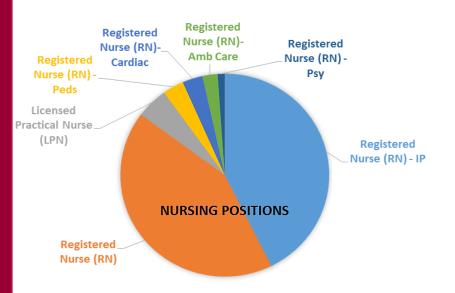
Incumbent Positions

In our Workforce Survey respondents were able to self-report current headcounts for positions within each of the DOH job categories. The total headcount for the reported incumbent workforce positions was 22,642. The chart below displays the job categories with the largest headcounts. (Nursing 43.2%, Clinical Support 31%, 10%)

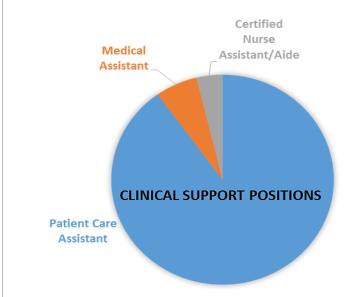


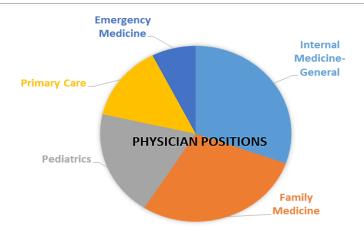
Workforce (Position Data)

Breakout of the positions reported within the Nursing category

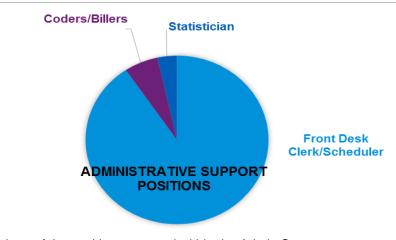


Breakout of the positions reported within the Clinical Support category









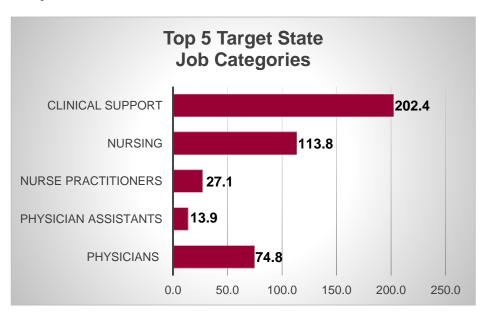
Breakout of the positions reported within the Admin Support category



Suffolk Care Collaborative PPS Target Workforce State

Target Workforce State

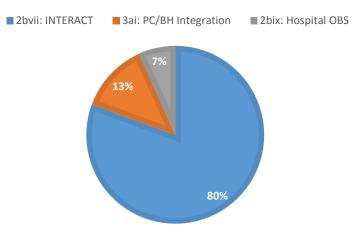
Projected Future Demand



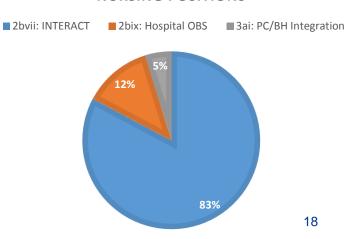
Our PPS staff, Hubs and network partners worked collaboratively to define the target workforce state, including the types of positions, qualifications, skills and competencies needed to meet the DSRIP goals both now and in the future.

Our target state model identified a total of 677.35 positions needed for DSRIP. The chart on the left displays the job categories with the highest projected demand. Clinical Support positions account for 29.8% and Nursing positions account for 16.8% of the target state projections. The pie charts below reveal the projects with the highest demand for positions in the clinical support and nursing categories.

PROJECTS WITH HIGHEST DEMAND FOR CLINICAL SUPPORT POSITIONS



PROJECTS WITH HIGHEST DEMAND FOR NURSING POSITIONS



Target Workforce State

Target State Projections

The tables below outline the total number of projected target state positions across each DOH job category and a breakout of the positions within the top 5 job categories.

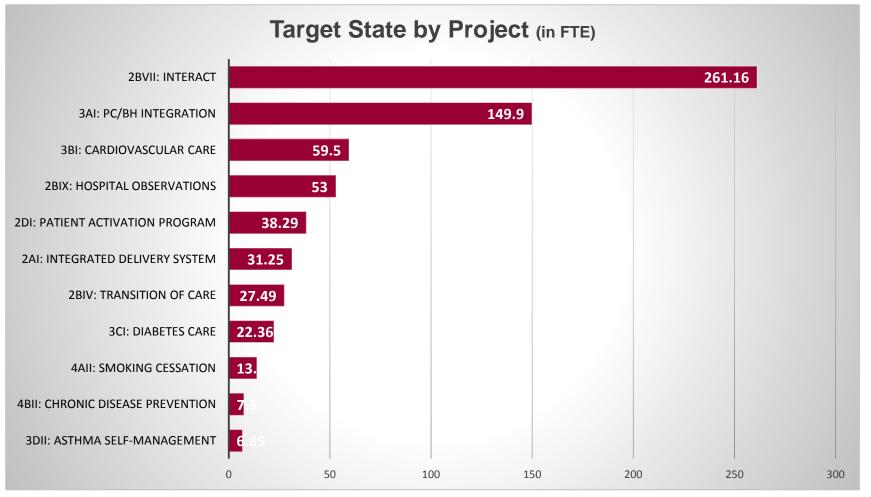
DOH Job Category	PPS Target State (in FTE)
Physicians	74.22
Physician Assistants	13.90
Nurse Practitioners	27.14
Nursing	116.28
Clinical Support	202.44
Non-licensed Care Coordination / Case Mgmt / Care Mgmt / Patient Navigators / Community Health Workers*	65.48
Behavioral Health	37.50
Social Worker Case Management / Care Management	14.70
Nursing Care Managers/ Coordinators / Navigators / Coaches	23.70
Patient Education	7.15
Administrative Staff	24.77
Administrative Support	37.96
Health Information Technology	14.90
Home Health Care	0.00
Other Allied Health	0.00
Midwives	0.00
Janitors & Cleaners	0.00
	660.15

DOH Job Category	Job Type/Job Title	DSRIP Project #	PPS Target State (in FTE)	
	Hospitalist / Internal Medicine - General	2.b.ix	2.44	
Physicians	Primary Care	3.a.i, 3.b.i, 4.b.ii	55.08	
Priysicialis	Primary Care Consultant to BH	3.a.i	0.90	
	Cardiologist	3.b.i	15.80	
Physician Assistants	Primary Care	3.a.i, 3.b.i	13.90	
Nurse Practitioners	Primary Care Nurse Practitioner	2.b.ix, 3.a.i, 3.b.i	27.14	
	Staff Nurse (RN) / including SNF	2.b.vii, 2.b.ix, 3.a.i	49.42	
Nursing	Staff Nurse (LPN) / including SNF	2.b.vii, 2.b.ix	64.11	
	Pulmonary Care / Respiratory Nurse Educator	3.d.ii	2.75	
Clinical Commant	Medical Assistant	2.b.vii, 3.a.i	25.82	
Clinical Support	Nurse Aide / Assistant / Patient Care Assistant	2.b.vii, 2.b.ix	176.62	
			433.99	

Target Workforce State

Staffing-by-Project (Estimated Demand)

The chart below provides the total number of projected target state positions for each of the SCC DSRIP project. Project 2biv – INTERACT is estimated to need 39.6% of the target state positions, while project 3dii – Asthma Self-Management is estimated to need approximately 1%.



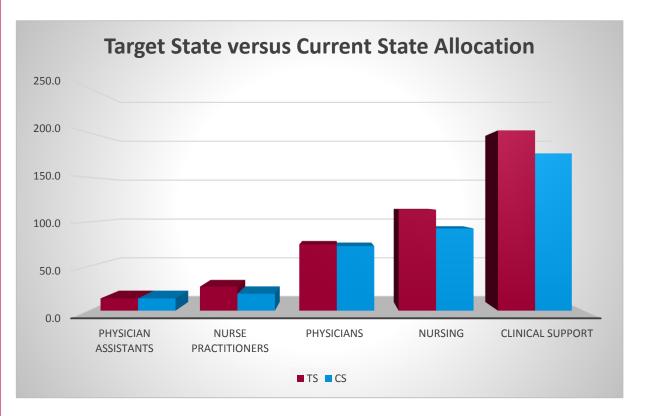


Suffolk Care Collaborative PPS Workforce Gap Analysis

Workforce Gap Analysis

Quantitative Gaps (Demand versus Supply)

To accurately analyze the workforce numerical gap, we collected data from each Hub regarding the actual current state allocation to each project. This information provided a more finite number than the total headcounts provided in the workforce survey. A comparison of our target state projections and current state allocated supply yielded a quantitative gap of **91.91**. The chart below shows the differences in the current allocated supply versus the future demand for the top 5 workforce job categories:



PPS Workforce Totals

Target State Projection: 660.15

Current State Allocation: 568.24

Numerical Gap: 91.91

Workforce Gap Analysis

Qualitative Gaps (Workforce Skills)

Our current state workforce assessment revealed both qualitative, as well as quantitative gaps. Qualitative gaps were identified by analyzing the skills and competencies currently possessed across workforce within the Suffolk Care Collaborative and those needed in the future state to support the DSRIP projects. Qualitative gaps were evaluated using the five focus areas outlined below:

We evaluated the skills and competency gaps for each project across our 5 focus areas. The pie chart below outlines the identified qualitative gaps. SCC's Training Strategy addresses each of the skills gaps and curriculum has been developed for each project training module to close the gaps.

Clinical Care The training and skills needed to provide highquality, coordinated care specific to the patient's clinical needs and circumstances.

Technology

The knowledge & ability to utilize new technology systems, such as EHRs and Care Management Systems in the delivery of DSRIP services.

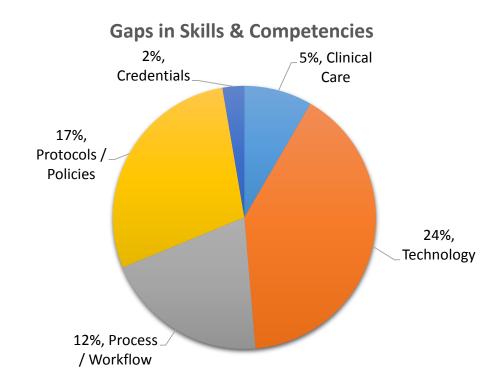
Process / Workflow The knowledge and understanding of new and/or updated processes and clinical workflows related to the DSRIP projects.

Protocol / Policies

The knowledge and understanding of new and/or updated evidenced-based guidelines and standards of care policies based on the care delivery models

Credentials

A license, certification, qualification and/or achievement required for specific DSRIP projects





Suffolk Care Collaborative PPS Attrition & Turnover

Workforce Attrition & Turnover

Outlook on Workforce Reductions

Attrition is an important factor to consider when determining workforce needs throughout DSRIP. The inclusion of attrition in the Gap Analysis will allow the PPS to better understand and anticipate workforce changes throughout DSRIP years. These anticipated changes will help inform the possible need for new hires, redeployment of staff and/or additional trainings.

Anticipated attrition is the number of expected retirements and separations divided by the average anticipated workforce throughout DSRIP. The workforce survey not only collected currently available workforce in a variety of job types at partnering organizations, but also collected anticipated workforce changes through out the DSRIP years, such as new hires, retirements and other separations.

Based upon our workforce survey data results:

- Mean Attrition across all job families throughout DSRIP is anticipated to be 21.2%
- HIT has the highest anticipated attrition of all job families, followed by administrative support, and allied health





Suffolk Care Collaborative PPS Appendix

The tables on the following pages provide the detailed workforce projections for our target state, current state project allocation and numerical gap.

DOH Job Category	Job Type/Job Title	DSRIP Project #	PPS Target State (in FTE)	Project Allocation (in FTE)	Gap (in FTE)
	Hospitalist / Internal Medicine - General	2.b.ix	2.44	2.00	0.44
Physicians	Primary Care	3.a.i, 3.b.i, 4.b.ii	55.08	55.08	0.00
riiysicialis	Primary Care Consultant to BH	3.a.i	0.90	0.55	0.35
	Cardiologist	3.b.i	15.80	17.10	-1.30
Physician Assistants	Primary Care	3.a.i, 3.b.i	13.90	13.90	0.00
Nurse Practitioners	Primary Care Nurse Practitioner	2.b.ix, 3.a.i, 3.b.i	27.14	15.49	11.66
	Staff Nurse (RN) / including SNF	2.b.vii, 2.b.ix, 3.a.i	49.42	38.76	10.66
Nursing	Staff Nurse (LPN) / including SNF	2.b.vii, 2.b.ix	64.11	64.11	0.00
	Pulmonary Care / Respiratory Nurse Educator	3.d.ii	2.75	2.75	0.00
	Medical Assistant	2.b.vii, 3.a.i	25.82	19.82	6.00
Clinical Support	Nurse Aide / Assistant / Patient Care Assistant	2.b.vii, 2.b.ix	176.62	165.96	10.66
Nursing Care Managers/ Coordinators / Navigators / Coaches	RN Care Manager / Case Manager	2.a.i, 2.b.iv, 2.b.ix, 3.b.i	23.70	21.00	2.70

DOH Job Category	Job Type/Job Title	DSRIP Project #	PPS Target State (in FTE)	Project Allocation (in FTE)	Gap (in FTE)
	Community Health Associate / Resource Manager	2.a.i, 2.b.iv	12.00	8.00	4.00
	Care Coordinator / Implementation Specialist	3.c.i	7.00	3.00	4.00
Non-licensed Care Coordination / Case Mgmt / Care Mgmt /	Depression Care Manager (Only IMPACT)	3.a.i	4.00	0.00	4.00
Community Health Workers*	Outreach Worker (Community and Inpatient)	2.d.i	30.00	11.50	18.50
(Except RNs, LPNs, and Social Workers)	Wellness Coach	2.d.i	5.50	0.50	5.00
	Community Health Worker / Care Coordinator	3.a.i, 3.d.ii	5.00	10.00	-5.00
	Outreach Supervisor	2.d.i	1.98	0.66	1.32
	Psychiatrist	3.a.i	9.00	6.50	1.32 2.50
	Psychiatric Nurse Practitioner	3.a.i	10.00	2.00	8.00
Behavioral Health (Except Social Workers providing	Behavioral Health Specialist	3.a.i	2.50	1.50	4.00 4.00 4.00 18.50 5.00 -5.00 1.32 2.50
Case/Care Management, etc.)	SBIRT Implementation Specialist (Dual role with Health Coach/Addictions Counselor)	4.a.ii	10.00	7.00	3.00
	Health Coach / Addictions Counselor	4.a.ii, 4.b.ii	6.00	3.00	3.00
Social Worker Case Management / Care Management	Social Worker Case Manager	2.a.i, 2.b.iv, 2.b.ix	14.70	16.00	-1.30

DOH Job Category	Job Type/Job Title	DSRIP Project #	PPS Target State (in FTE)	Project Allocation (in FTE)	Gap (in FTE)
	Medical Director (SNFs)	2.b.vii	1.44	3.83	-2.39
	Director of Nursing (SNFs)	2.b.vii	1.72	4.45	-2.74
	Facility Champion	4.a.ii	0.76	0.16	0.60
	Medical Director	2.a.i	0.25	0.25	0.00
	Administrative Lead	2.d.i	0.09	0.07	0.02
	Project Lead	2.a.i, 2.b.iv, 2.b.vii, 2.b.ix, 2.d.i, 3.a.i, 3.b.i, 3.c.i, 3.d.ii, 4.a.ii, 4.b.ii	1.45	5.80	-4.35
	Project Manager (Project Educator: Added by NWH on 7/15/16)	2.a.i, 2.b.iv, 2.b.vii, 2.b.ix, 2.d.i, 3.a.i, 3.b.i, 3.c.i, 3.d.ii, 4.a.ii, 4.b.ii	10.73	11.01	-0.28
Administrative Staff	Program Coordinator (CHW Supervisor)	3.d.ii	1.00	1.00	0.00
Starr	Implementation Specialist	3.a.i, 3.b.i	2.00	3.00	-1.00
	IDS Project Co-Lead	2.a.i	0.04	0.04	0.00
	IDS Project Manager	2.a.i	0.50	0.50	0.00
	TOC Project Manager	2.a.i	0.50	0.50	0.00
	PCMH Project Manager	2.a.i	1.50	1.50	0.00
	Director of Care Management	2.a.i	1.30	1.30	0.00
	Value Based Payment Project Manager	2.a.i	0.25	0.25	0.00
	Community Engagement Project Manager	2.a.i	0.50	0.50	0.00
	Community Health Activation Program Manager	2.a.i	0.50	0.50	0.00
	Network Performance & Workforce Director	2.a.i	0.25	0.25	0.00

DOH Job Category	Job Type/Job Title	DSRIP Project #	PPS Target State (in FTE)	Project Allocation (in FTE)	Gap (in FTE)
Administrative Support	Care Management Associate	2.a.i	1.00	1.00	0.00
Administrative Support	Office Clerk / Data Entry Clerk	3.a.i	36.96	30.96	6.00
	IT Project Lead	2.a.i	1.40	1.40	0.00
	HIPAA / Security	2.a.i	1.40	1.40	0.00
	Chief Technology Office	2.a.i	0.10	0.10	0.00
Health Information Technology	Director of Patient Engagement	2.a.i	0.20	0.20	0.00
	IT Staff	2.a.i	1.30	1.30	0.00
	IT Project Manager	2.a.i	1.50	1.50	0.00
	HIT Specialist / Analyst	2.a.i	9.00	6.00	3.00
Home Health Care			0.00	0.00	0.00
Other Allied Health			0.00	0.00	0.00
Midwives	Midwives		0.00	0.00	0.00
Janitors & Cleaners	Janitors & Cleaners		0.00	0.00	0.00
			660.15	568.24	91.91