



# Performing Provider System (PPS)

Westchester Medical Center Health Network

## Workforce Current State Assessment and Gap Analysis

Based on the CRHI PPS 2015 Workforce Survey

*Analysis & Report Prepared by KPMG, LLP*

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The Center for Regional Healthcare Innovation (CRHI) is the WMCHHealth Network's project management organization that will work collaboratively across the PPS to deliver on the goals set out for each clinical project we have selected. As a Performing Provider Systems (PPS) for the New York State's Delivery System Reform Incentive Payment (DSRIP) program our objective is to improve the long-term health and wellness of Medicaid and uninsured populations in the Hudson Valley. To achieve this objective, we are committed to restructuring, educating and equipping our workforce to provide comprehensive care to our targeted population.

In the fall of 2015, we distributed a comprehensive Workforce Survey to our network partners to assess the incumbent workforce. The workforce survey results provided the baseline data needed to perform a comprehensive Current State Assessment and Gap Analysis of our PPS's human capital. 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, and what actions need to be taken to close workforce gaps and mitigate any associated risks.



This document serves as the official Current State Assessment Report and Gap Analysis for WMC CRHI PPS. It summarizes the workforce survey results, the assessment of the workforce current state, and the estimation of gaps between the incumbent positions and target state model (previously provided).

The data analyses included in this report are based upon information that is currently available regarding our workforce and partner staffing contributions. However, three of our clinical projects are still in development and others are not fully implemented. We are also still finalizing contract negotiations with our partners. Consequently, we highly anticipate the need to submit a revised target state model and adjust our calculated workforce gaps in the near future.

The WMCHHealth PPS Workforce Committee (Workforce Governance Body) approved the Current State Assessment Report and Gap Analysis (Milestone 3) on October 25, 2016 during the monthly meeting.

# **Overview of 2015 Workforce Survey**

## Survey Objectives

The Center for Regional Healthcare Innovation (CRHI) Performing Provider System (PPS) administered a Workforce Survey to generate information on the supply of healthcare professionals within our network. The survey was a key component in planning for future state of our workforce under the Delivery System Reform Incentive Payment Program (DSRIP) Initiative. In addition to providing a portrait of the current state of the PPS workforce, the data from this survey facilitated the following:

- Evaluation of current workforce supply at the organizational level, and where possible, at the site level for various job categories.
- Assessment of workforce needs. The survey data was compared with data from the Community Needs Assessment (CNA) to identify areas with the highest service needs.
- Partner-level analysis. Each partner organization will be provided their survey results with which to conduct their own analyses.
- Further research. The workforce survey generated a broad data set from which to conduct important sub-studies or analyses.

## Survey Administration

We distributed a comprehensive, electronic Workforce Survey to our network partners. We held webinars to provide our partners with an overview of the survey requirements and instructions. A pre-notification email letter and preparatory checklist were disseminated to respondents, in addition to reminder emails during the completion timeframe. We distributed a comprehensive, electronic Workforce survey to our network. We held three webinars to engage our key partners in three separate releases. The survey was distributed to partner organizations representing the following facility types:

- Outpatient Behavioral Health
- Diagnostic & Treatment Centers
- Article 16 Clinics (OPWDD)
- Home Care Agencies
- Hospital (Article 28)
- Inpatient
- Non-Licensed CBO's
- Nursing Home / SNF
- Private Provider Practice







# 2015 WORKFORCE SURVEY: OVERVIEW

## Survey Questionnaire

Our PPS PMO staff and Workforce Committee members, collaborated with our workforce vendor to develop the survey questions. The survey questions were applicable to multiple provider groups and were based on the Delivery System Reform Incentive Payment Program (DSRIP) requirements, the populations to be served, and the workforce positions needed to deliver the services within each of our projects. The survey questionnaire included the following ten sections:

- 1) General Information
- 2) Facility Service Detail
- 3) Workforce & Training
- 4) Primary Care Delivery
- 5) Home Health & Care Coordination Workforce
- 6) Overall Clinical Workforce
- 7) Behavioral Health Workforce
- 8) Administrative Workforce
- 9) Allied Health Workforce
- 10) Overall Workforce

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

The results of the Workforce Survey served as the basis for our **Current State Workforce Assessment**. The detailed findings from the survey have been summarized in the next section of this report.

**CRHI DSRIP WORKFORCE SURVEY**

**WORKFORCE SURVEY CHECKLIST**

General Information: *(please note only applicable questions will require completion)*

- Organization official name and location
- National Provider Identification Number (NPI)
- Counties where services are provided
- Hours of service
- Organizations facility types and services provided
- National Committee for Quality Assurance (NCQA) Patient Centered Medical Home (PCMH) Level, or Advanced Primary Care Model designation

Facility Service Detail

- Total number of unique patients served *annually*
- Percentage of yearly patients that are Medicaid recipients or uninsured
- Average number of patient/client encounters *per week*
- Organizational use of the Patient Activation Measure instrument
- Organizational use of the Stanford Chronic Disease Self-Management Program

Workforce and training

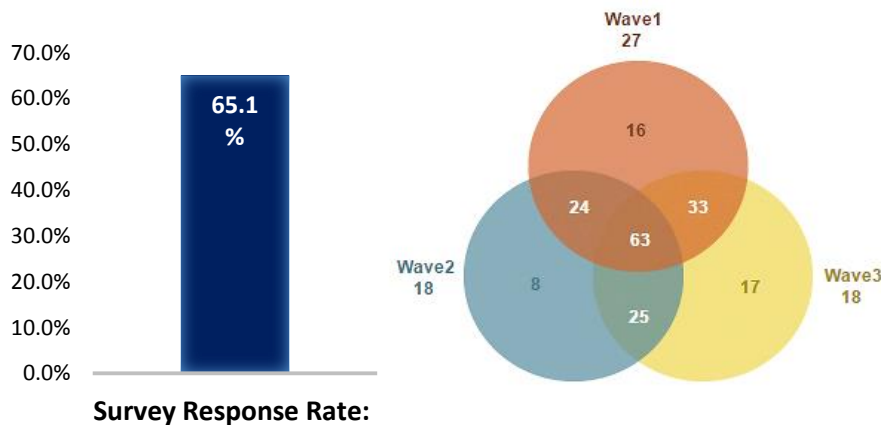
- Total number of employees at your organization
- Percentage of employees with professional credentials
- Percentage of full-time, part-time and hourly employees receiving benefits
- Percentage of full-time, part-time and hourly employees not receiving benefits
- Types of internal employee training provided
- Modes for external training available at your organization, and provider organization

Primary Care Delivery in an Ambulatory Setting

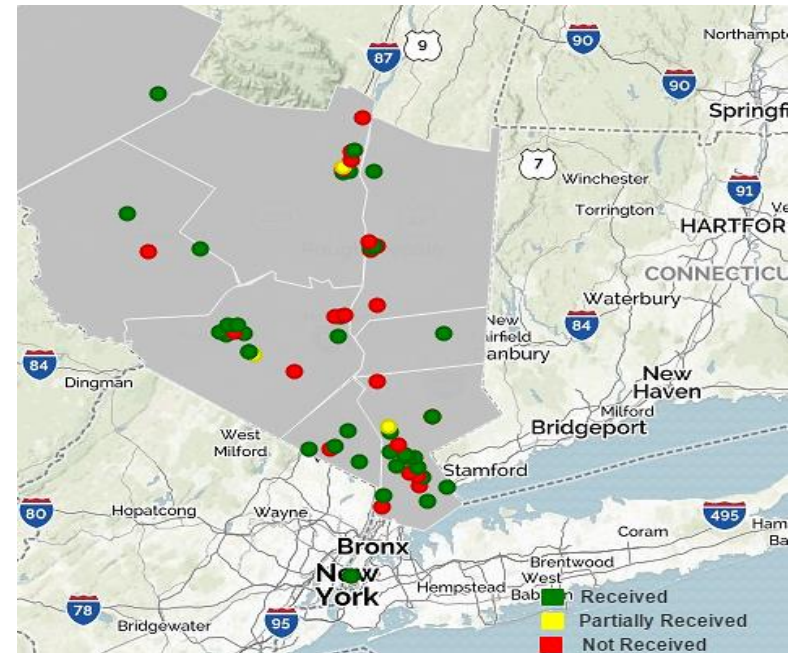
- Types of primary care provided in an ambulatory setting
- Types and total number of clinicians (MD, DO, PA, NP, RN, LVN) in your organization
- Types of board certification held by physicians (MD, DO)
- Average number of Primary Care - Ambulatory Care encounters per week for each clinician classification (MD, DO, PA, NP, RN, LVN)
- Percentage of Safety Net Patients receiving Primary Care - Ambulatory Care
- Average Primary Care - Ambulatory Care encounters per week for Certified Medical Assistants

## Response Rate

We administered a web-based workforce survey in three separate distributions beginning on September 9, 2015 to 63 network partners. The survey was released with an explanatory email, checklist and glossary. Our partners were provided with technical assistance, as needed, and sent up to four reminder emails. The survey resulted in a total of 41 responses, which included partially completed surveys. An overall response rate of **65.1%** was achieved (**41/63**). The graphs below depict the survey response rates overall and for each distinct distribution.



## Center for Regional Healthcare Innovation (CRHI) PPS Collaborative Partner Organizations and 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.

## Data & Analytics Visualization Workspace

The data collected through our workforce survey is housed in our workforce vendor's Data Analytics Workspace. The workspace is a protected, online tool with a database containing all of the data collected through the workforce surveys. The data is accessed through a series of web pages which provide visual charts and maps to enable the user to interact with the data and navigate through the workforce, the population and the organizations who have responded to the survey. The list below summarizes the 5 pages which are the access points into the data.

## WMCHealth Center for Regional Healthcare Innovation (CRHI) PPS - Home Page Selections

### Description of Workspace Web Pages

01	Survey Statistics	This page displays the survey completion rate as well as the location of each PPS partner that participated in the workforce survey
02	Current State	This page displays the aggregated data through the Current State Survey <ul style="list-style-type: none"> <li>➤ Organization</li> <li>➤ Workforce</li> <li>➤ Population</li> </ul>
03	Target State	This page provides the Staffing-by-Project Projections, including specific job families and job types
04	Gap Analysis	This page provides quantitative gap data for each project and job type
05	Transition Roadmap	This page displays the new hire, redeployment, retraining and training data from each PPS partner with timeframes for gap closure

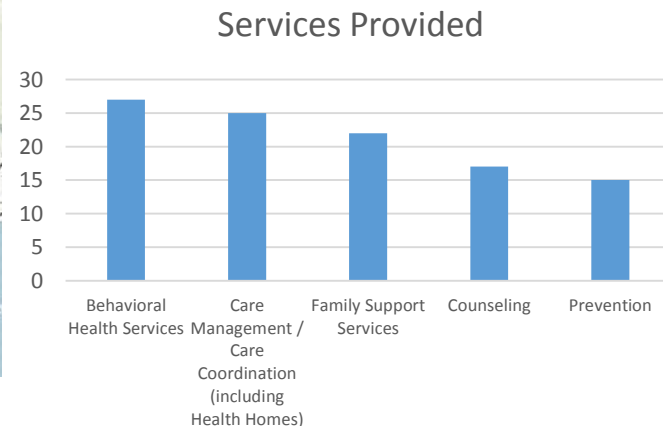
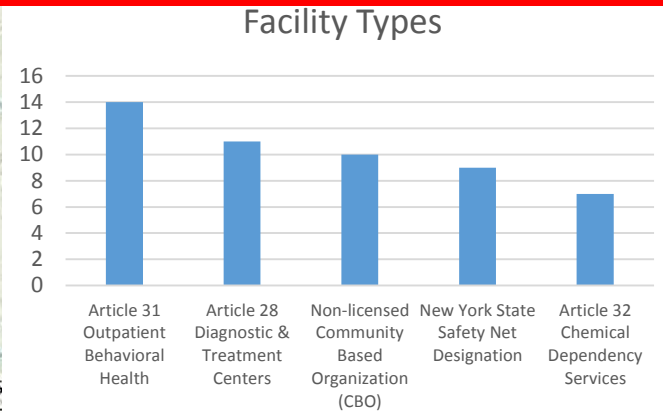
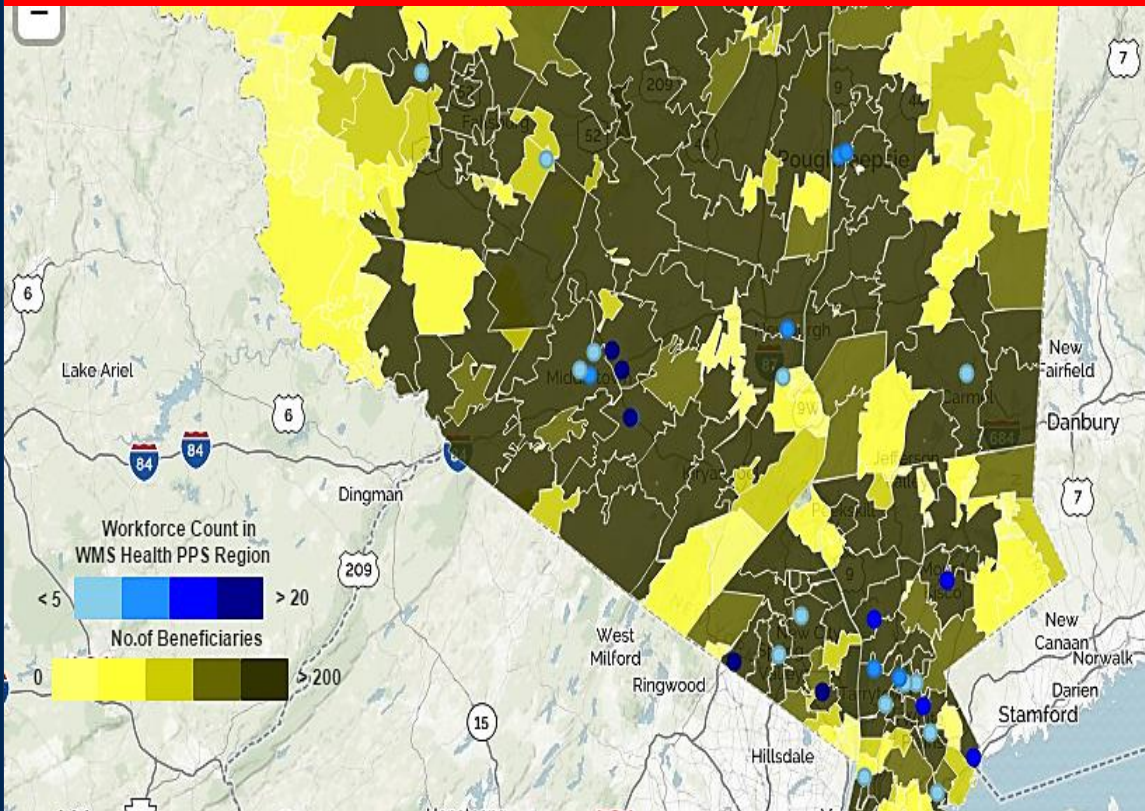


## Screen Shot of the WMCHealth (CRHI) PPS Visualization Workspace

The image below is a sample page of the workforce survey data from the Data Analytics Workspace. Key data elements and findings from the survey are included in the Survey Results section of this report.

**THIS IS A SCREENSHOT ONLY**

**A Live Demo of the Workspace Will Be Provided**



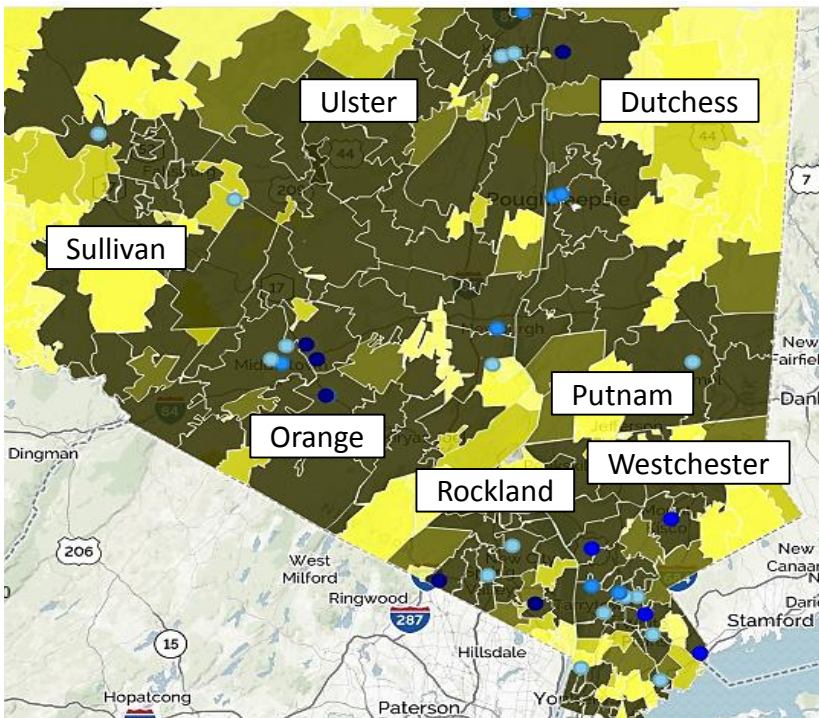
# **Workforce Current State Survey Results**

## General Information

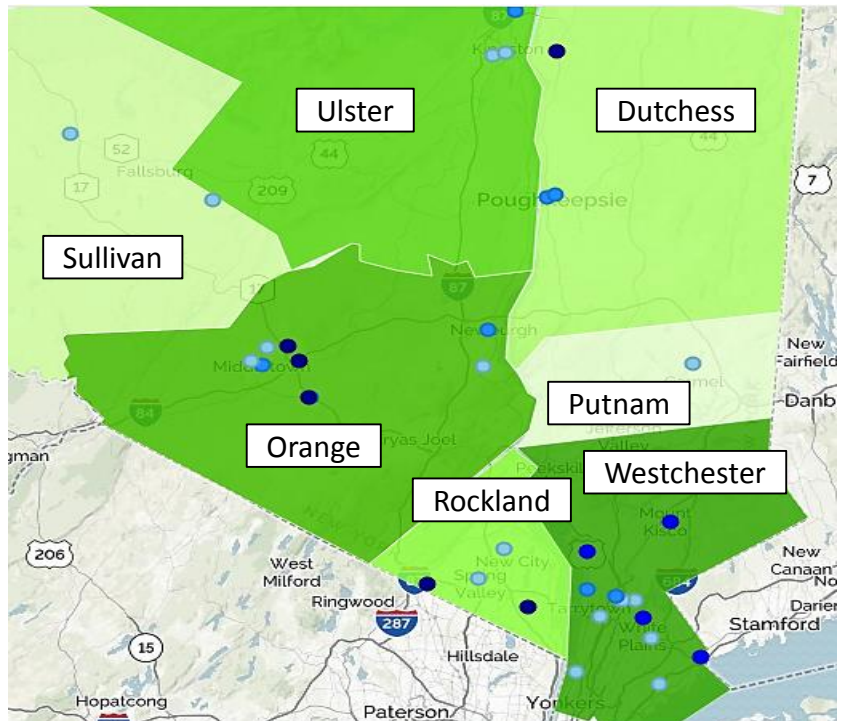
### Physical Sites & Service Locations

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.

Responding Partners by Zip Code



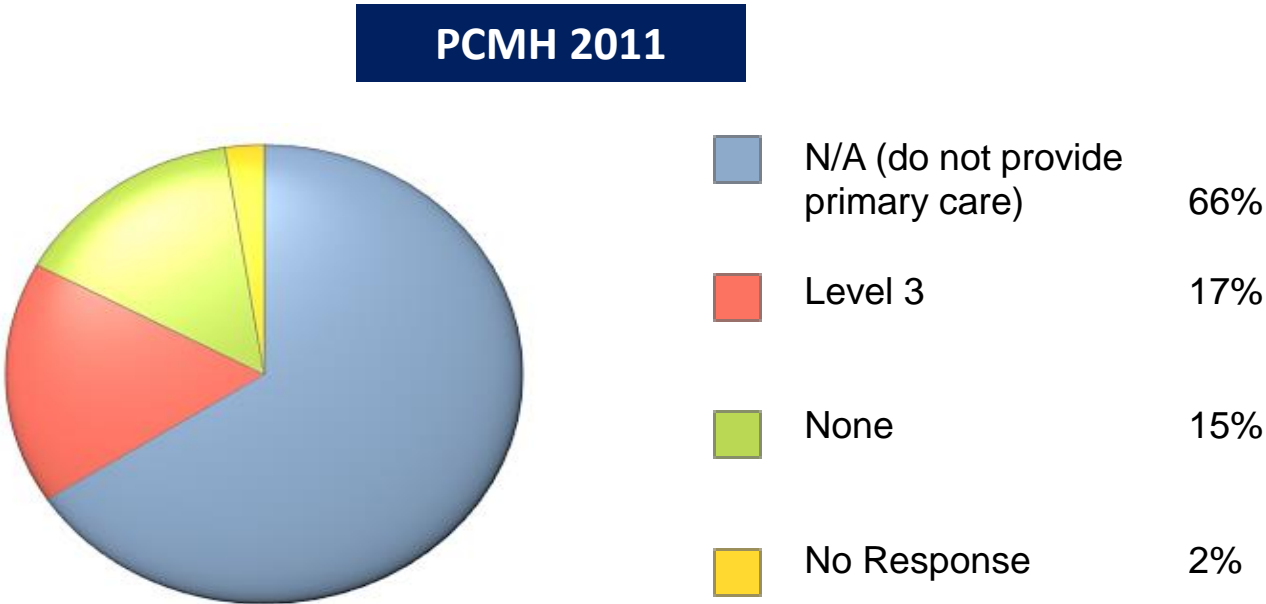
Responding Partners by County



## General Information

### Patient Centered Medical Home (PCMH)

One of the DSRIP requirements is to ensure that all primary care providers participating in specified projects meet the NCQA (2011) accredited Patient Centered Medical Home, Level 3 standards and will achieve NCQA 2014 Level 3 PCMH or Advanced Primary Care accreditation by Demonstration Year (DY) 3. Our Workforce Survey included PCMH questions to enable us to assess both the current and future PCMH accreditation status of our partners. The pie chart below highlights the responses for the 2011 PCMH status.



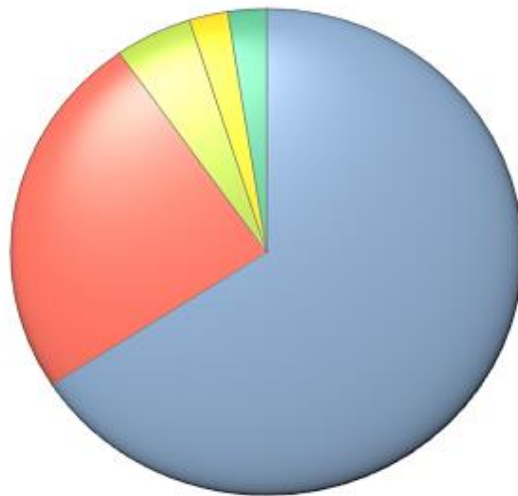







## General Information

### Patient Centered Medical Home (PCMH)

The pie chart below highlights the responses for the 2014 PCMH status.

**PCMH 2014**



	N/A (do not provide primary care)	65.85%
	None	24.39%
	No Response	4.88%
	Level 3	2.44%
	Level 1	2.44%

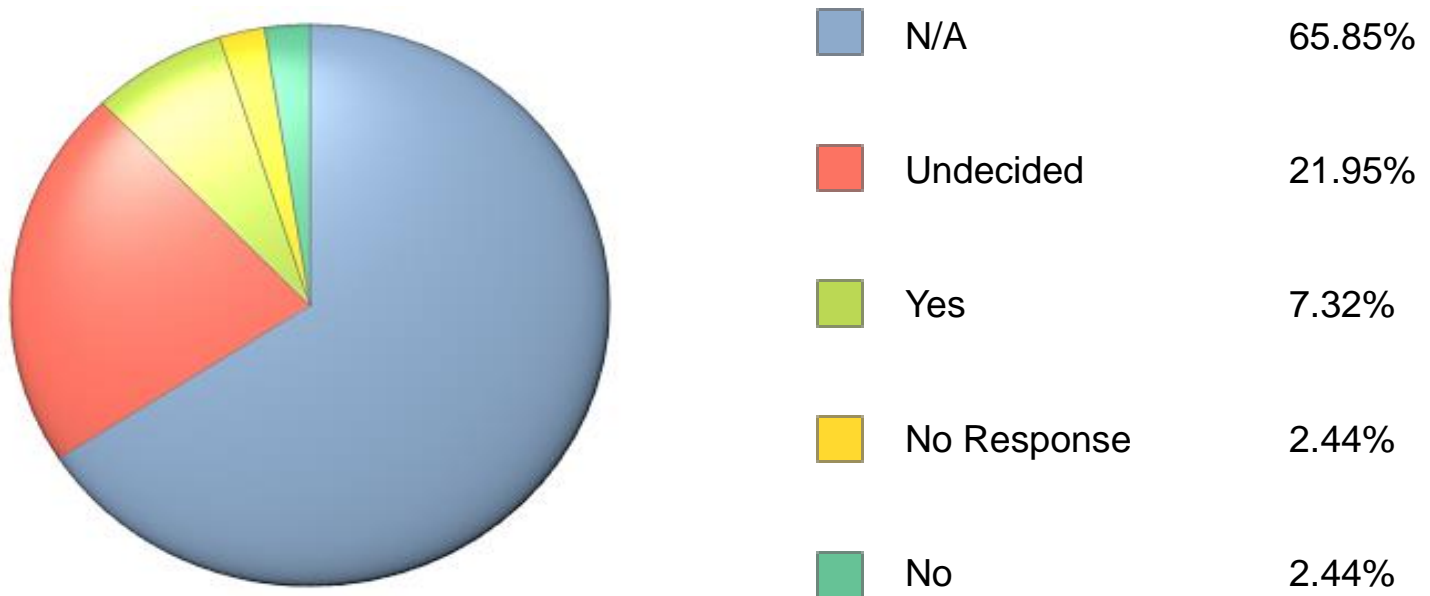


## General Information

### Advanced Primary Care

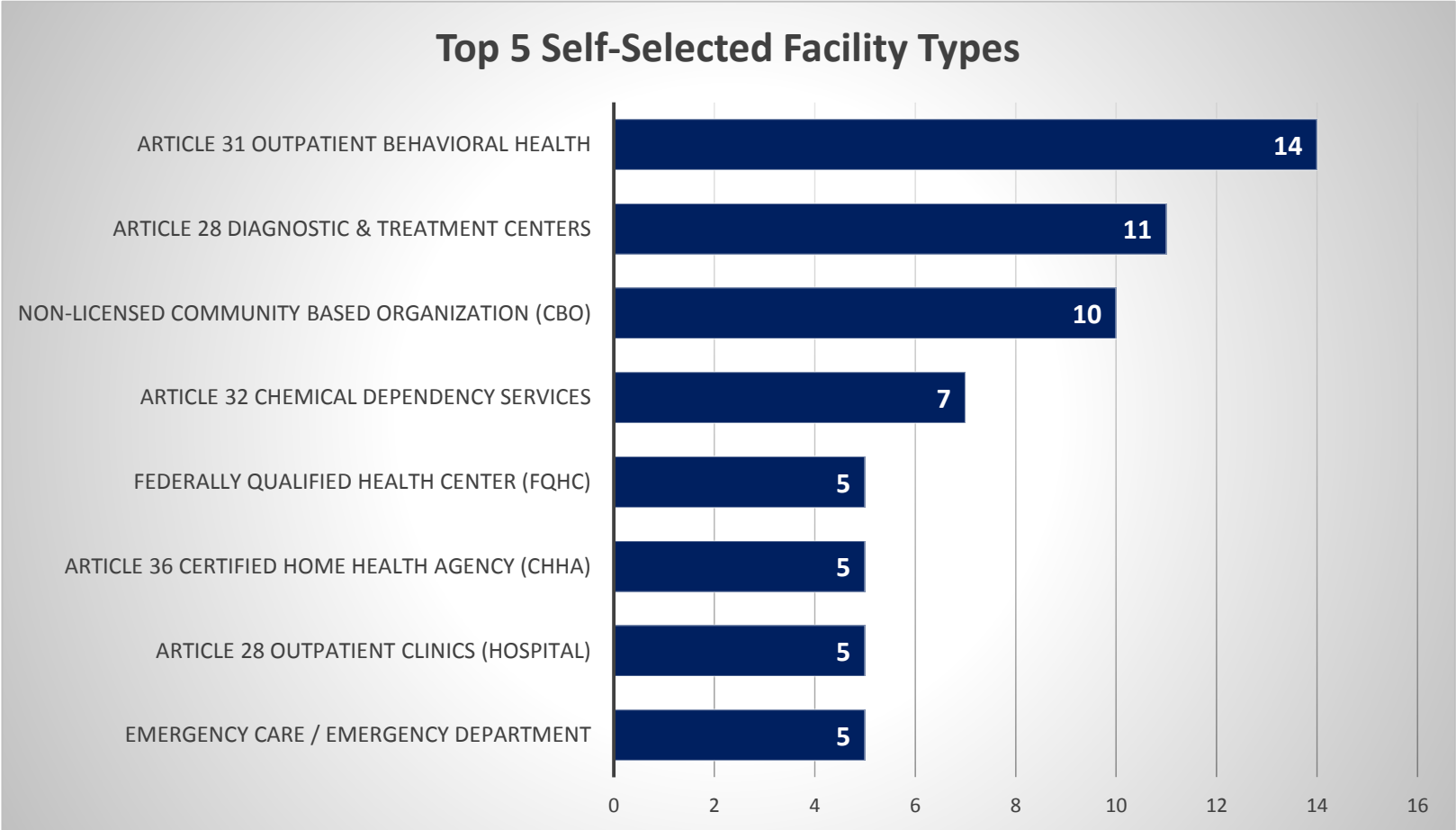
The pie chart below highlights the responses for the Advanced Primary Care status.

#### Advanced Primary Care



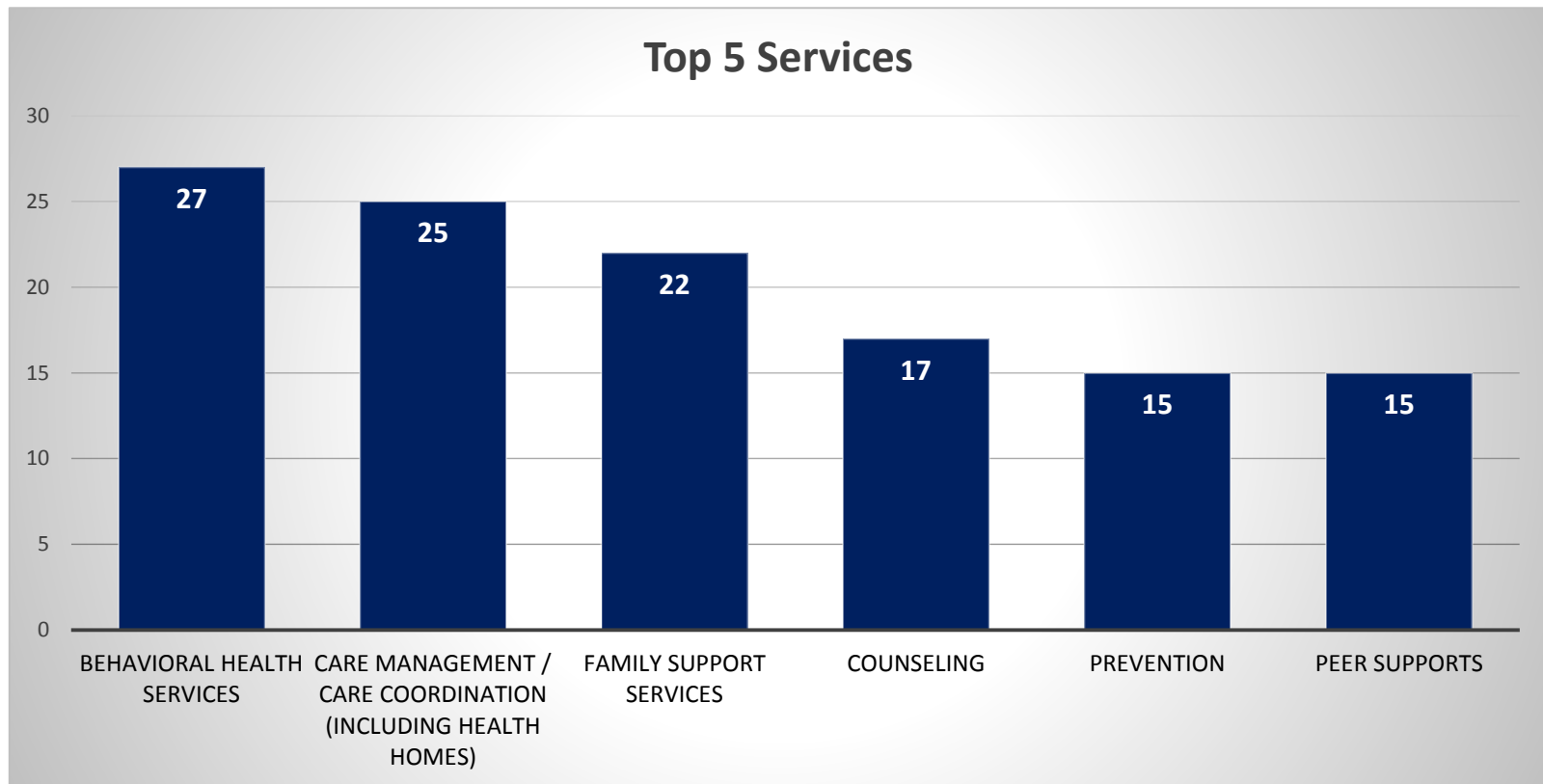
## Facility Details

As the health care landscape changes in the state of New York as a result of the delivery system reform incentive payment program, the impact on workforce positions will vary by facility type. The Workforce Survey respondents were allowed to select all applicable facility designations. Information regarding facility types is a key variable in determining future workforce needs. The chart below provides an overview of the Top 5 Facility Types selected by our partners.



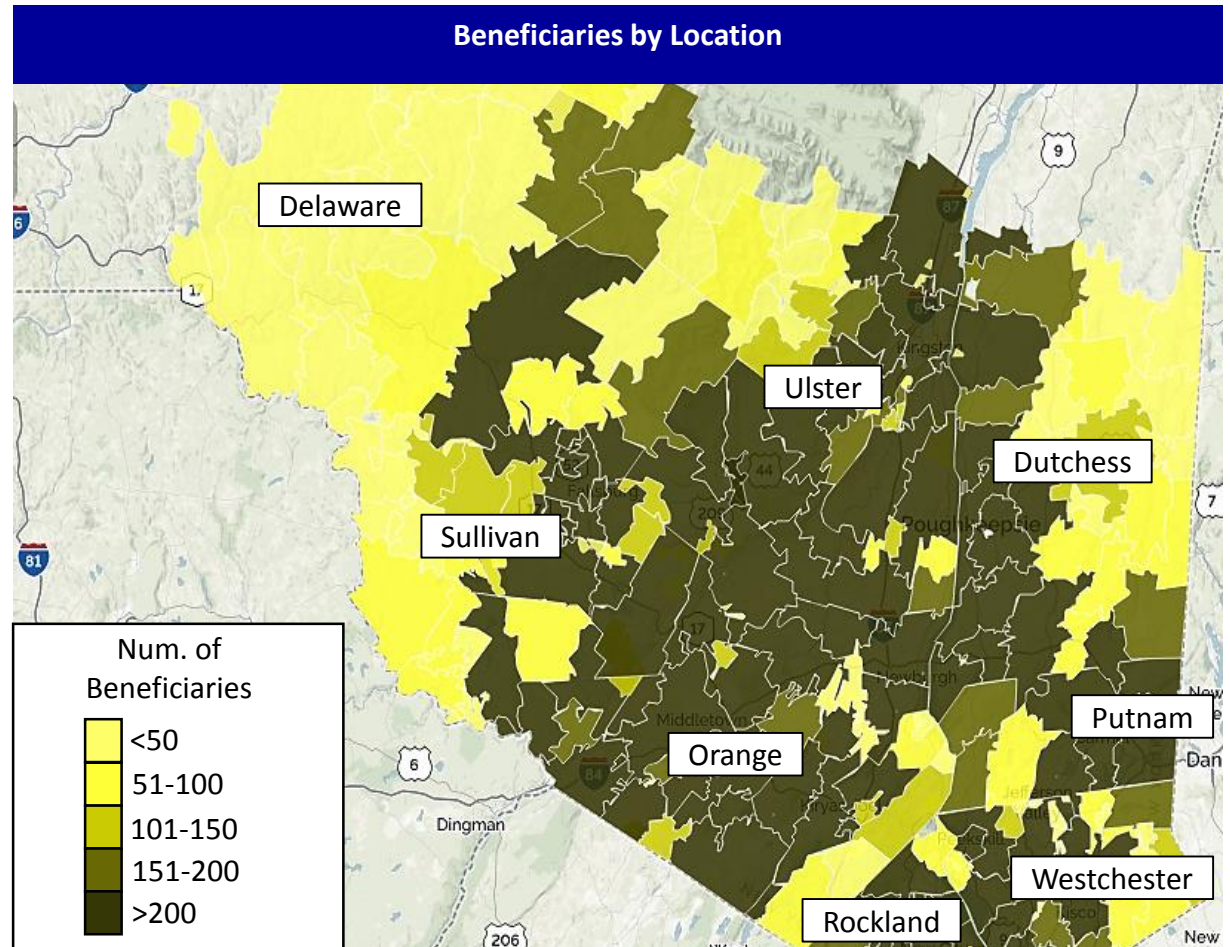
## Service Details

Assessing the services provided by our partner organizations was an integral component in understanding where gaps may exist with positions needed to support our DSRIP projects.



## Population Data

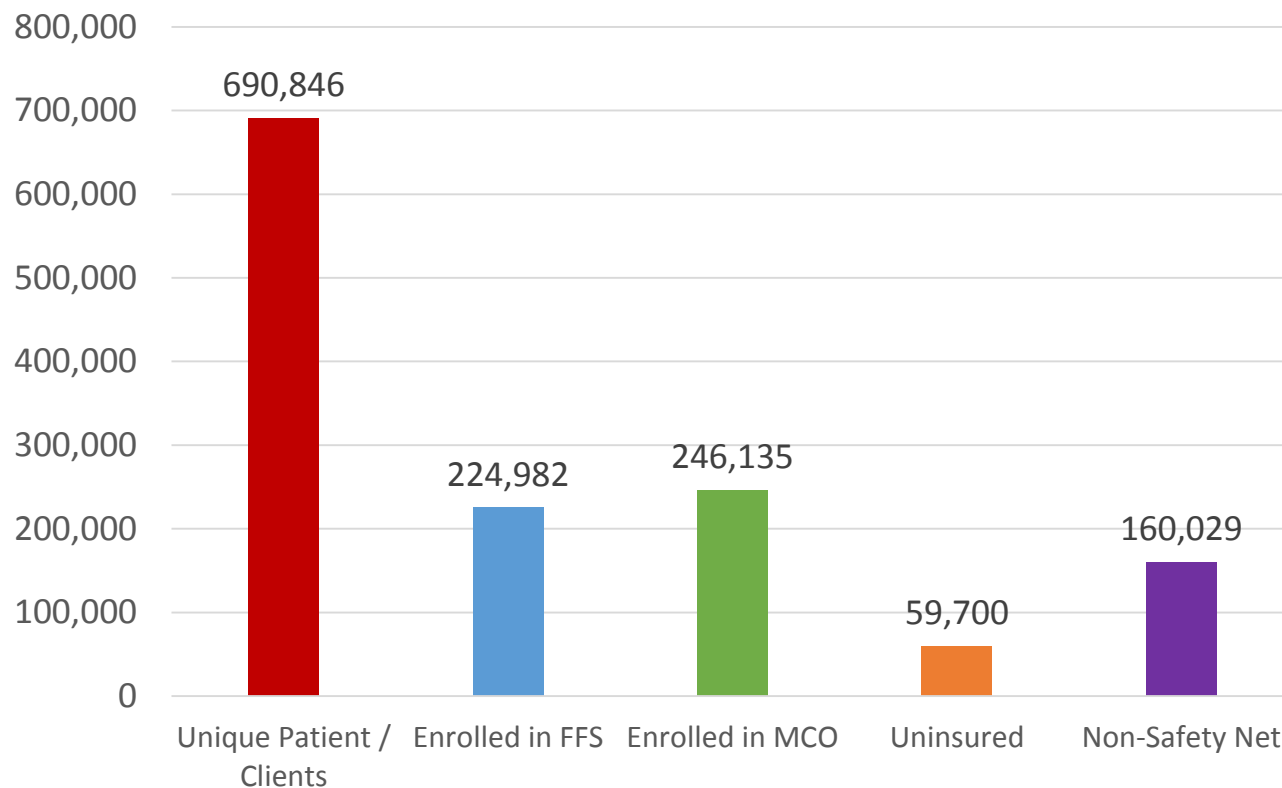
The graphs on the following pages provide an overview of the patients served within our PPS. This information enabled us to assess the geographical areas with the highest workforce needs based upon the population. We were also able to analyze the volume and types of services being provided to our patients.



## Population Data

We were also able to analyze the volume and types of services being provided to our patients.

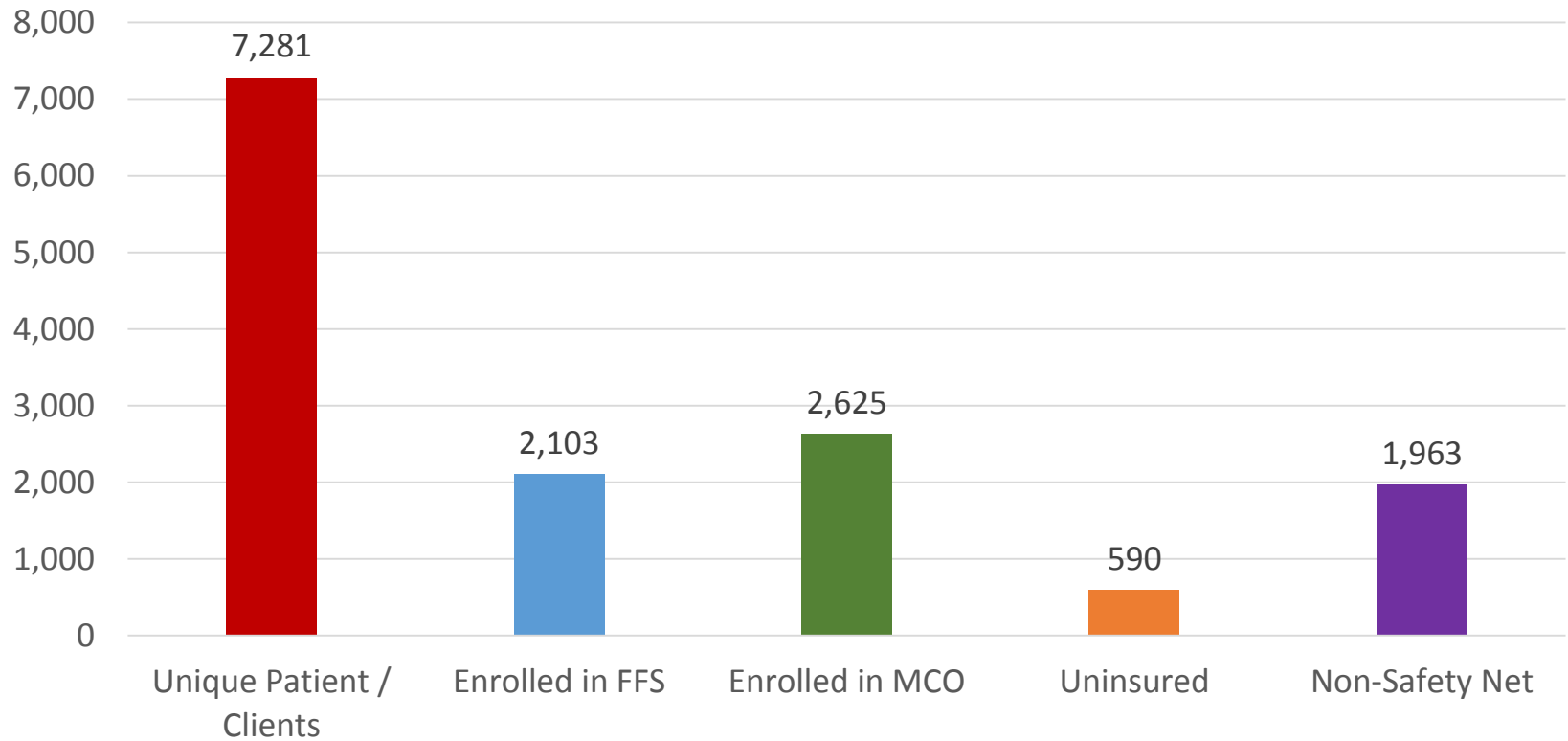
### Unique Patient/Clients Served per Year





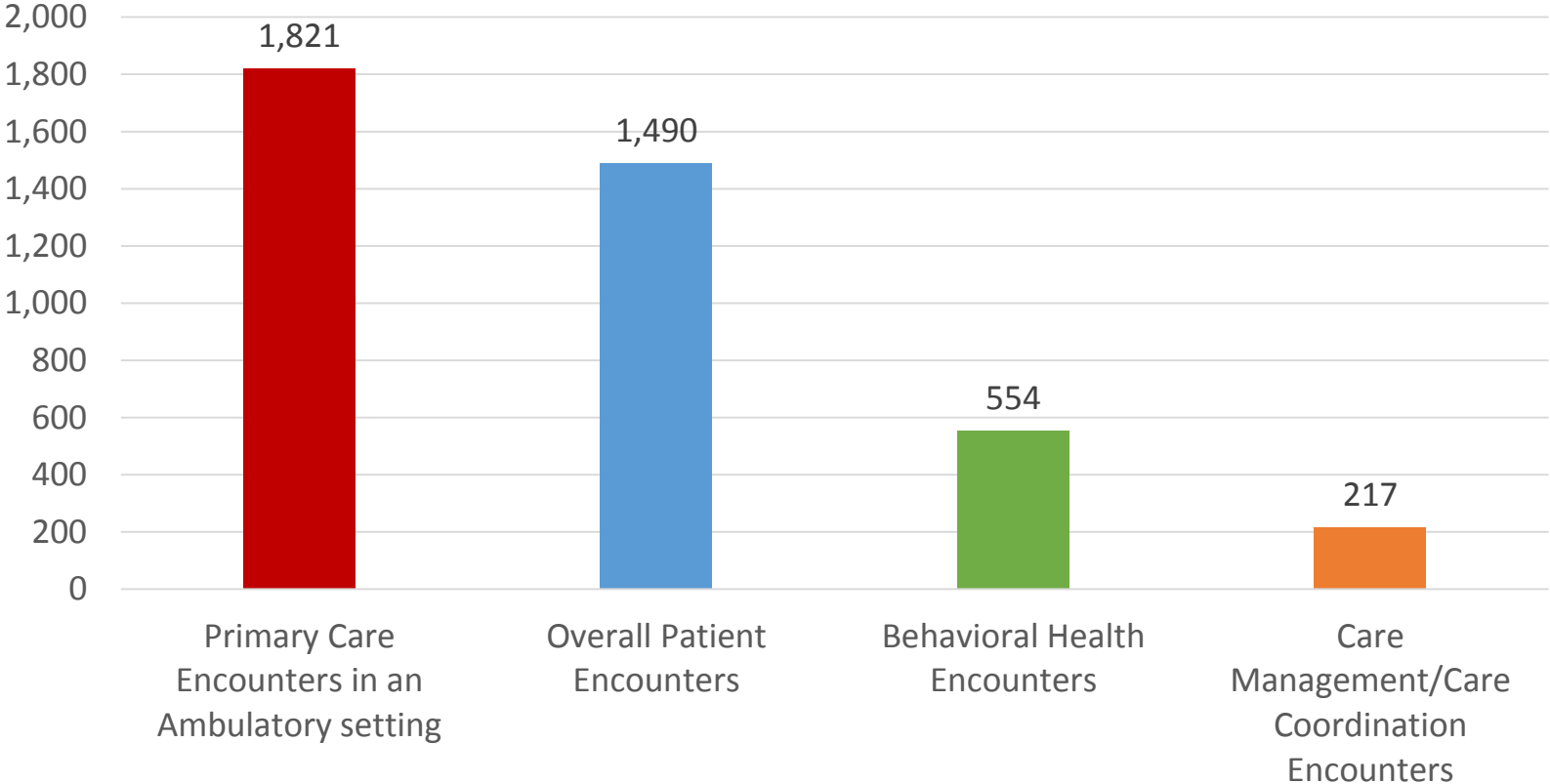
## Population Data

Unique Patient/Clients Served in Ambulatory Care



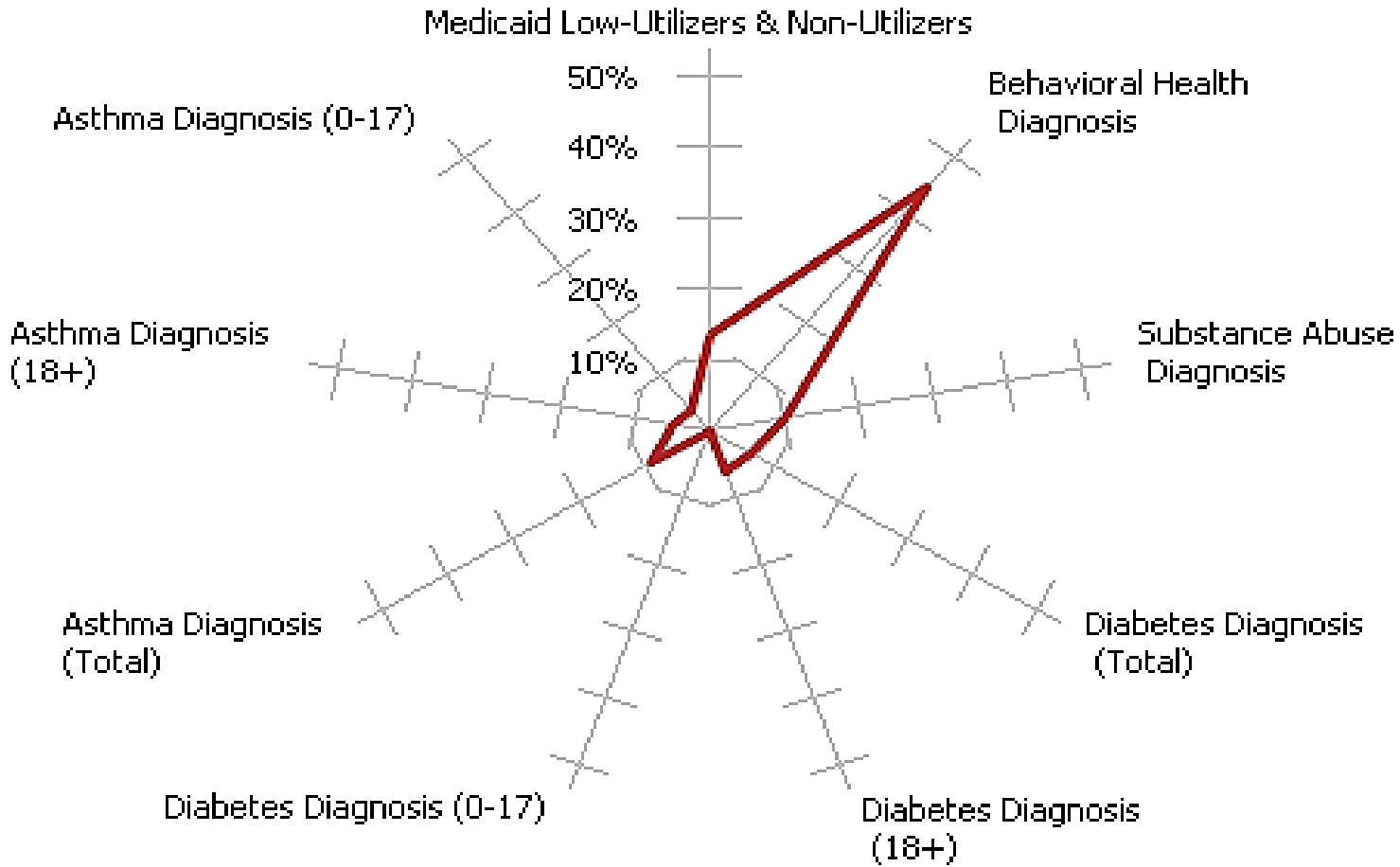
## Population Data

Avg Encounters per Week



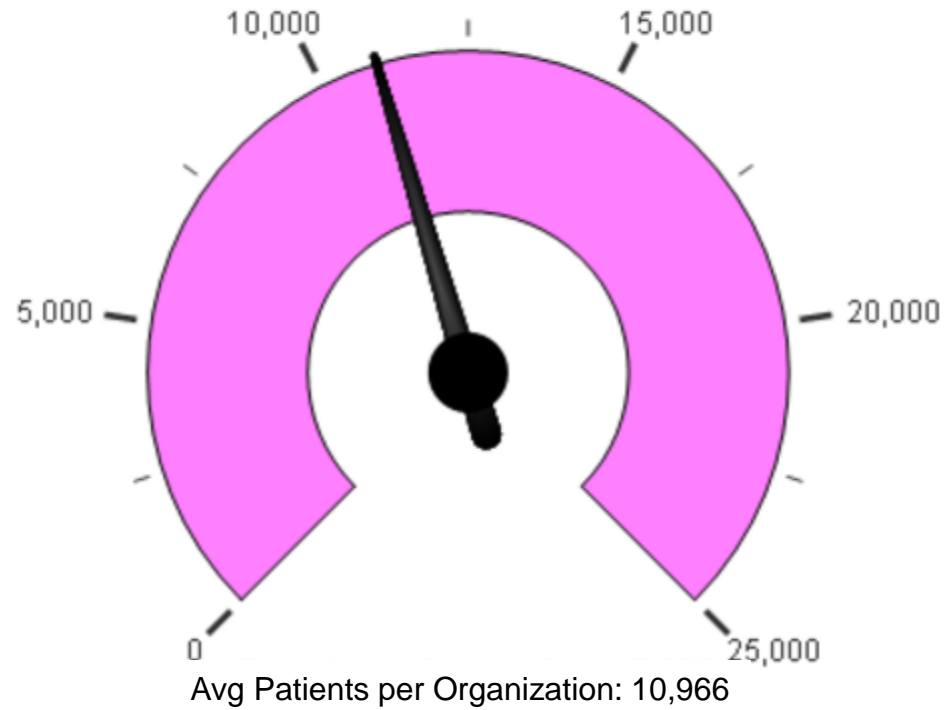
## Population Data

### % of Attributed Population by Service Type



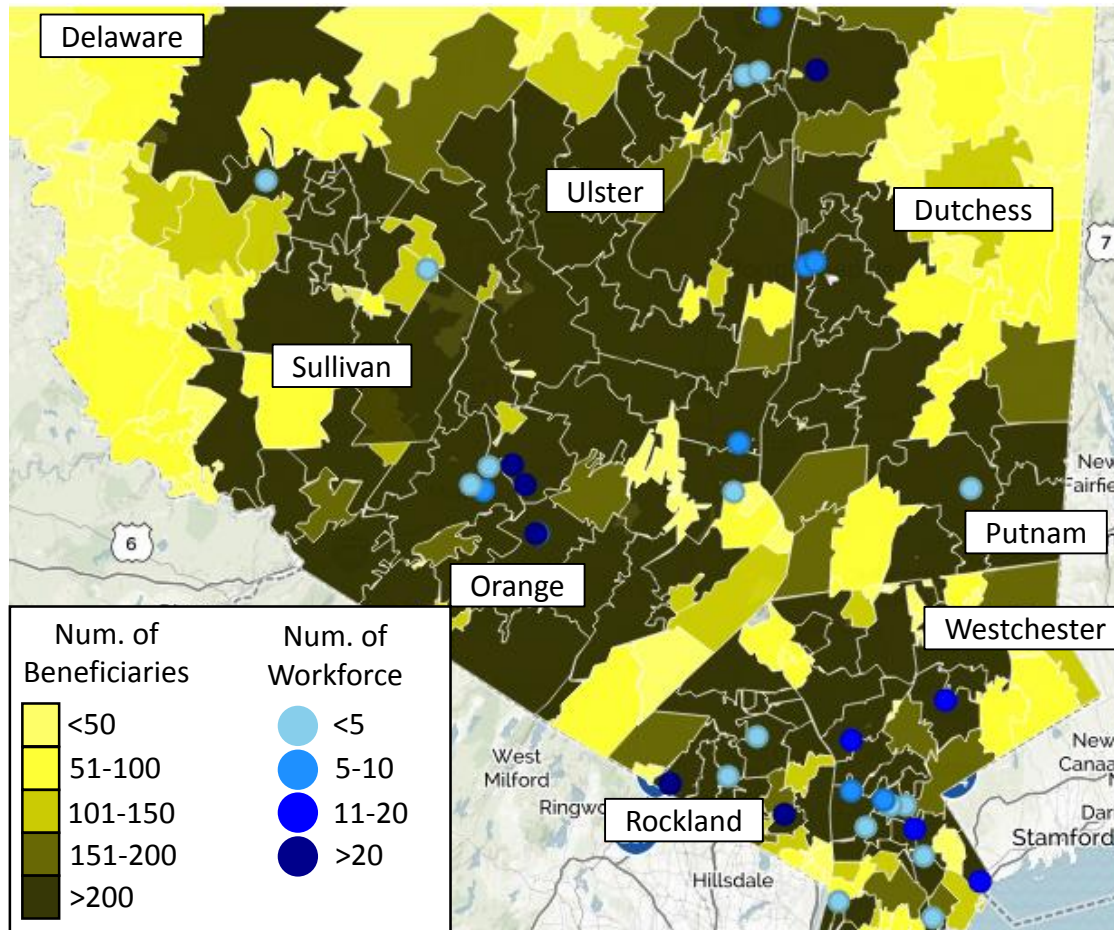
## Population Data

Average No. of Patients Served per year



## Workforce Data

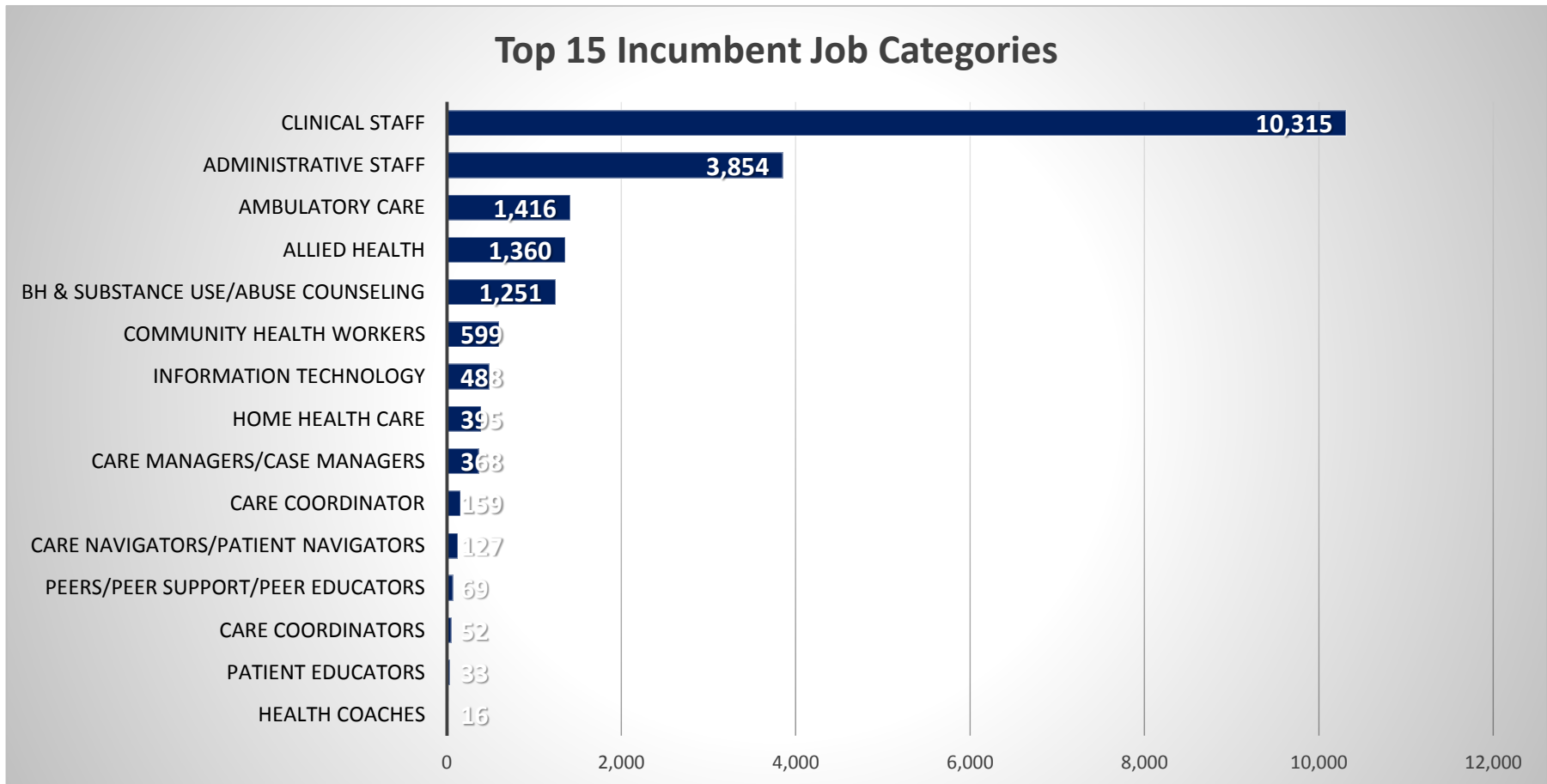
The map below provide a geographical view of the location of the WMC CRHI PPS workforce by zip code and county.





## Workforce Data

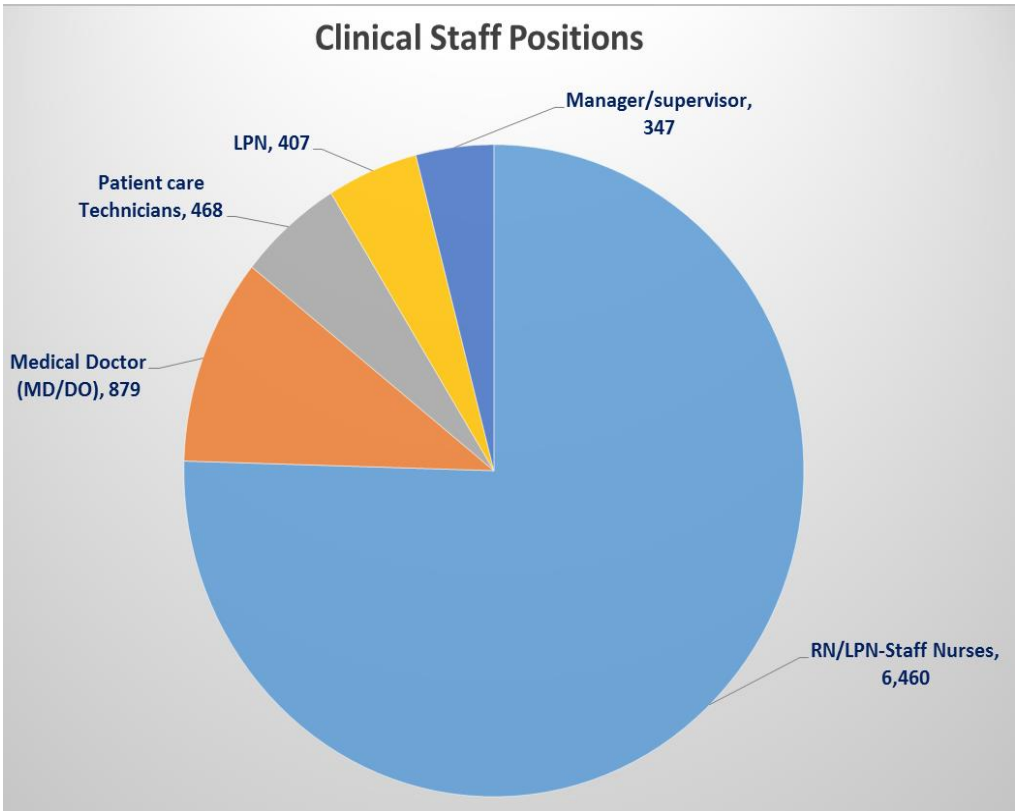
In our Workforce Survey respondents were able to self-report current headcounts for positions within each of the DOH job categories. 41 partner organizations covering 376 sites reported a total headcount of 19,087 incumbent workforce positions. The chart below displays the fifteen job families with the largest headcounts. 54% of the reported positions are comprised of Clinical staff, 20% are Administrative staff and 7% are Ambulatory Care staff.



## Workforce Data

The Clinical Staff job family had the highest reported headcount for incumbent staff. The Staff Registered Nurse & Licensed Practical Nurse combined positions accounted for 62.6% (n=6,460) of the positions in the Clinical Staff job family. The pie chart below displays the top 5 positions in the Clinical Staff job family. The table below provides the results for all positions reported within this category.

**Top 5 positions reported under Clinical Staff**



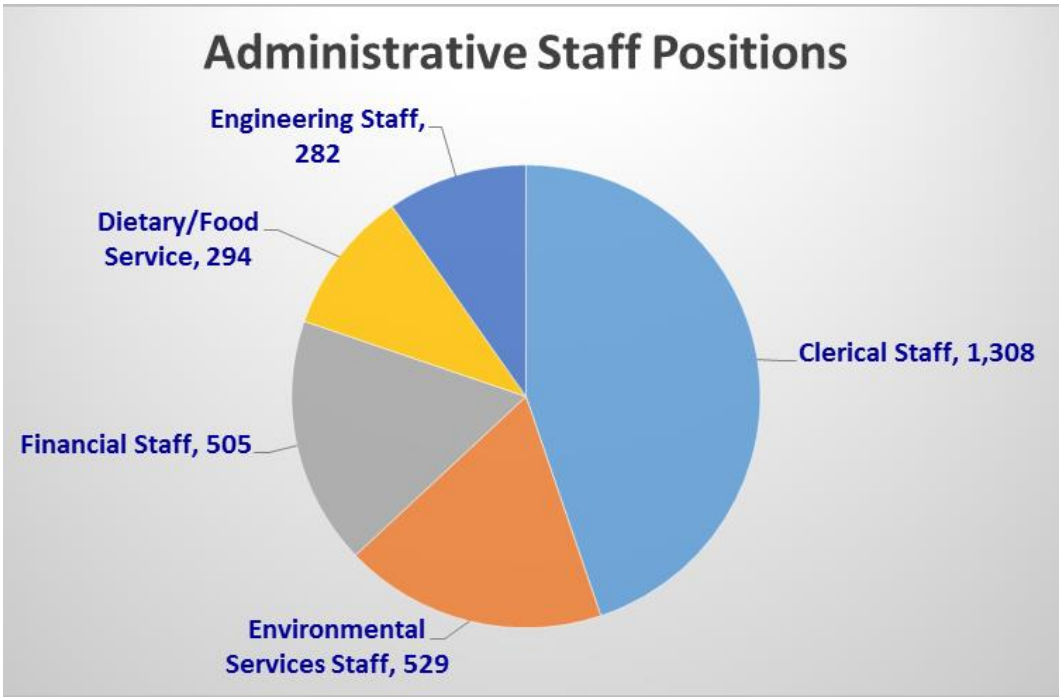
**All Reported Clinical Staff Positions**

JOB TYPE / TITLE	#
RN/LPN-Staff Nurses	6,460
Medical Doctor (MD/DO)	879
Patient care Technicians	468
LPN	407
Manager/supervisor	347
Certified Nurse Aides	326
Non-Certified Medical Assistant	281
Clinical Lab Tech/Technologist	248
Licensed Nurse Practitioners	229
RN/LPN-Other Titles	212
Non-Certified Nurse Aides	179
Certified Medical Assistant	168
Licensed Physician Assistants	97
Nurse Midwife	15
<b>TOTAL:</b>	<b>10,315</b>

## Workforce Data

The Administrative Staff job family had the 2<sup>nd</sup> highest reported headcount for incumbent staff. Clerical Staff job types accounted for 34% (n=1,308) of the positions in the Administrative job family. The pie chart below displays the top 5 positions in the Administrative job family. The table below provides the results for all positions reported within this category.

Top 5 positions reported under Administrative Staff



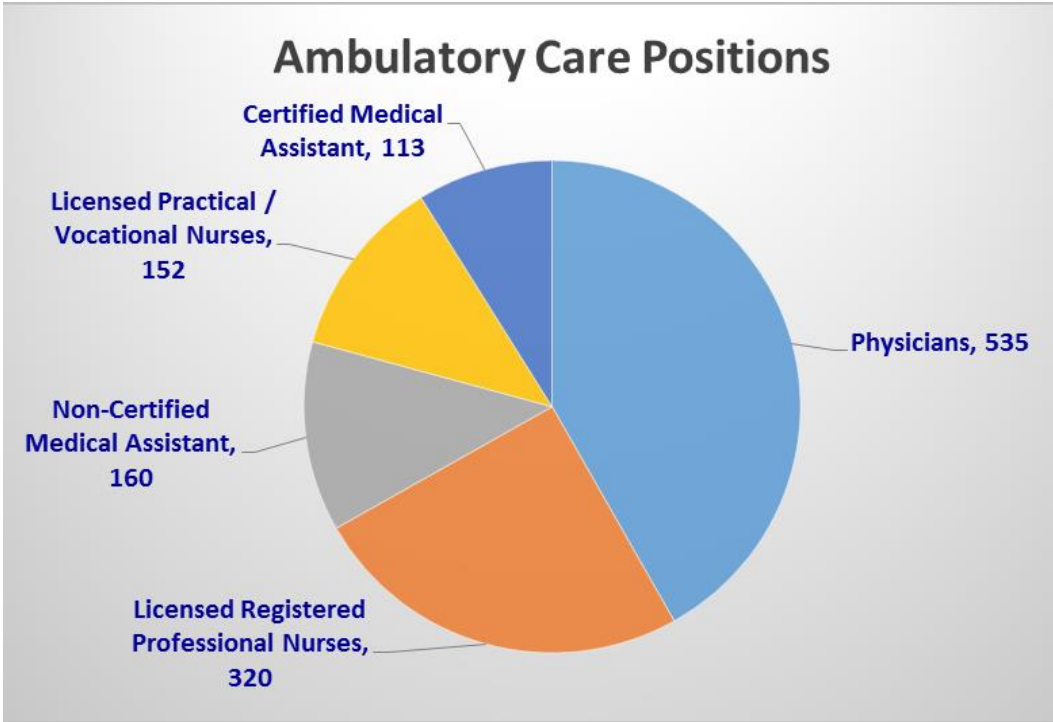
All Reported Administrative Staff Positions

JOB TYPE / TITLE	#
Clerical Staff	1,308
Environmental Services Staff	529
Financial Staff	505
Dietary/Food Service	294
Engineering Staff	282
Executive Leadership	195
Human Resources Staff	177
Patient Advocates	161
Non-Certified Medical Coders/Billers	132
Quality/Patient Safety	95
Certified Medical Coders/Billers	83
Non-Emergency Transportation	55
Regulatory Affairs	38
<b>TOTAL:</b>	<b>3,854</b>

## Workforce Data

The Ambulatory Care Staff job family had the 3<sup>rd</sup> highest reported headcount for incumbent staff. Physician job types accounted for 13.9% (n=535) of the positions in the Administrative job family. The pie chart below displays the top 5 positions in the Ambulatory Care job family. The table below provides the results for all positions reported within this category.

Top 5 positions reported under Ambulatory Care Staff



All Reported Ambulatory Care Positions

JOB TYPE / TITLE	#
Physicians	535
Licensed Registered Professional Nurses	320
Non-Certified Medical Assistant	160
Licensed Practical / Vocational Nurses	152
Certified Medical Assistant	113
Licensed Nurse Practitioners	92
Licensed Physician Assistants	44
<b>TOTAL:</b>	<b>3,854</b>

# Workforce Target State





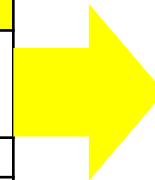
# WORKFORCE TARGET STATE

## Target State Projections

The Westchester Medical Center for Regional Healthcare Innovation’s future state workforce model estimates the need for approximately 1,567 positions for the DSRIP projects. The table on the left provides the projected FTE’s by Job Category. Non-Licensed Care Coordinator jobs account for 26% of the projected workforce needs. The table on the right outlines the specific Job Types within the Non-Licensed Care Coordinator category and the DSRIP projects requiring these positions.

**Target State Positions**

DOH Job Category	# of Positions (FTE)
Non-licensed Care Coordination / Case Mgmt / Care Mgmt / Patient Navigators / Community Health Workers	409.7
Nursing	381.2
Behavioral Health	236.6
Social Worker Case Management / Care Management	99.4
Health Information Technology	92
Nursing Care Managers / Coordinators / Navigators / Coaches	92
Physicians	84.2
Patient Education	55.2
Administrative Support	42.5
Clinical Support	20
Administrative Staff	17.3
Nurse Practitioners	15.1
Other Allied Health	15
Physician Assistants	7.1
<b>TOTAL:</b>	<b>1,567</b>

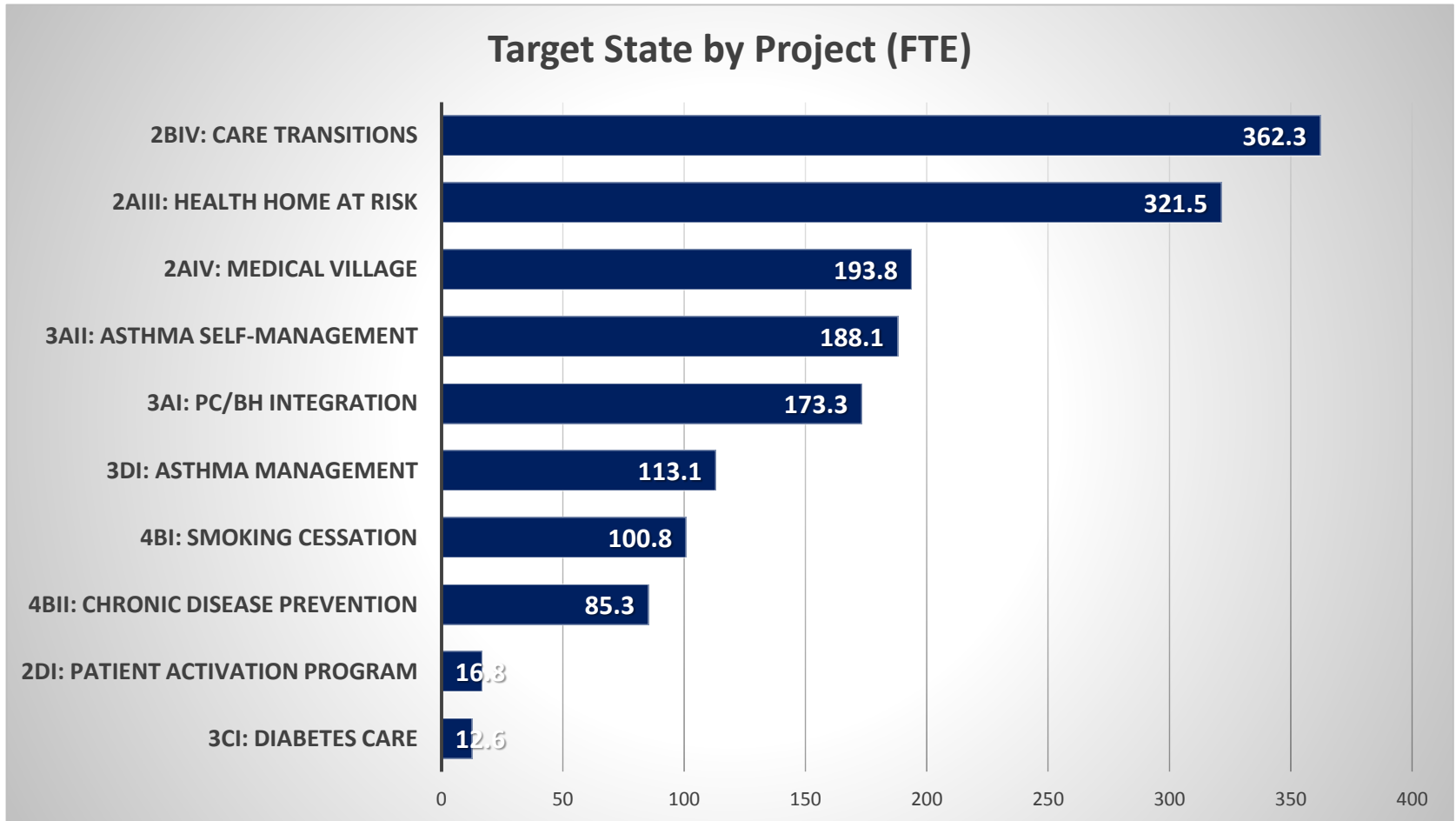


**Non-Licensed Care Coordinator Job Types**

DOH Job Category	Job Type/Job Title	DSRIP Project
Non-licensed Care Coordination / Case Mgmt / Care Mgmt / Patient Navigators / Community Health Workers (Except RNs, LPNs, and Social Workers)	Care / Patient / Community Navigator	2aiii, 2aiv, 2biv, 2di, 3ai, 3aii
	Care / Referral Coordinator / Manager	2aiv, 2biv, 3ai, 3aii, 3ci
	Community Health Worker / Community Outreach Worker	2aiii, 2aiv, 2di, 3diii, 4bi
	Health Home Coordinator / Care Manager	2aiii

## Staffing-by-Project (Estimated Demand)

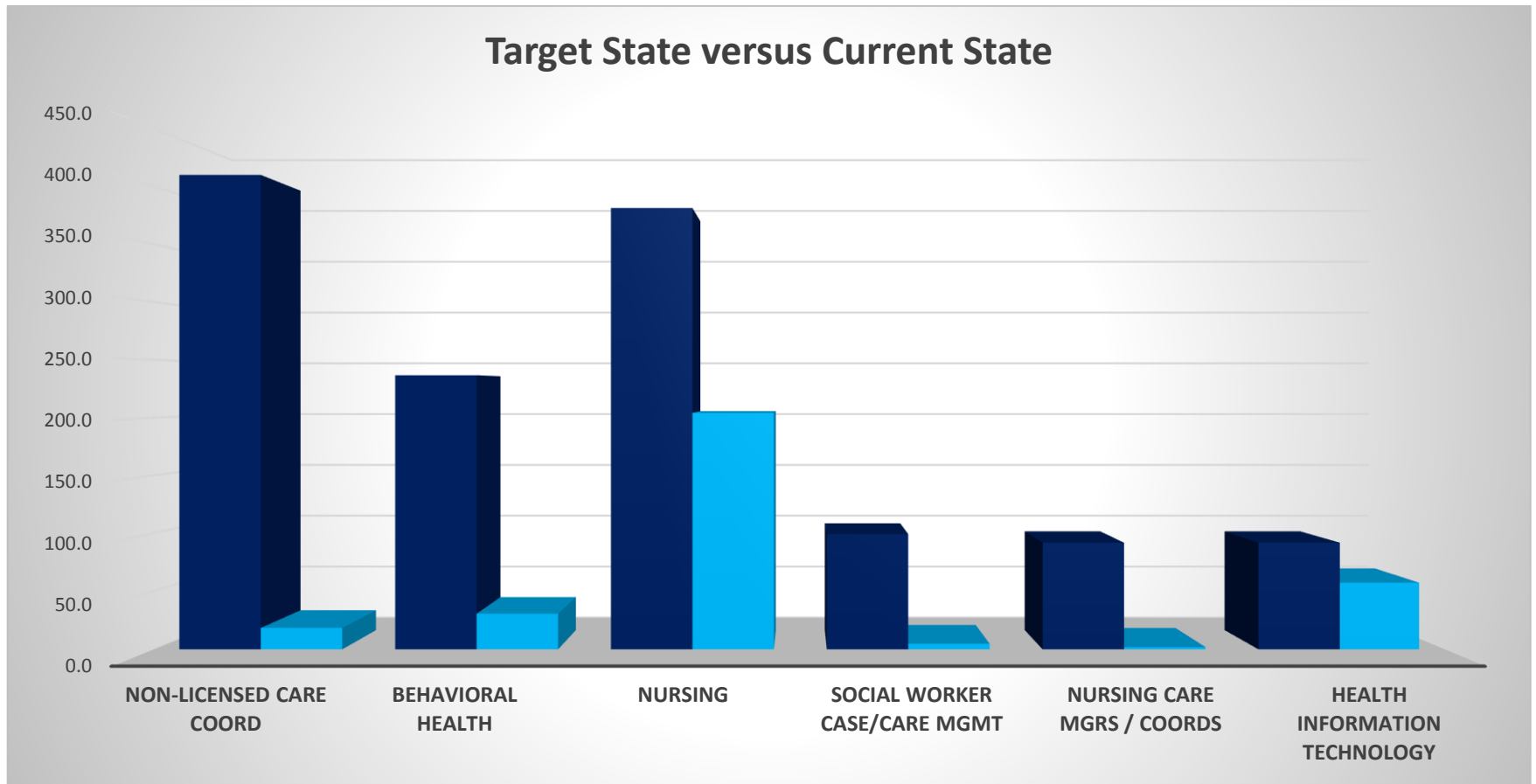
The chart below highlights the projected future staffing needs for each of our clinical projects. Project 2biv – Care Transitions is estimated to need the highest number of positions (23%), while Project 3ci – Diabetes Care is estimated to need the least number of the future state positions (.8%).



# Gap Analysis

## Quantitative Gaps (Demand versus Supply)

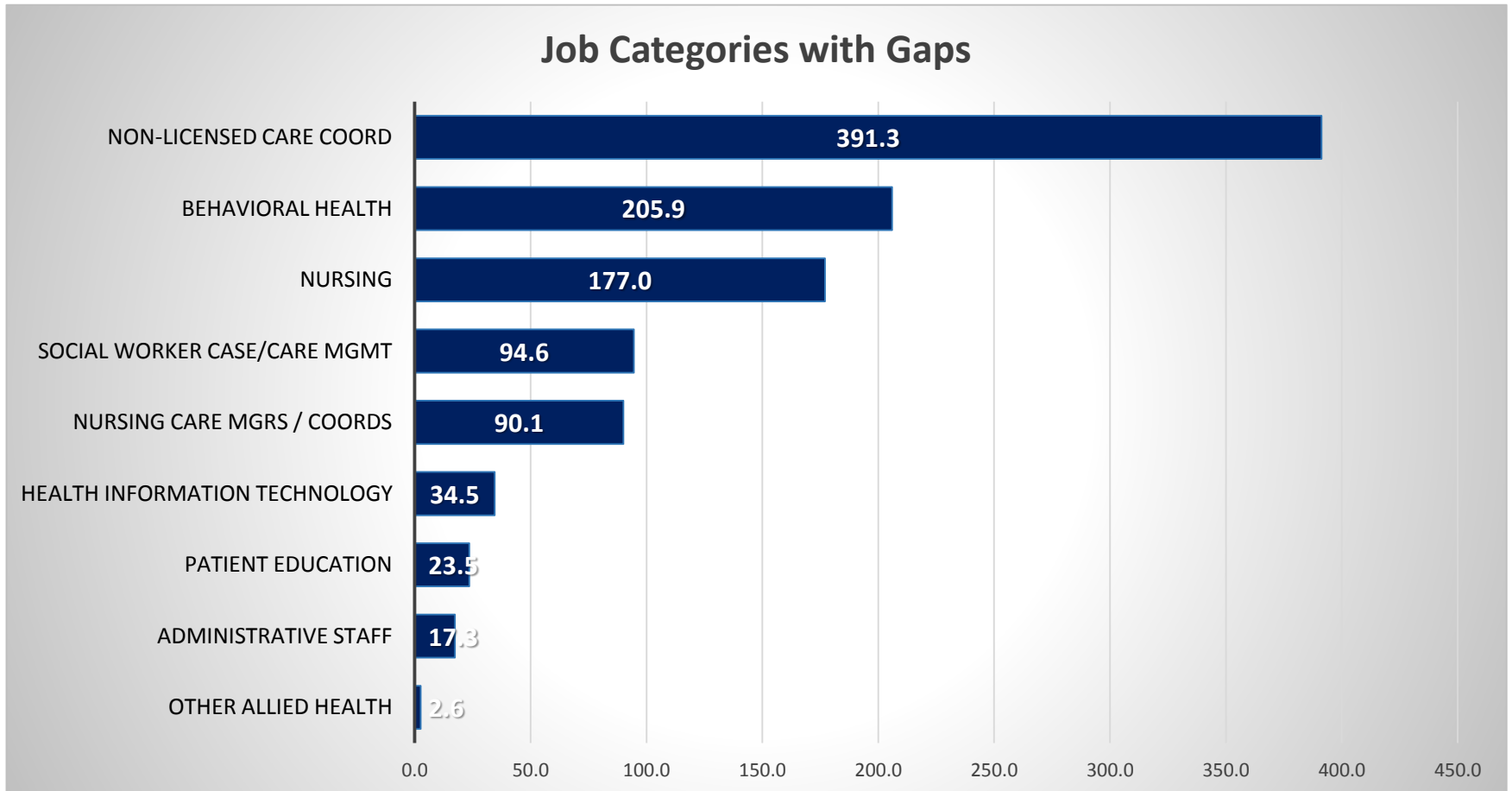
The chart below shows the differences in the current allocated supply (based on a mathematical algorithm) versus the future projected demand for the top 6 workforce job categories.



■ Target State (FTE)
 ■ Current State (Algorithm)

## Quantitative Gaps (By Job Category)

Our gap analysis resulted in a total workforce gap of 1,036.8 (FTE). The chart below outlines the 9 job categories with the identified workforce gaps that will need to be filled by our Transition Roadmap. The Non-Licensed Care Coordinator job family has the highest number of gaps to be filled (37.7%).



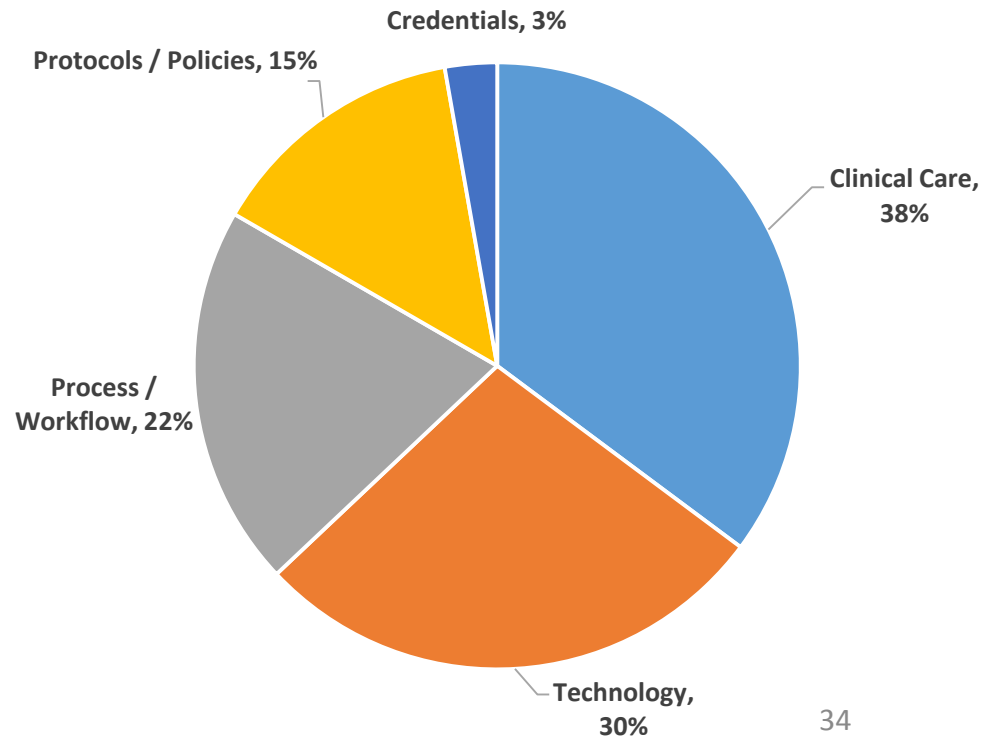
## Qualitative Gaps (Workforce Skills)

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 WMC CRHI PPS and those needed in the future state to support the DSRIP projects. Qualitative gaps were evaluated using the five focus areas outlined below:

- Clinical Care** The training and skills needed to provide high-quality, 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

We evaluated the skills and competency gaps for each project across our 5 focus areas. The pie chart below outlines the identified qualitative gaps. Our Training Strategy will outline our plan to design training curriculum and develop programs to address each of the identified skills gaps for each of the DSRIP projects.

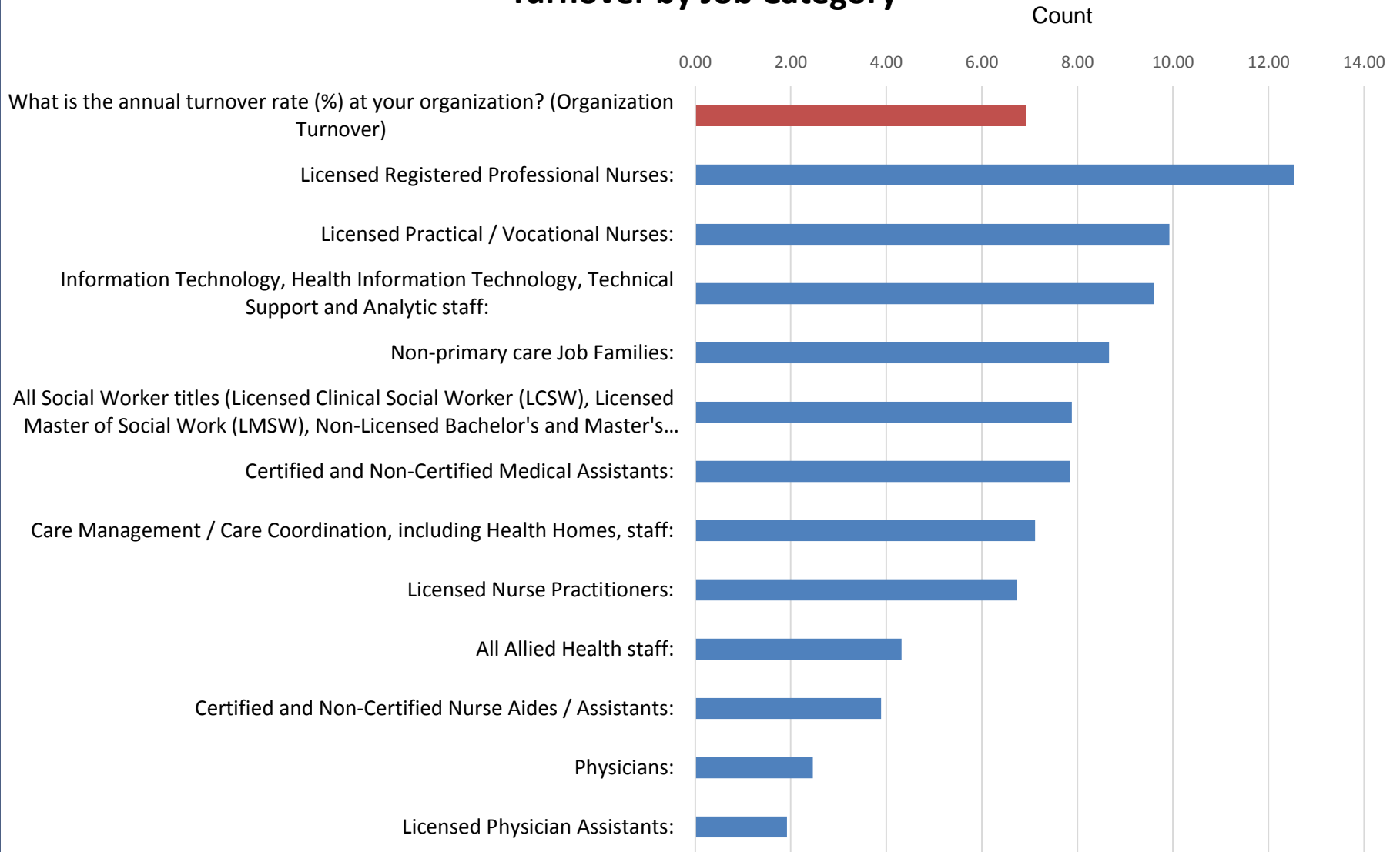
## Skills & Competencies Gaps





# Attrition & Turnover

## Turnover by Job Category



# Appendices

PPS Partners that participated in the Workforce Survey (9/2015-3/2016)	
Access: Supports for Living, Inc	Mental Health Association in Ulster County, Inc.
Astor Services for Children & Families	MHA of Dutchess County
Bon Secours Charity Health System, Inc.	MHA of Westchester
Catholic Charities Community Services of Orange County, Inc.	Middletown Community Health Center, Inc.
County of Sullivan Department of Community Services	Open Door Family Medical Center
Crystal Run Healthcare	Orange County Department of Mental Health
Dominican Sisters Family Health Service, Inc.	Phelps Memorial Hospital Center
Family of Woodstock, Inc.	Planned Parenthood Hudson Peconic
Family Services of Westchester, Inc.	Planned Parenthood Mid-Hudson Valley
Golden Hill Nursing & Rehabilitation Center	Putnam Family & Community Services
Greater Hudson Valley Health Center	Rehabilitation Support Services, Inc.
HealthAlliance of the Hudson Valley	Rockland Paramedics, Inc.
HONORehg, Inc.	St. Dominic's Home
Hudson Valley Community Services, Inc.	The Childrens Rehabilitation Center
Human Development Services of Westchester	The Institute for Family Health
Jawonio, Inc.	Westchester Institute for Human Development
Julia Dyckman Andrus Memorial, Inc. dba ANDRUS	Westchester Jewish Community Services, Inc.
Lexington Center for Recovery, Inc.	Westchester Medical Center
Llobet Medical Group	Westchester Medical Center advanced Physician Services
Maternal-Infant Services Network of Orange, Sullivan and Ulster Counties, Inc.	Westchester-Ellenville Hospital, Inc.dba Ellenville Regional Hospital
Mental Health Association in Orange County, Inc.	

CRHI DSRIP PROJECTS

No.	Project Name	Project Objectives
<b>Domain 2 - System Transformation Projects</b>		
2.a.i	Create Integrated Delivery Systems that are focused on Evidence Based Medicine / Population Health Management	- Build an integrated, collaborative and accountable service delivery structure to end service fragmentation and increase the alignment of incentives.
2.a.iii	Health Home At-Risk Intervention Program: Proactive management of higher risk patients not currently eligible for Health Homes through access to high quality primary care and support services	- To expand access to community primary care services and develop integrated care teams (physicians and other practitioners, behavioral health providers, pharmacists, nurse educators and care managers from Health Homes
2.a.iv	Create a medical village using existing hospital infrastructure	- To reduce excess bed capacity and repurpose unneeded hospital infrastructure into “medical villages,” integrated outpatient service centers providing emergency/urgent care as well as access to the full range of outpatient medicine.
2.b.iv	Care transitions intervention model to reduce 30 day readmissions for chronic health conditions	- To provide a 30 day supported transition period after a hospitalization to ensure discharge directions are understood and implemented.
2.d.i	Implementation of Patient and Community Activation Activities to Engage, Educate and Integrate the uninsured and low/non-utilizing Medicaid populations into Community Based Care	- To increase patient activation related to health care paired with increased resources that can help the uninsured (UI), non-utilizing (NU) & low utilizing (LU)populations
<b>Domain 3 - Clinical Improvement Projects</b>		
3.a.i	Integration of primary care and behavioral health services	- Integration of mental health and substance abuse with primary care services to ensure coordination of care for both services.
3.a.ii	Behavioral health community crisis stabilization services	- To provide readily accessible behavioral health crisis services that will allow access to appropriate level of service and providers, supporting a rapid de-escalation of the crisis.
3.c.i	Evidence-based strategies for disease management in high risk/affected populations (adults only)	- To support implementation of evidence-based best practices for disease management in medical practice.
3.d.iii	Implementation of evidence-based medicine guidelines for asthma management	- To ensure access for all patients with asthma to care consistent with evidence-based medicine guidelines for asthma management.
<b>Domain 4 - Population-wide Projects: New York's Prevention Agenda</b>		
4.b.i	Promote tobacco use cessation, especially among low SES populations and those with poor mental health.	- To decrease the prevalence of cigarette smoking by adults 18 and older; Increase use of tobacco cessation services including NYS Smokers’ Quitline and nicotine replacement products.
4.b.ii	Increase Access to High Quality Chronic Disease Preventive Care and Management in Both Clinical and Community Settings (Note: This strategy targets chronic diseases that are not included in domain 3.b., such as cancer)	- To increase the numbers of New Yorkers who receive evidence based preventive care and management for chronic diseases.

## DOH JOB CATEGORIES

<b>Physicians</b>	<b>Behavioral Health (Except Social Workers providing Case/Care Management, etc.) (cont'd)</b>	<b>Non-licensed Care Coordination/Case Management/Care Management/Patient Navigators/Community Health Workers (Except RNs, LPNs, and Social Workers)</b>	<b>Health Information Technology</b>
Primary Care	Licensed Clinical Social Workers	Care Manager/Coordinator	Health Information Technology Managers
Other Specialties (Except Psychiatrists)	Substance Abuse and Behavioral Disorder Counselors	Patient or Care Navigator	Hardware Maintenance
<b>Physician Assistants</b>	Other Mental Health/Substance Abuse Titles Requiring Certification	Community Health Worker	Software Programmers
Primary Care	Social and Human Service Assistants	Peer Support Worker	Technical Support
Other Specialties	Psychiatric Aides/Techs	<b>Administrative Staff – All Titles</b>	Other
<b>Nurse Practitioners</b>	Other	Executive Staff	<b>Home Health Care</b>
Primary Care	<b>Nursing Care Managers/ Coordinators/Navigators/Coaches</b>	Financial	Certified Home Health Aides
Other Specialties (Except Psychiatric NPs)	RN Care Coordinators/Case Managers/Care Transitions	Human Resources	Personal Care Aides
<b>Midwives</b>	LPN Care Coordinators/Case Managers	Other	Other
<b>Nursing</b>	<b>Social Worker Case Management/ Care Management</b>	<b>Administrative Support – All Titles</b>	<b>Other Allied Health</b>
Nurse Managers/Supervisors	Bachelor's Social Work	Office Clerks	Nutritionists/Dieticians
Staff Registered Nurses	Licensed Masters Social Workers	Secretaries and Administrative Assistants	Occupational Therapists
Other Registered Nurses (Utilization Review, Staff Development, etc.)	Social Worker Care Coordinators/Case Managers/Care Transition	Coders/Billers	Occupational Therapy Assistants/Aides
LPNs	Other	Dietary/Food Service	Pharmacists
Other	<b>Patient Education</b>	Financial Service Representatives	Pharmacy Technicians
<b>Clinical Support</b>	Certified Asthma Educators	Housekeeping	Physical Therapists
Medical Assistants	Certified Diabetes Educators	Medical Interpreters	Physical Therapy Assistants/Aides
Nurse Aides/Assistants	Health Coach	Patient Service Representatives	Respiratory Therapists
Patient Care Techs	Health Educators	Transportation	Speech Language Pathologists
Clinical Laboratory Technologists and Technicians	Other	Other	Other
Other		<b>Janitors and cleaners</b>	
<b>Behavioral Health (Except Social Workers providing Case/Care Management, etc.)</b>			
Psychiatrists			
Psychologists			
Psychiatric Nurse Practitioners			

SOURCE: NYS DSRIP Workforce Reporting Summary, December 2015