

HRSA Health Information Technology and Quality Webinar

**“Health IT Workforce Training Programs for
the Safety Net Community”**

Date: 4/1/2011

**US Department of Health and Human Services
Health Resources and Services Administration**

Office of Health Information Technology and Quality

Additional HRSA Health IT and Quality Toolboxes and Resources including past webinars can be found at:

<http://www.hrsa.gov/healthit>

<http://www.hrsa.gov/quality>

Additional questions can sent to the following e-mail address:

HealthIT@hrsa.gov

- US Department of Health and Human Services
- Health Resources and Services Administration

Upcoming HRSA Health IT and Quality Announcements

- **Next 2011 HRSA HIT and Quality Learning Session**
 - **Georgia Primary Care Association Learning Session April 14th and 15th, 2011
Atlanta, Georgia**
 - **RFA for 2011-12 HRSA Health IT and Quality Learning Session Due April 4th, 2011**
- **New Items to the HRSA Health IT Site:**
 - **New HRSA Health IT Grantee Spotlight Featuring National Rural Health Resource Center's Technical Assistance and Services Center (TASC)**
- **Next HRSA HIT and Quality webinar “Tips On Conducting Due Diligence for a Health IT System” April 22,2011 2pm EST, Registration Now Open**
- **Public Comment now open on HHS’s “Federal Health IT Strategic Plan: 2011-2015”**
- **“HHS National Quality Strategy” released**

Introduction

Presenters:

Kay Gooding-Pitt Community College

David Falkenstein-Northern Virginia Community
College

Dr. Angela Diop-Unity Health Care Inc.



Unity Health Care's Approach to HIT Workforce Challenges

Angela Duncan Diop, ND
Director of Information Systems
Unity Health Care, Inc.
Washington, DC
April 1, 2011

Overview

- Background
 - About Unity Health Care
 - Unity's technology platform
- Unity's HIT workforce
- Unity's workforce challenges
- Unity's philosophy and approach
- Accomplishments



Background

Unity Health Care, Inc.

- A Federally Qualified Health Center (FQHC), serving 81,915 patients (2010) in Washington, DC
- Large network of more than 30 sites, including health centers, homeless service sites, correctional sites, and mobile sites
- Mission: *“to offer a citywide network of quality health and human services to the medically underserved regardless of race, ethnic background, or ability to pay.”*

EMR/PM System

- Customized eClinicalWorks (eCW) is our integrated practice management (PM) and electronic medical record (EMR) application
- Implemented EMR June – December 2009 in a phased approach (5 phases)
- All clinical providers and staff use eCW, except dental (which is still on paper)

Governance

- HIT is not just an IT function at Unity.
- All Unity disciplines have provided staff resources for training, maintenance and enhancement of our systems
- The Implementation Team is an engaged and committed multi-disciplinary group that meets weekly to advance major HIT initiatives
- There is a core group within the Implementation Team that is responsible for operationalizing



Unity's HIT Workforce

Unity's HIT Workforce

- The workforce includes:
 - Staff – Health Care professionals and administrative staff, including End users and Super users
 - Core Implementation Team members – EMR/PM analysts, Data Analysts, IT, Trainers

Unity's HIT Workforce

- We have taken a broad approach to defining who we consider part of the Unity HIT workforce.
- Solutions to addressing workforce issues need to address both of these groups



Unity's workforce challenges

Challenges

Staff

- Ensuring that staff has basic skill levels needed to use an EMR
 - i.e. using a mouse, checking e-mail
- Ensuring that staff is trained in the use of EMR and PM applications
- Training our Medical Specialists
 - Most are part-time and many have limited experience with computers

Challenges

Core Implementation Team

- Finding staff with knowledge of HIT and community health centers
- Finding knowledgeable/skilled staff who are willing to work for CHC salaries and environment
- Keeping staff once they are hired
 - Avoiding burning out this group
 - Supporting them



Our Approach

Our philosophy

- Not only are we contributing to the health of our communities, we are providing jobs for our communities
 - As we introduce HIT in our health centers we also have the opportunity to give our staff members new skills contributing to the well being of the community
- Decided that we did not want to require minimum computer skill sets across the organization

Promote from Within

- Decided that we would teach health center people about technology as opposed to the reverse
 - Creates new career opportunities for staff
 - Enhances career ladders
 - Involves staff in shaping our future
 - Incredible pool of people who are committed to the mission, knowledgeable about Unity

Promoting from Within

Examples of Staff Promoted from Within

Patient Registration Clerks	PM/EMR Analyst and Trainers
Billing Specialists	PM analyst and Trainers
Providers	EMR Analysts, Trainers, Support Team
Nurses and other Clinical Staff	Discipline Trainers, Back-up trainers

Train Everyone

- We are serious about training!
- No one starts working with our PM or EMR without training
 - Everyone goes through an initial training
 - Providers return for follow-up training
 - Training is hands on and is done in a classroom by a trainer
 - We have retraining programs and competency reviews to address groups that need more hands on assistance

Training, Continued

- Provide one-on-one training for Medical Specialist and other part-time Providers
- Training for Implementation Team
 - This group needs special training
 - Attend training from the vendor
 - Send them to training to get special skills
 - Communications, project management, management training

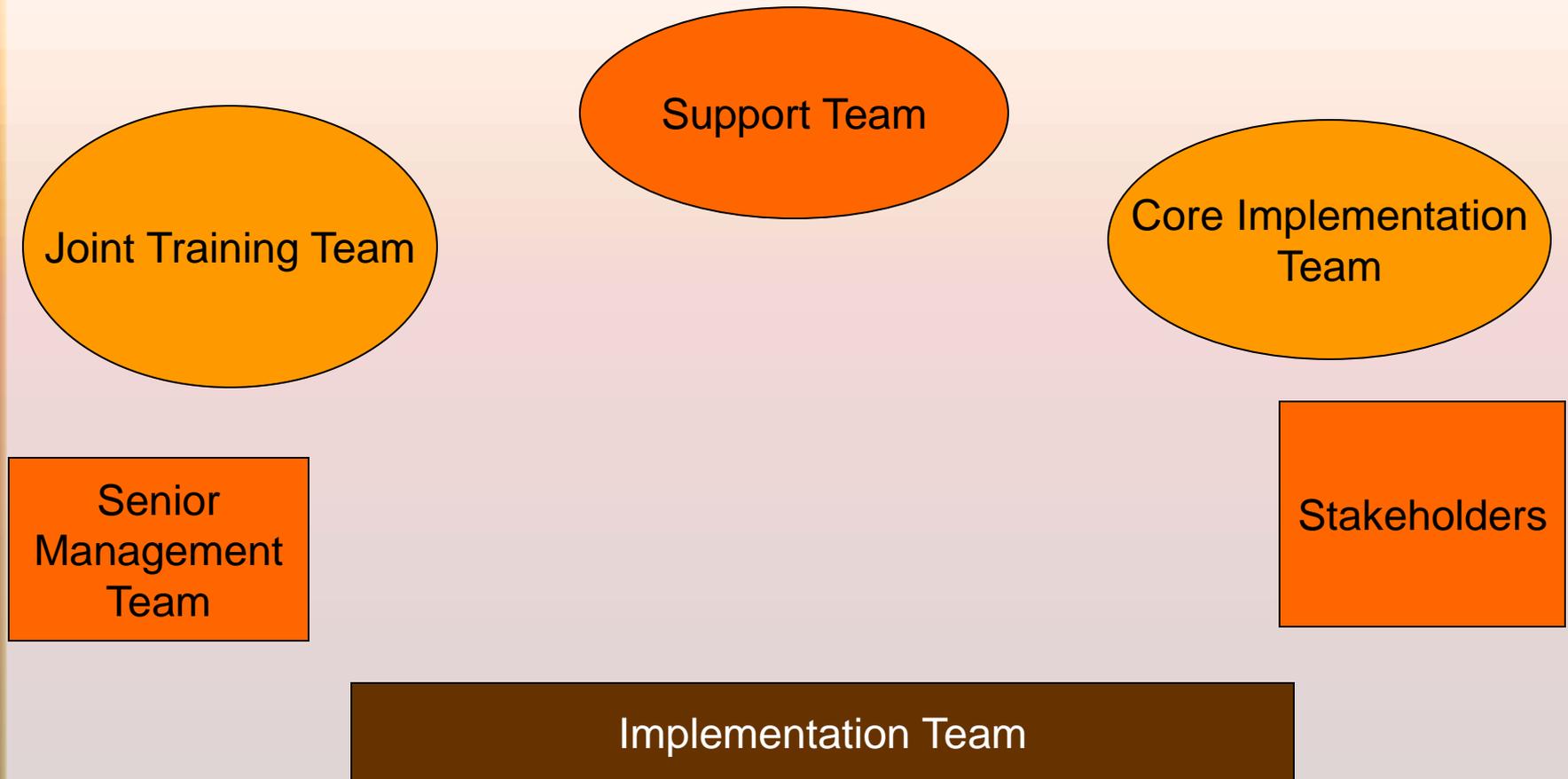
Develop Highly Functioning Teams

- Backbone to fostering a supportive environment
 - Key to growing and retaining people
- Created two organizational structures
 - Traditional structure - hierarchical
 - Functional structure- supports teams and projects
- Use project management techniques

Develop High Functioning Teams

- These teams have allowed us to leverage more resources
- Add end users or super users to teams
 - They have become our bench strength for our core implementation team
- Empower teams
 - Engage teams in setting goals
- Meet weekly (commitment has paid off)

Teams, Teams, Teams



Establish Clear Channels of Communications

- What we are doing is unprecedented so it is important to communicate
- Implementation Team has access to decision makers
- Communicate to end users
 - Help desks
 - Discipline meetings
 - Employee newsletters
 - All staff e-mails

Support Core Implementation Team

- Give everyone tools to do their job
- Engage them in setting clear goals
- Have reasonable expectations - give them enough time, people and resources
- Check in often
 - Developmental meetings with people in key support roles

Accomplishments

- Implement eClinical Works EMR/PM (2009)
- Developed systems and process to maintain (2010)
- EMR/PM Implementations at 4 new sites since our original implementation (2010 and 2011)
- Implementation of e-prescribing (2011)



Thank you!

Angela Duncan Diop, ND
Unity Health Care Inc
adiop@unityhealthcare.org

Pitt Community College

**Region D Community College Consortia to Educate Health Information Technology
Professionals in Health Care Program**

Health IT Workforce Training Programs for the Safety Net Community

**“ Health information technology is the circulatory system for the vital
organs of health care.”**

**Dr. David Blumenthal
National Coordinator of HIT**

Historical Perspective:

The Electronic Health Record (EHR):

- In 2004, President Bush set a goal of Americans using an EHR by 2014
- His vision: doctors would be using EHR systems with interoperable standards
 - share lab results and images,
 - have computerized orders and prescription information
 - would include hospitals and other health facilities.

- January 8, 2009, President-elect Barack Obama called for all U.S. residents to have electronic health records within five years
 - "To improve the quality of our health care while lowering its costs, we will make the immediate investments necessary to ensure that within five years, all of America's medical records are computerized."
 - "This will cut waste, eliminate red tape and reduce the need to repeat expensive medical tests. But it won't just save billions of dollars and thousands of jobs, it will save lives by reducing the deadly but preventable medical errors that pervade our health care system."

American Recovery and Reinvestment Act of 2009

- As promised by President Obama:
 - as much as \$27 billion over ten years will be expended to support adoption of electronic health records (EHRs).
 - While there has been bipartisan support for EHR adoption for at least half a decade...
 - this is the first substantial commitment of federal resources to support adoption and help providers identify the key functions that will support improved care delivery.

Why Electronic Health Records

- Make a patient's health information readily available
- Bring a patient's total health information together in one place – always current
 - Clinicians will know what drugs/treatments prescribed by another provider, better coordinated care
- Better follow-up information for patients
 - Instructions, information and reminders for the patient can be provided
- Improve patient and provider convenience
 - patients can have their prescriptions ordered and ready before they leave the provider's office, and insurance claims can be filed immediately

Why Electronic Health Records

- Links information with patient computers for additional resources - patients more informed and involved.
- Improve safety – brings all of a patient’s information together and automatically identifies potential safety issues
 - EHRs don’t just “contain” or transmit information, they also compute with it

Example: a qualified EHR will not just be a record of a patient’s medications or allergies, - will automatically check for problems and alert the clinician to potential conflicts. In care

Why Electronic Health Records

- Deliver more information in more directions, while reducing “paperwork” time for providers
 - for example, EHRs can be programmed for delivery of information to be shared with public health agencies or quality measurement
- Improve privacy and security
 - with proper training and effective policies, electronic records can be more secure than paper
- Reduce costs
 - through reduced paperwork, improved safety, reduced duplication of testing, and most of all improved health through the delivery of more effective health care

For Providers: Health Information Technology for Economic and Clinical Health Act (HITECH)

- Federal incentive payments for doctors and hospitals when EHRs adopted and demonstrate meaningful use (ways that can improve quality, safety and effectiveness of care)
 - Eligible professionals can receive as much as \$44,000 over a five-year period through Medicare. For Medicaid, eligible professionals can receive as much as \$63,750 over six years.
 - Later disincentives will exist if the EHR not used

How to Accomplish??

- To be a certified EHR, it has to include
 - e-prescribing,
 - it has to be able to exchange information
 - it has to be able to report quality data
- Workforce needed
 - 50-80K positions expected
 - Current HIT graduates can't fill expected gaps



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Community College Consortia to Educate Health IT Professionals

Curriculum Development Centers Program

Program of Assistance for University-Based Training

Competency Examination Program

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Get the Facts about Health IT Workforce Development Program

Health information technology professionals are in demand.

As the nation moves toward a more technologically advanced health care system, providers are going to need highly skilled health IT experts to support them in the adoption and meaningful use of electronic health records.

To help address this growing demand, the Office of the National Coordinator for Health Information Technology (ONC) has funded the Health IT Workforce Development Program. The goal is to train a new workforce of health IT professionals who will be ready to help providers implement electronic health records to improve health care quality, safety, and cost-effectiveness.

About the Workforce Development Program

ONC has awarded \$84 million in funding for the following Health IT Workforce Development Program activities:

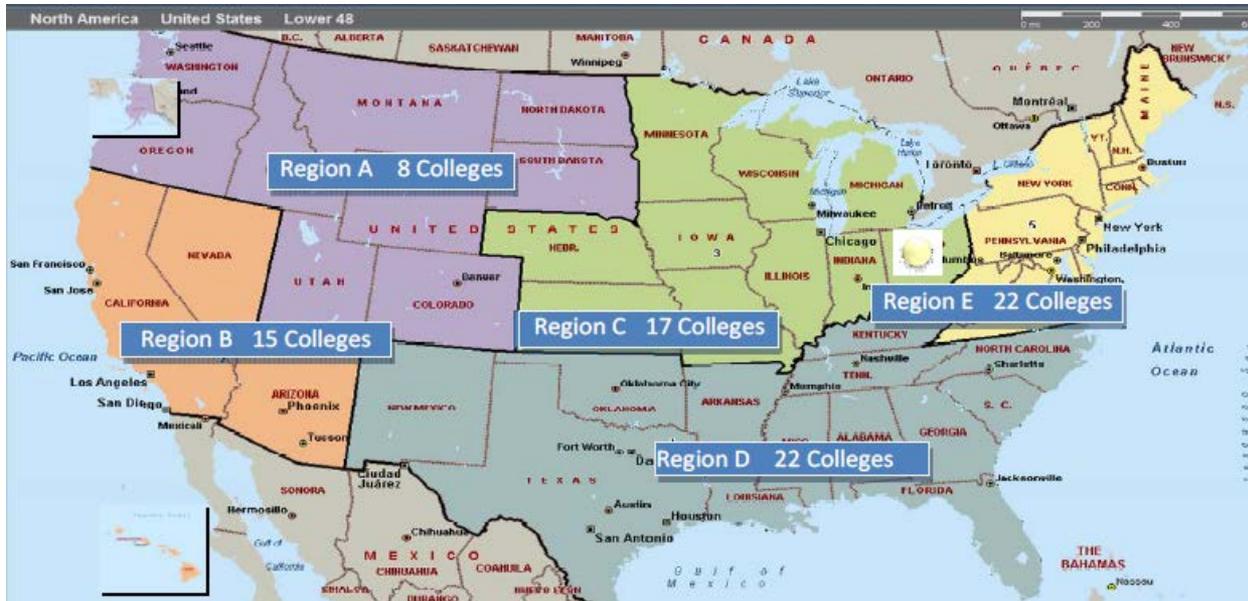
- **Community College Consortia to Educate Health Information Technology Professionals:** Five regional groups of more than 70 community colleges in all 50 states have \$36 million in grants to develop or improve non-degree health IT training programs that can be completed in six months or less. The programs are designed for professionals with an IT or health care background. The funded community colleges will help train more than 10,500 new health IT professionals by 2012.
- **Program of Assistance for University-Based Training:** Nine grants totaling \$32 million have been awarded to colleges and universities to help establish or expand health IT training

Community College Consortia

– Health Information Technology for Economic and Clinical Health (HITECH) Act

- funded through April 2, 2012 - five regional groups – 70+ community colleges
i\$36 million first year (\$34 anticipated for second year – total of \$70 million)
 - Pitt Community College: First year: \$10.9 million /Second year: \$9 7 million
- Purpose: develop/improve non-degree health IT training programs to be able to be completed in six months or less
 - Train more than 10,500 new health IT professionals annually
 - Support providers as they transition to electronic health records
 - Students must have prior medical/clinical or IT education/experience
 - **TUITION ASSISTANCE** – until federal funds are depleted– from minimal charge to total reimbursement
 - **JOB PLACEMENT ASSISTANCE**
 - 50,000+ new jobs expected
 - **NATIONAL COMPETENCY EXAMINATION- free to first 27,500**

Community College Participants and Populations by US Regions



Population and Target Grant Community Colleges by Region

Region	A	B	C	D	E	Total
Census Population	23,171,056	47,460,504	65,115,773	97,020,826	75,669,343	308,437,502
Percentage of National Population	8%	15%	21%	31%	25%	100%
Minimum Students to be Trained Annually	750	1,650	2,250	3,300	2,550	10,500
Target Number of Member Community Colleges	5-8	11-14	13-18	16-22	17-23	70
Funding Allocation	\$6,200,000	\$10,750,000	\$14,650,000	\$21,150,000	\$17,250,000	\$70,000,000

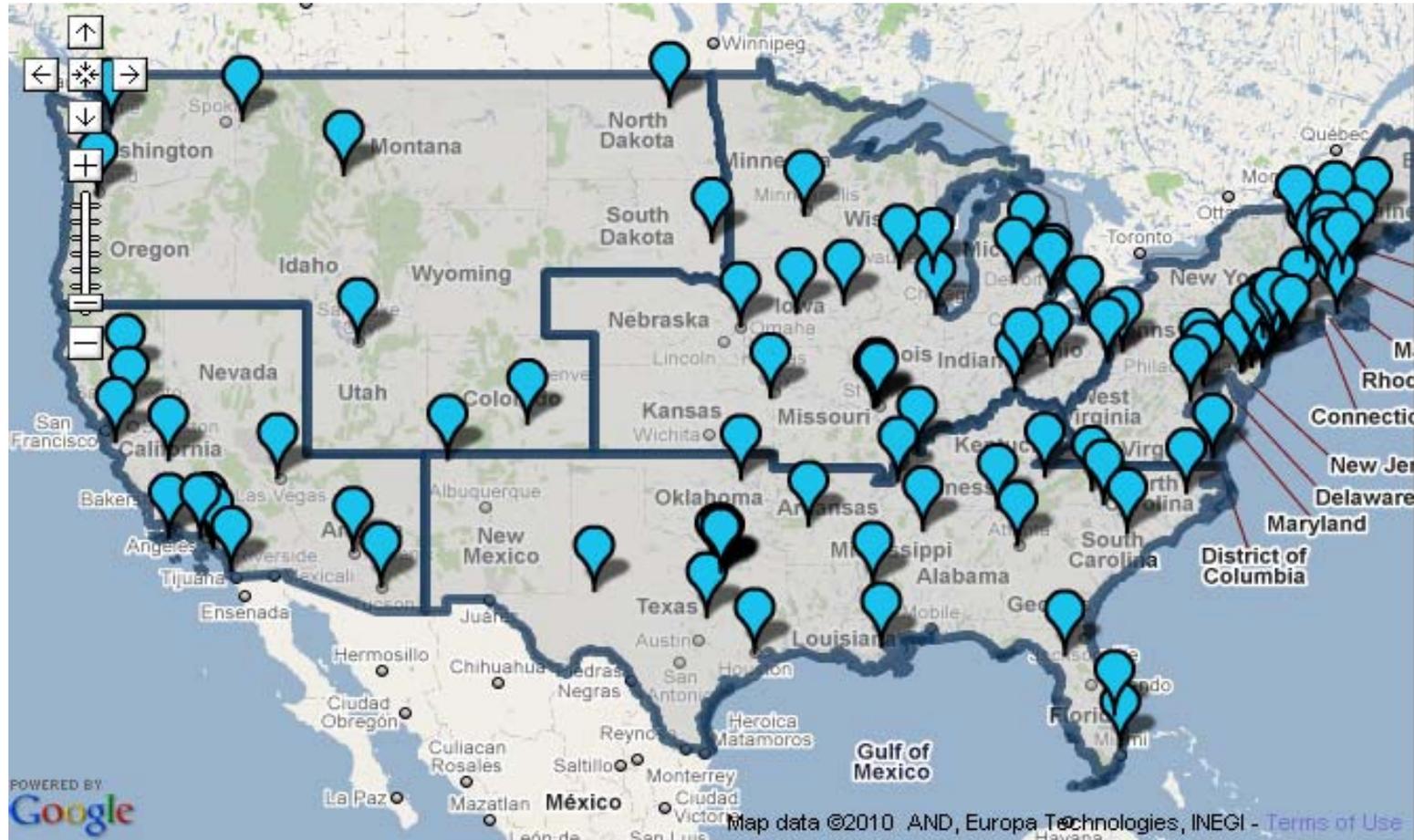
Regional Community College Consortia Awards

Region	A	B	C	D	E
Lead Awardee of Consortium	Bellevue College	Los Rios Community College District	Cuyahoga Community College District	Pitt Community College	Tidewater Community College
Year 1 Funding Allocation	\$3,364,798	\$5,435,587	\$7,531,403	\$10,901,009	\$8,492,793
Year 2 Funding Allocation	\$2,798,463	\$5,182,328	\$7,116,493	\$9,669,892	\$7,524,815
Contact	Patricia Dombrowski www.nwhit.org	Walter D. DiMantova www.wrhit.org	Norma Morganti www.mwhit.org	Kay Gooding	Gretchen LeFever

HITECH Workforce Training

Training Locations

<http://healthit.hhs.gov/communitycollege>



HITECH Workforce Training

Participating Colleges

HITECH Workforce Training

Workforce Roles

- Mobile Adoption Support Positions: will support implementation at locations for a period of time and move to new locations
 - Practice Workflow and Information Management Redesign Specialist
 - Clinician/Practitioner Consultant
 - Implementation Support Specialist
 - Implementation Manager

- Permanent Staff of Health Care Delivery and Public Health Sites
 - Technical/Software Support Staff
 - Trainer

Practice Workflow and Information Management Redesign Specialist

- Workers assist in reorganizing the work of a provider to take full advantage of the features of health IT in pursuit of meaningful use of health IT to improve health and care.
- Suggested Background
 - Individuals in this role may have backgrounds in health care (for example, as a practice administrator) or in information technology, but are not licensed clinical professionals

Clinician/Practitioner Consultant

- Role is similar to the “Practice Workflow and Information Management Redesign Specialists plus this role adds the background and experience of a professional licensed to provide clinical care or a public health professional.
- Suggested Background
 - Individuals in this role will be licensed clinical or public health professionals; or in the case of public health, they bring into the role significant experience in federal, state or local public health..

Implementation Support Specialist

- Workers provide on-site user support before and during implementation of health IT systems. Provide support services, beyond those provided by the vendor, to assure the technology functions properly and is configured to meet the needs of the redesigned practice workflow.
- Suggested Background
 - Individuals training for this role will have a general background in information technology or health information management.

Implementation Manager

- Workers provide on-site management of mobile adoption support teams before and during implementation of health IT systems in clinical and public health settings.
- Suggested Background
 - Workers must have experience in health and/or IT environments as well as some administrative or managerial experience.

Technical/Software Support Staff

- Workers support on an ongoing basis the technology deployed and maintain systems including patching and upgrading of software. Provide one-on-one support, in a traditional “help desk” model, to individual users.
- Suggested Background
 - Individuals for this role will have a general background in information technology or health information management.

Trainer

- Workers design and deliver training programs, using adult learning principles, to employees in clinical and public health settings.
- Suggested Background
 - The previous background includes experience as a health professional, health information management specialist, or medical librarian. Experience as a trainer in the classroom is also desired.

Five Curriculum Development Centers Prepared the Curriculum

- Oregon Health & Science University
- University of Alabama at Birmingham
- Johns Hopkins University
- Columbia University
- Duke University

Health IT Workforce Curriculum Components

- Introduction to Health Care and Public Health in the U.S.
- The Culture of Health Care
- Terminology in Health Care and Public Health Settings
- Introduction to Information and Computer Science
- History of Health Information Technology in the U.S.
- Health Management Information Systems
- Working with Health IT Systems
- Installation and Maintenance of Health IT Systems
- Networking and Health Information Exchange

Components, con't.

- Fundamentals of Health Workflow Process Analysis & Redesign
- Configuring EHRs
- Quality Improvement
- Public Health IT
- Special Topics Course on Vendor-Specific Systems
- Usability and Human Factors
- Professionalism/Customer Service in the Health Environment
- Working in Teams
- Planning, Management and Leadership for Health IT
- Introduction to Project Management
- Training and Instructional Design

Reaching out: Enrollment Focus

- Rural and critical access hospitals; rural health providers; CHCs, etc.
- Hispanics/Latinos
 - LISTA (Latino in Information Sciences and Technology Association)
 - Minority based radio/TV
- Senior citizens
- Active military, veterans & dependents
- African Americans
- Native Americans
- Underemployed & unemployed

Want to learn more?

- [http://healthit.hhs.gov/
communitycollege](http://healthit.hhs.gov/communitycollege)

Tuition Assistance

Job Placement Assistance

**National competency
exam**

**50-80K new jobs
expected!!!**

Many programs online



Leadership for addressing the Workforce Shortage.....

Northern Virginia Community College





**Student centered.
Community focused.**

Northern Virginia Community College

www.nvcc.vccs.edu
703-323-3000



Northern Virginia Community College
www.nvcc.edu

Northern Virginia Community College

Over 73,000 students enrolled annually in credit courses





- Registered Nursing
- Respiratory Therapy
- Radiographic Technology
- Dental Hygiene

NOVA: The Region's Leading Provider of Trained Healthcare Workers

- Health Information Management
- Physical Therapist Assistant
- Medical Laboratory Technology
- Emergency Medical Technician
- Occupational Therapy Assistant
(begins Fall 2012)





- Law Enforcement
- Fire Administration
- Environmental Safety
- Cyber Security

NOVA Provides Front-Line Training to First Responders

- Power Grid Security
- Emergency Response Management
- Food Safety
- HazMat



Healthcare Certificate Programs

- Computerized Tomography
- Clinical Coding Specialist
- Mammography
- Phlebotomy
- Basic Emergency Medical Technician
- EMT-I
- Magnetic Resonance Imaging
- Radiation Oncology

Pre-Employment Training Programs

- Nursing Assistant
- Medical Office Assistant
- Dental X-ray Safety Seminar
- Pharmacy Technician
- Dental Chair Side Assistant
- Dental Administration/Billing
- Medical Billing and Coding
- Medical Terminology
- Medical Office Specialist
- ESL for Healthcare
- Certified Clinical Coding Apprentice (CCA)
- Certified Professional Apprentice –Outpatient
- Administrative Assistant (Computer Software)
- Introduction to Electronic Health Records

Career Enhancement Programs

- Limited Radiography
- Phlebotomy for Healthcare Professional
- I.V. Therapy
- Physical Assessment
- EKG Review
- Legal Nurse Consultant
- Registered Nurse Return to Practice
- Dental X-ray Safety Seminar
- Spanish for Nurses
- American Heart Association Classes and Testing
- Physical Assessment

NoVaHealthFORCE

- A coalition of private sector, business, government, community, healthcare, and educational leaders
- Mission: establish a long-term, *business-driven*, sustainable strategy to address the Northern Virginia healthcare worker shortage



NoVaHealthFORCE

**PricewaterhouseCoopers' Study
of the
Northern Virginia
Healthcare Workforce Shortage
Update January 2008**

In Northern Virginia, without intervention by 2020:

- There will be **17,651** Allied Health and Nursing workforce vacancies
- The Nursing and Allied Health workforce estimated FTE worker shortage is estimated to grow to:

36%

These estimates do not consider impacts that may result from the Department of Defense Base Realignment (BRAC) initiatives

NoVaHealthFORCE Leadership in “Innovation” has resulted in:

- Recipient of ONC-HIT Grants
- Recipient of a Congressional Appropriation for HIM
- Collaboration with the Commonwealth’s Secretary of Technology
- Collaboration with GMU for the development of academic pathways in HIM
- Collaboration with the Northern Virginia Technology Council for the formation of a Health Technology Committee
- Establishment of Health Information Systems (HIS) Center of Excellence

NOVA has been a leader in developing a national model for addressing the healthcare workforce shortage:

- This model can be utilized for workforce development in other industries/regions
- The key is the synergy created by the alignment of all stakeholders brought together by the community college

Why are We here?



HIM Programs At NOVA

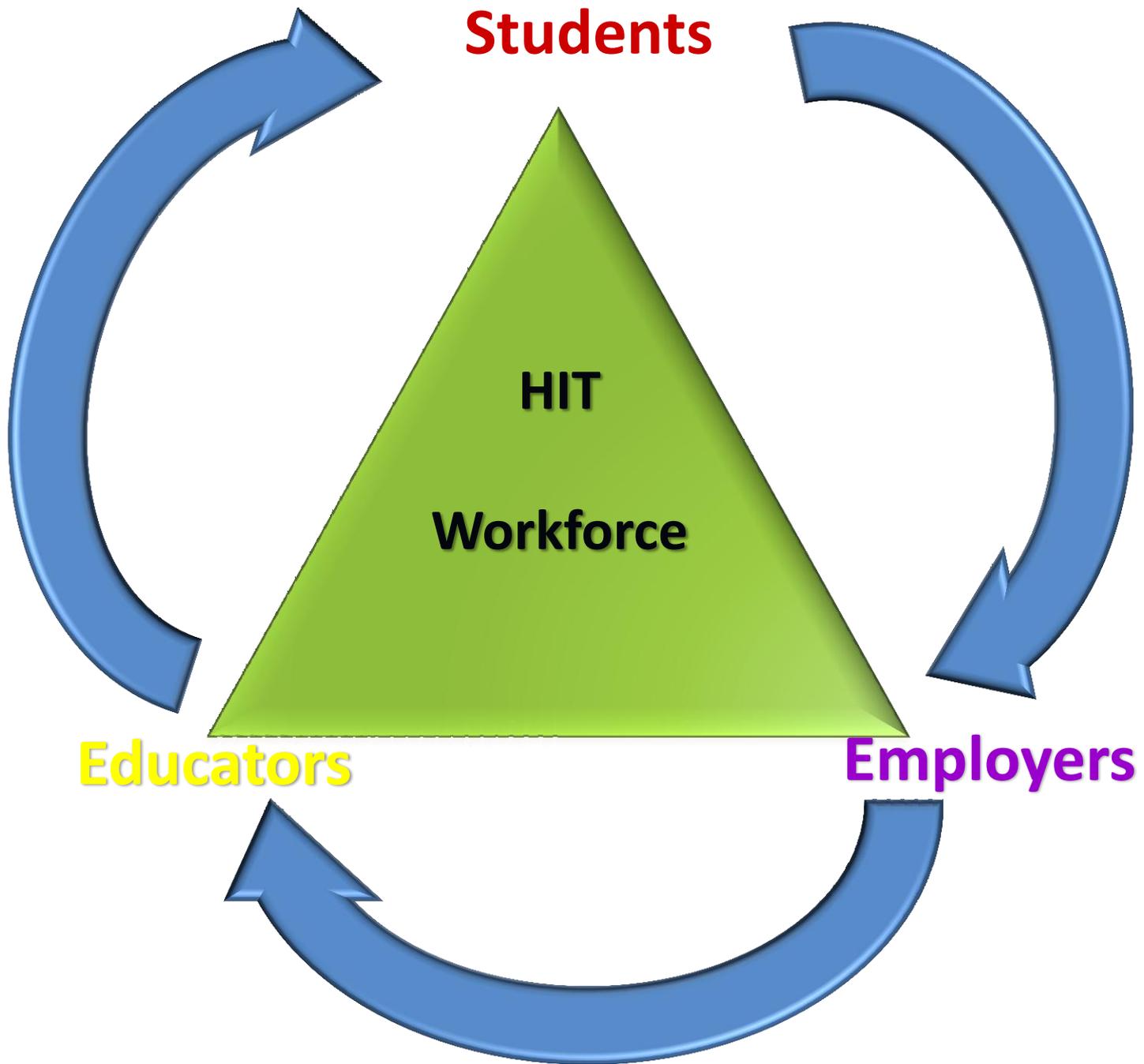
- Health Information Management (HIM)
 - Associate in Applied Science Degree in HIM – 2 years
 - Career Studies Certificate in Clinical Data Coding – 2 semesters (1 year)
 - ICD-10 Training

Community College Consortia

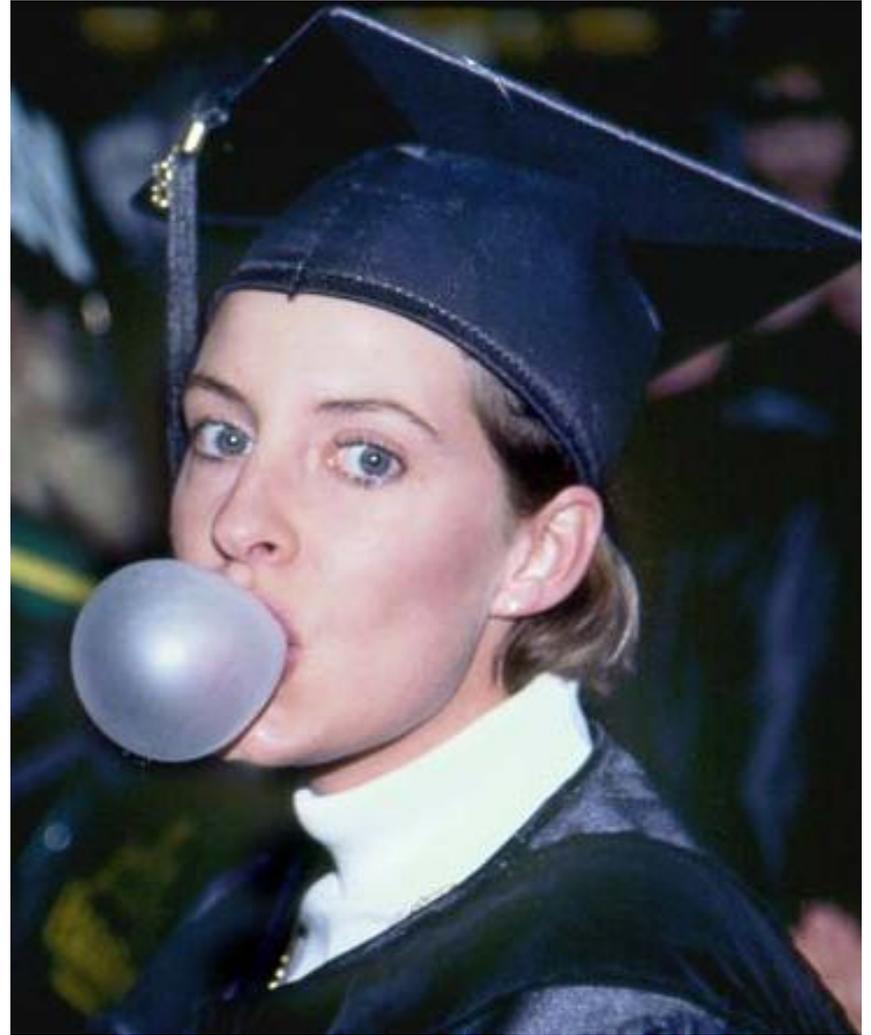
- ▶ Two-year project which began September 30, 2010
- ▶ Train 27,500 students nationwide
- ▶ 84 Community Colleges
- ▶ Create intensive, non-degree training programs that can be completed in 6 months or less)
- ▶ Training specific to 6 Health IT workforce roles:
 - **Practice workflow and information management redesign specialist**
 - **Clinician/practitioner consultant**
 - **Implementation support specialist**
 - **Implementation manager**
 - **Technical/software support staff**
 - **Trainer**

Competency Examination Program

- Support the development and initial administration of a set of HIT **competency** computer-based examinations
- Assess basic competency of individuals seeking competency in 1 of the 6 HIT professional roles
- Awarded 2-year cooperative agreement to Northern Virginia Community College
- ONC expects contents to be validated with industry and employer groups.
- To establish the examinations as part of a national workforce program
- Examinations begin May 2011



Questions?



- **ONC Health IT Workforce Training Website**
 - <http://healthit.hhs.gov>
- **HRSA/Indian Health Service Dual Grantees Health IT Workforce Training Info**
 - American Indian Higher Education Consortium (<http://www.aihec.org>), Al Kuslikis, Director (AKuslikis@aihec.org)
 - NIHB-REC Director (<http://www.NIHB.org>), Tom Kauley (TKauley@nihb.org)
- **American Medical Information Association's 10x10 courses**
 - <https://www.amia.org/10x10>
- **April Launch of HRSA Health IT Workforce Portal**