



rchn
community health foundation



INNOVATIVE CHC APPROACHES TO ENTRY LEVEL WORKFORCE TRAINING

Introductions:

- Welcome and Introduction to the RCHN Community Health Foundation Webcast Series by
- *Feygele Jacobs, MPH, MS*
EVP/Chief Operating Officer
RCHN Community Health Foundation



Expert Commentary:

- *Peter Shin Ph.D., M.P.H.*

Associate Professor

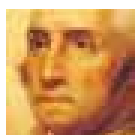
Director

Geiger Gibson Program (GGP) in Community
Health Policy

Research Director, Geiger/Gibson RCHN CHF
Research Collaborative

Department of Health Policy

George Washington University School of
Public Health and Health Services



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SCHOOL OF PUBLIC HEALTH
AND HEALTH SERVICES

Featured Speaker:

- ***Jessica Payton Hunt***

Director

North Central AHEC

Project Director

Aaron E. Henry Community Health Services Center

Clarksdale, Mississippi



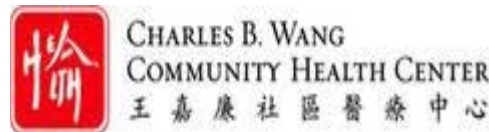
Featured Speaker:

- **Betty K. Cheng, LCSW**

Chief Operating Officer

Charles B Wang Community Health Center

New York, New York



Featured Speaker:

- **Jennifer McBee**

Director of Training & Development and

Director Medical Records and Referrals

Penobscot Community Health Care

Bangor, Maine



Featured Speaker:

Maile Robidoux Castillo, MBA

Human Resources Director

Seattle Indian Health Board

Seattle, Washington



Overview of CHCs

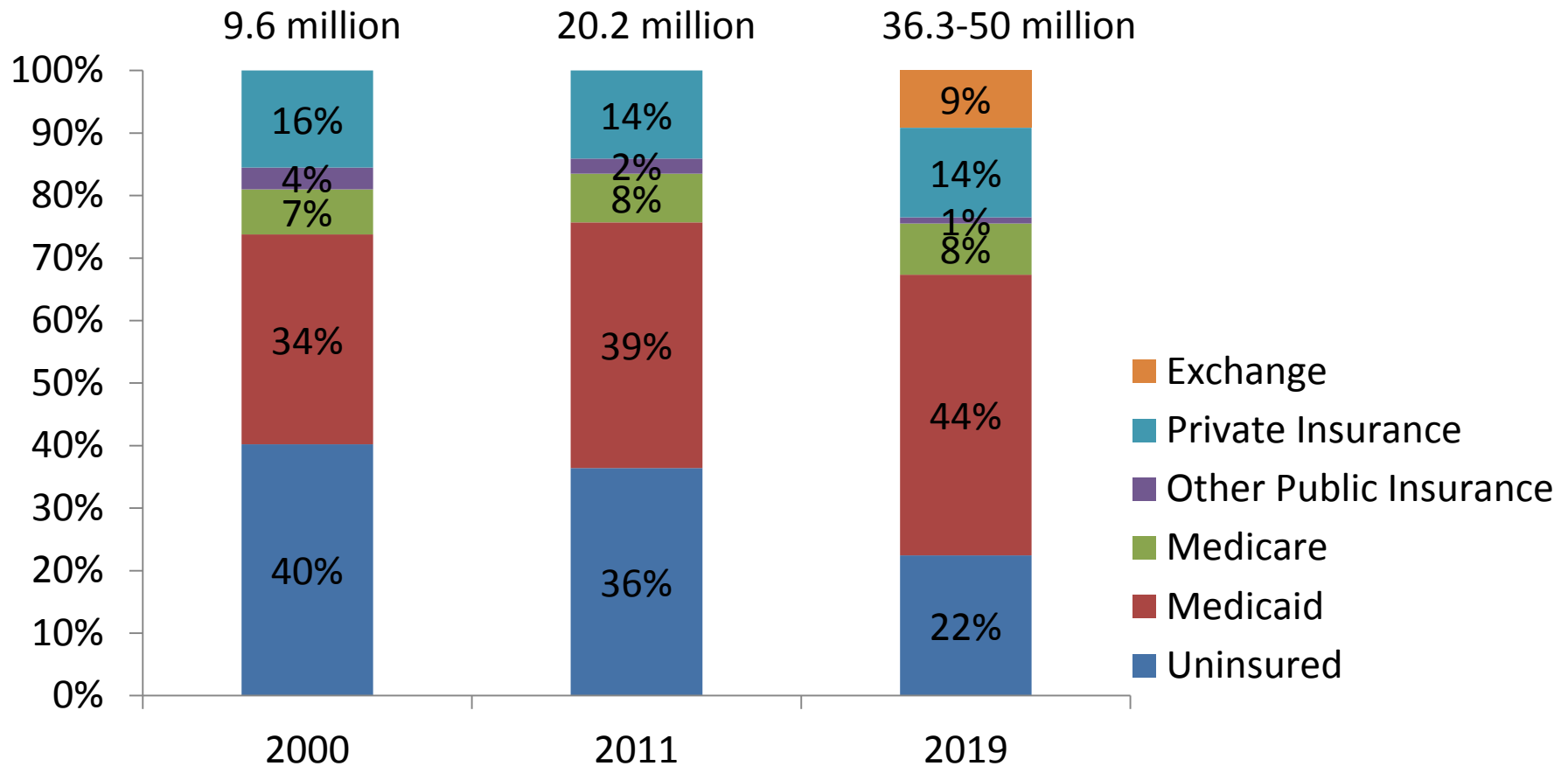
Peter Shin, PhD

April 16, 2013

School of Public Health
& Health Services

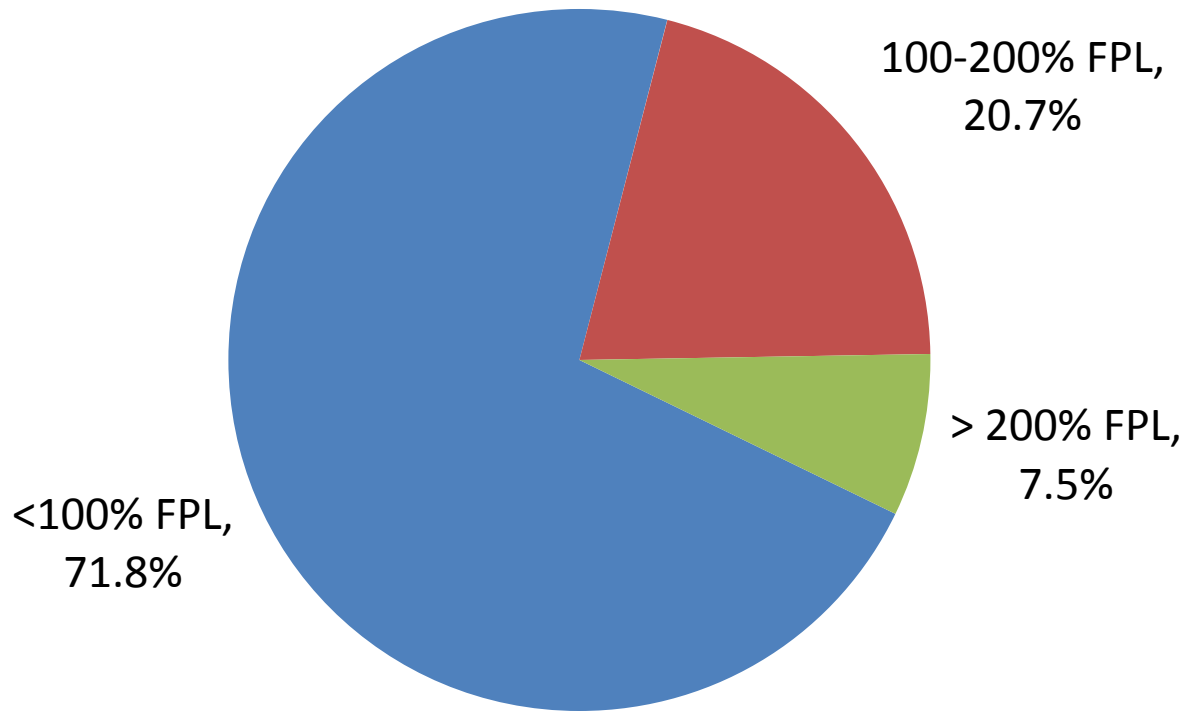
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Number and Distribution of Community Health Center Patients by Insurance Status (2000-2019)



Sources: Bureau of Primary Health Care. (2001). *Uniform Data System (UDS) Report 2000*. Washington, DC: Health Resources and Services Administration, US Department of Health and Human Services; Bureau of Primary Health Care. (2012). *Uniform Data System (UDS) Calendar Year 2011: UDS Reporting Instructions for Section 330 Grantee*. Washington, DC: Health Resources and Services Administration, US Department of Health and Human Services. Ku et al. (2010). Strengthening Primary Care to Bend the Cost Curve: The Expansion of Community Health Centers Through Health Reform *Geiger Gibson/RCHN Community Health Foundation Research Collaborative*, Issue No. 19. http://sphhs.gwu.edu/departments/healthpolicy/dhp_publications/pub_uploads/dhpPublication_895A7FC0-5056-9D20-3DDB8A6567031078.pdf

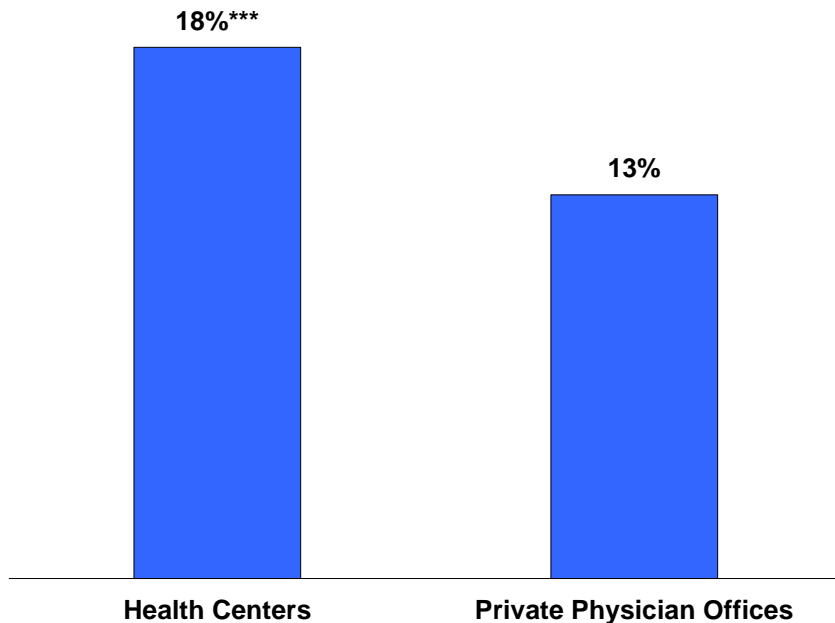
Income Profile of Community Health Center Patients (2011)



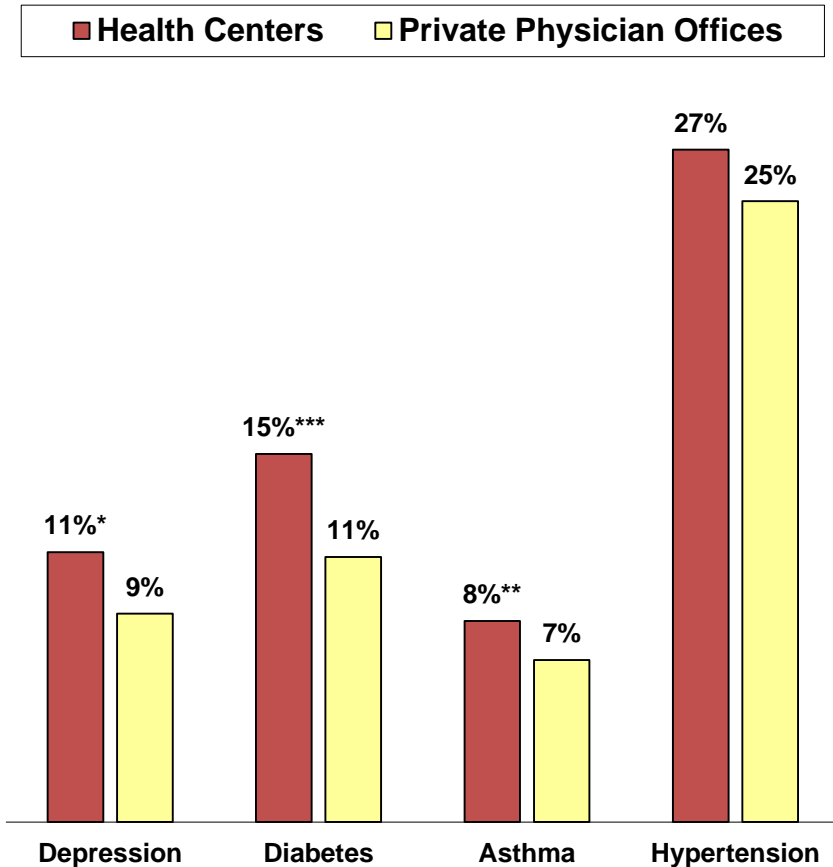
N=20.2 million patients

Physician Visits Involving Treatment of Chronic Conditions, Health Centers vs. Private Physician Offices (2007-2010)

Percent of Patient Visits Involving Common Chronic Conditions



Percent of Patient Visits Involving Specific Chronic Conditions

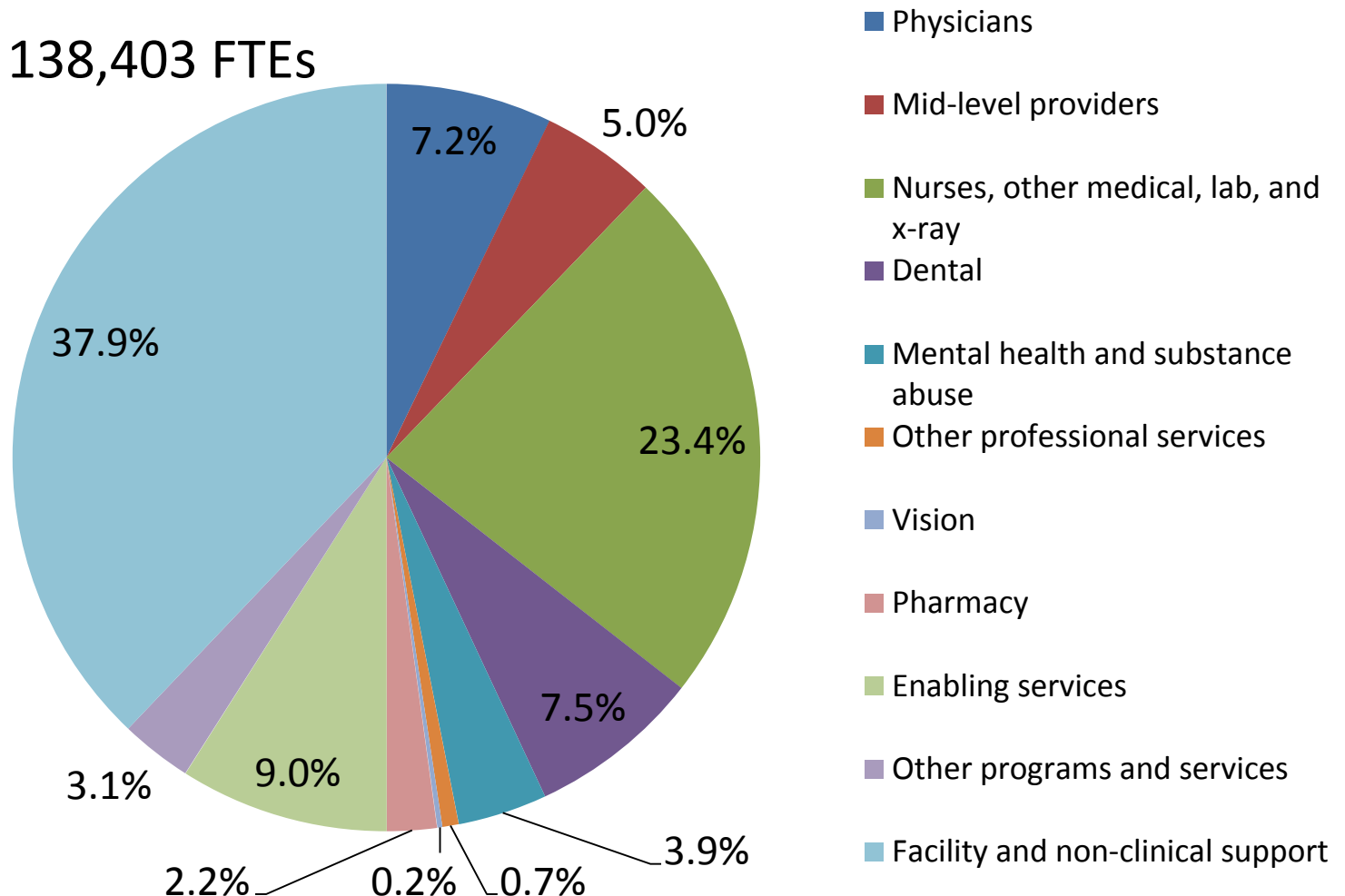


Notes: Estimates based on combined sample of visits to office-based physicians from National Ambulatory Medical Care Survey (NAMCS) for 2007-2010.
"Common chronic conditions" means primary diagnosis for visit is coded as hypertension, asthma, diabetes, heart disease, and selected psychotic conditions and other psychoses. Excludes "pre/post surgical" visits, visits to non-primary care physicians, and visits in which patient did not see a physician

Note: Statistical significance measured relative to value for private physician offices.
*** $p < .01$, ** $p < .05$, * $p < .10$

FTE Personnel at CHCs in 2011

Total 138,403 FTEs



Recommended Readings

- The States' Next Challenge — Securing Primary Care for Expanded Medicaid Populations. *N Engl J Med* 2011; 364:493-495
- Kaiser Family Foundation. *Community Health Centers in an Era of Health Reform: An Overview and Key Challenges to Health Center Growth*. (2013) <http://www.kff.org/uninsured/upload/8098-03.pdf>
- National Association of Community Health Centers, Robert Graham Center, The George Washington University School of Public Health and Health Services. *Access Transformed: Building a Primary Care Workforce for the 21st Century*. Bethesda, MD; 2008.
- RCHN CHF Request for Proposals on Health Center Entry-Level Workforce Recruitment and Retention Models 2012.
<http://www.rchnfoundation.org/images/FE/chain207siteType8/site176/client/RCHN%20CHF%20Workforce%20RFP%202012.pdf>



DELTA WORKFORCE INITIATIVE “CHARTING A NEW COURSE”

April 16, 2013

JESSICA HUNT, PROJECT DIRECTOR

Delta Workforce Initiative

Charting a New Course

Implementing initiatives to drive positive change in **recruitment and retention** of the workforce for the Mississippi Delta community health center market.




GOALS

- ▶ Goal # 1) Increase recruitment of people into healthcare educational tracks and careers by implementing a formalized mentoring program for middle, high school and junior college students that may become entry-level workers
- ▶ Goal # 2) To build internal health center capacity in human resources to help “train our own”.
- ▶ Goal # 3) Partnering with local educational institutions to teach on-site at health centers on work time to entry-level workers.



DWI Areas of Focus

- ▶ Recruitment
 - ▶ Education
 - ▶ Workplace Transition
 - ▶ Retention
 - ▶ Career Ladders
- 

Recruitment

High School Mentorship Program

- ▶ 49 students grades 9-12
- ▶ Mentorship Program
- ▶ 12 students Dual Enrolled for Fall semester 2012
- ▶ 16 students Dual Enrolled for Spring semester 2013
- ▶ 17 Seniors offered chance for Fast Track CNA program



Recruitment

Academy for Science, Reading and Mathematics

- ▶ 30 students grades 6-8
- ▶ Problem Solving for Better Health Workshop (PSBH) – First EVER conducted for 6-8 graders
- ▶ Wellness Study



Recruitment

Professionalization Training

- ▶ 5 College Students/Unemployed Participants
- ▶ 6 Week program
- ▶ Childcare and Transportation was provided
- ▶ Shadowing conducted in March/April 2013 in the career category of choice



Education

CHW Certification Training

- ▶ 5 Community Health Workers employed by the MSDH

Customer Service Training

- ▶ 80 Health Center staff

Coahoma Community College's Skill Tech Center

- ▶ Developing web-based training that can be completed by staff while on-site during working hours

Education

Training Videos

- ▶ Facility Maintenance- Focusing on safety and site maintenance
- ▶ Infection Control – Focusing on Infection Control standards

Workplace Transition

DWI Manual

- ▶ Extended Orientation
- ▶ Personal Development
- ▶ Professional Development and Skills training



Retention

Employee and Future Employee Input

- ▶ University of Mississippi Center for Population Studies
 - Written surveys
 - Focus groups
 - Interviews
- ▶ AEH developing an Incentive Program
- ▶ AEH developed Recognition tool using the company Newsletter



Career Ladders

Career Ladder and Career Pathway

- ▶ Assist in development of incentive program and upward mobility goals
- ▶ Educational guidance for staff
- ▶ HR Coalition will create an implementation plan to be introduced to the MPHCA board
- ▶ Career Ladder from CNA to CHW



Workplace Transition

DWI Manual

- ▶ Extended Orientation
- ▶ Personal Development
- ▶ Professional Development and Skills training



RCHN Workforce Training Program

Betty Cheng, LCSW

Chief Operating Officer

Charles B. Wang Community Health Center

April 16, 2013



CHARLES B. WANG
COMMUNITY HEALTH CENTER
王嘉廉社區醫療中心

Goals of the Training Program

- Improve staff and patient satisfaction
- Create a peer-learning and team-building working environment among staff
- Strengthen mid-level managers' skills to support, encourage, and reinforce training for staff



Program Design

In January 2012

**The Workforce Training Planning Committee
was established**

The committee members consist of Mid-levels managers from Human Resources, Nursing, Unit Management, Information Technology, Health Education and Research & Evaluation



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Training Planning Committee

Committee's responsibilities:

- ❑ Identify health center staff experts to create online training modules
- ❑ Make recommendations on program design and training implementation
- ❑ Provide input and advice on training program curriculum development



Program Design

Training program components:

■ Online Training Modules

- Develop culturally and linguistically competent online training modules for orientations and career advancement training

■ Mid-level Management Training Program

- Provide a mentoring training program for mid-level management to improve work-based learning environment and on-the-job-training

■ “Train-the-Trainer”: Peer Champions

- Implement a “train-the-trainer” program for a select cohort of experienced entry-level staff to become peer champions who will encourage and support staff to improve their job skills through online learning modules



Online Training

Online training platform development:

- Identified potential software providers
- Evaluated the possibility of using in-house expertise
- Compared the benefits and limitations of both options
- Created online training platform using in-house capabilities



Online Training Modules

Five core areas:

- History and Mission of CBWCHC
- NYS Healthcare System in a Glance
- Meaningful Use of EMR
- Patient Interactions
- NYS DOH Required In-service Training



Online Training Modules

Development of training modules:

- ❑ Modules was created by in-house experts
- ❑ Draft of the training materials were reviewed and refined by the Workforce Training Planning Committee
- ❑ Reviewed, revised and translated the patient interaction scripts into Mandarin
- ❑ Filmed and added English and Chinese subtitles to the videos
- ❑ Pilot tested by peer champions
- ❑ Collected comments and suggestions from peer champions and make modifications



Online Training Modules

Training method:

- ❑ One full day training
- ❑ Online modules
- ❑ Video of real case-scenarios with group discussion
- ❑ Multiple choice tests with immediate notification of scores and feedbacks
- ❑ Individual support from training manager



Online Training Outcome

- 129 frontline staff completed training
 - Receptionists
 - Medical/dental assistants
 - Family health workers
 - Health educators



Online Training Outcome

- Multiple choice tests result showed
 - 88% of trainees passed the tests in their first attempt
- In the post-survey, the respondents found
 - the training was relevant to their job responsibilities
 - the videos on patient interaction help them to improve patient visit experience and customer service
 - the training helps to refresh their knowledge

“The video helps me to see how sometimes one can forget about the attitude or tone of voice that is presented to a patient”



Online Training Outcome

- In the post-training survey, respondents suggested to
 - ❑ provide more case studies, scenarios, examples
 - ❑ provide more training
 - ❑ provide them with a copy of the training materials so they are able to review topics and materials as needed



“Train-the-Trainer”: Peer Champions

■ Program rationale

- ❑ Develop experienced frontline staff to be peer champions
- ❑ Train peer champions to become active motivator and competent facilitators for the online training program

■ Method

- ❑ Identified core group of 9 experienced frontline staff
- ❑ Pilot tested the online training modules
- ❑ Peer champions provided feedback and suggestions to make the materials easier to understand



“Train-the-Trainer”: Peer Champions Outcome

From the facilitated discussion findings, peer champions

- enjoyed contributing their feedback on training materials
- felt it was important to them that their feedback was valued
- suggested providing more training on how to be a peer champion
- suggested allotting more time for peer champions to review training materials so they can give more thoughtful feedback.

“My feedback did help. The English literacy level in the final version had been lowered which makes it easier for my co-workers to understand.”



Mid-level Management Training Program

Program goal

- Strengthen the mid-level managers' skills and knowledge in creating an conducive environment for staff to provide quality care & services

Program focus

- Mentoring Relationships
- Supervision Skills
- Managerial Skills



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Mid-level Management Training Program

Method

- One full day training for three consecutive weeks in June
 - Provided by Community Health Worker Network of NYC
 - The core training approach was to challenge thought processes and introduce new paradigms
- Briefing sessions in July and August
 - For trainees to discuss how the training has been helpful in working with their frontline staff
 - Helped trainees to connect their learning to the Health Center's operations



Mid-level Management Training Program

Method

- Follow-up session in October
 - CHW NYC conducted a review session which included further applications of communication skills
- Scenario-based discussion group in November
 - Scenarios were given by trainees
 - Trainees participated and discussed their experiences



Mid-level Management Training Program Outcome

- 30 Mid-level Managers completed training
 - Nursing Managers
 - Assistant Head Nurses
 - Unit Managers
 - Facilities Manager
 - Human Resource Manager
 - Director of Information Technology
 - Health Information Manager
 - Coordinator of Health Education
 - Coordinator of Marketing Program
 - Associate / Assistant Administrator
 - Clinical Affair Associate



Mid-level Management Training Program Outcome

Trainee's feedback

- more aware and knowledgeable about what drives behaviors
- more sensitive to the thoughts and opinions of their staff
- more willing to understand the conflicts with their staff before reacting
- valued opportunities for peer learning and share experience with each other

“During case discussion, it provided an environment for staff to share and contribute ideas in problem solving. The session allowed staff to brainstorming ideas and we found it most useful.”



Online Training System

RCHN Home Page - Windows Internet Explorer

http://websiteserver/rchn/main_page.aspx

File Edit View Favorites Tools Help

★ Favorites RCHN Home Page

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RCHN Workforce Training Program

Welcome to RCHN Workforce Training Program 2012

Program Goals:

- Improve staff and patient satisfaction
- Staff retention
- Create a peer-learning and team building working environment among staff
- Strengthen mid-level managers' skills to support, encourage, and reinforce training for staff

Start

Online Training System

RCHN Online Courses - Windows Internet Explorer

http://webservers/rchn/onlinecourses.aspx

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Online Courses

*To start, please click on a course title.

- * [History and Mission of CBWCHC](#)
- * [Healthcare System](#)
- * [Patient-Centered Medical Home \(PCMH\)](#)
- * [Patient Interaction](#)
 - > [Scenario 1](#)
 - > [Scenario 2](#)
 - > [Scenario 3](#)
 - > [Scenario 4](#)
- * NYS DOH Required In-service Training
 - > [Advance Directives](#)
 - > [Domestic Violence](#)
 - > [Fire Safety](#)
 - > [HIPAA](#)
 - > [Infection Control](#)

Online Training System

History and Mission - Windows Internet Explorer

http://webservers/RCHN/history/history.aspx

File Edit View Favorites Tools Help

★ Favorites History and Mission

CBWCHC

History

Federal Qualified Health Center

Mission of CBWCHC

CBWCHC Services

Health Promotion Projects

Patient-Centered Medical Home

Quality of Care


Organization Values

Quiz


Exit

History

- Volunteers organized 1971 health fair to “bring the examination room to the community”
- About 2500 people received free health screening and education
- Volunteers escorted patients to hospitals and provided translation for follow-up care

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Slide 2 of 15



Online Training System



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Online Training System



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Online Training System

RCHN RESULTS - Windows Internet Explorer

http://websqlserver/RCHN/result.aspx

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NY Health Care System Result

No	Your Answer	Result
1	A	Incorrect
2	A	Correct
3	A	Incorrect
4	A	Incorrect
5	A	Incorrect
6	A	Correct
7	A	Incorrect
8	A	Correct
9	A	Incorrect
10	B	Correct

SCORE
40%

[Main Menu](#)
[Retest](#)
[Re-Train](#)

Online Training System

RCHN RESULTS - Windows Internet Explorer

http://webservqlserver/RCHN/result.aspx

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★ Favorites RCHN RESULTS

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RCHN Workforce Training Program

Home Online Courses My Score Reports

History and Mission Result

No	Your Answer	Result
1	C	Correct
2	C	Incorrect
3	A	Correct
4	A	Incorrect
5	C	Correct
6	A	Correct
7	B	Correct
8	D	Correct
9	D	Correct
10	C	Correct

SCORE
80%

[Main Menu](#)
[Retest](#)
[Re-Train](#)
[Review](#)

Online Training System


RCHN RESULTS - Windows Internet Explorer

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★ Favorites RCHN RESULTS

Page Safety Tools

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[Home](#) [Online Courses](#) [My Score](#) [Reports](#) **RCHN Workforce Training Program**

History and Mission Result

Question No	Correct Answer	Your Answer	Results
1	C	C	Correct
2	D	C	Incorrect
3	A	A	Correct
4	B	A	Incorrect
5	C	C	Correct
6	A	A	Correct
7	B	B	Correct
8	D	D	Correct
9	D	D	Correct
10	C	C	Correct

Final Score: 80%

[DONE](#)
[Main Menu](#)

No: 1

Question: When was the Charles B. Wang Community Health Center (CBWCHC), formerly known as the Chinatown Health Clinic, established?

Answer A: 1951

Answer B: 1961

Answer C: 1971

Answer D: 1981

Correct Answer: C

Online Training System

RCHN Scores - Windows Internet Explorer

http://websqlserver/RCHN/myscore.aspx

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Favorites RCHN Scores

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Home Online Courses My Score Reports CBWCHC Workforce Training Program

Scores

Quiz Name	Date Completed	Score
Scenario1	10/15/2012 12:04:39 PM	100%
History and Mission of CBWCHC	10/16/2012 9:43:37 AM	20%
Domestic Violence	10/19/2012 1:33:03 PM	90%
Scenario2	10/19/2012 1:53:56 PM	75%
Scenario2	10/19/2012 2:03:10 PM	88%
Advance Directives	10/19/2012 3:49:03 PM	100%
Scenario2	11/27/2012 2:02:06 PM	100%
Patient Interaction	12/14/2012 4:19:05 PM	33%
History and Mission of CBWCHC	3/14/2013 12:40:53 PM	20%
Scenario2	3/14/2013 1:03:29 PM	100%
NY Health Care System	3/20/2013 10:18:54 AM	40%
History and Mission of CBWCHC	3/20/2013 10:25:54 AM	80%
History and Mission of CBWCHC	4/5/2013 2:34:19 PM	70%
NY Health Care System	4/5/2013 2:35:29 PM	30%

Benefits of Online Training Modules

- Modules are available on the health center intranet for all staff
- Available for ongoing training of new frontline staff
- Some module materials are applicable for all levels of staff



Summary -- Lessons learned

- The training was a success
- Online training with group discussion is most applicable for our frontline staff
- More training for peer champions
- Online modules training for frontline staff was too intense, multiple sessions with less hours maybe more beneficial



Health Care

Entry-Level Workforce Training



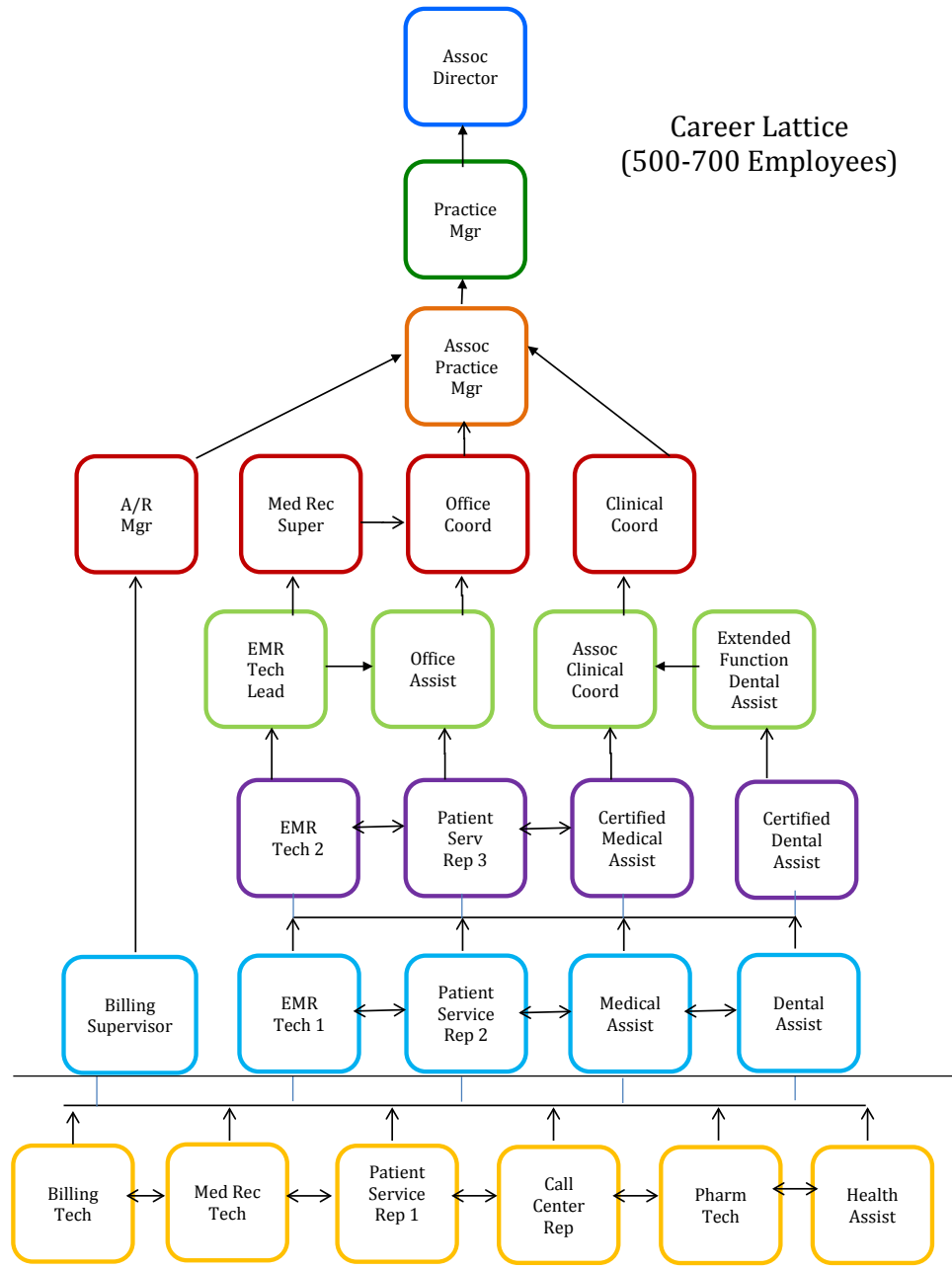
Jennifer McBee, Director of Training & Development

Concept

- **Design and implement a Training & Retention Program for Entry-Level Staff**
 - Patient Service Representatives
 - Health Assistants
 - Medical Records Staff
 - Referrals Staff
 - Pharmacy Technicians
 - Billing Clerks
 - Call Center Representatives

Outcomes

- Developed a formal career ladder that allows for upward and lateral mobility of entry-level staff
- Developed a Core Competency Curriculum
 - Advisory Council Comprised of 12 FQHC's
- Successfully trained 180+ PCHC employees
 - + Department of Labor Workforce Trainees – 36
- Developed a Train-the-Trainer Workshop for Maine's FQHC's
 - Produced a video of the Train-the-Trainer Workshop



Where we started

- Entry-Level Staff Turnover

- 23-31% (positions vary)

- Patient Service Representatives

- Greater than 23% error rate

- Job Satisfaction

- Last 2 surveys have indicated Employees want more training they feel is needed for them to be more successful in their job

- Entry-Level Employee Replacement Cost

- \$8,125

Core Competency Program

We believe that every employee should receive training in the basic, core competencies that all employees need to effectively perform their job.

Objectives and Results

➤ Objectives

- Better Job Satisfaction
- Better Skilled Workforce
- Less Turnover
- Less Errors

Objectives and Results

➤ Results

- Better Job Satisfaction
- 24 hours of Core Competency Training
- Turnover has declined slightly (inner movement)
- Error rate is now less than 2%

Our Program

- Classes are 10-15 participants
- Participants come from all of our 13 facilities one or two at a time
 - Employees seem pleased to cover for their co-workers knowing they will soon be participating
- Classes are held for 3 hours, once a week

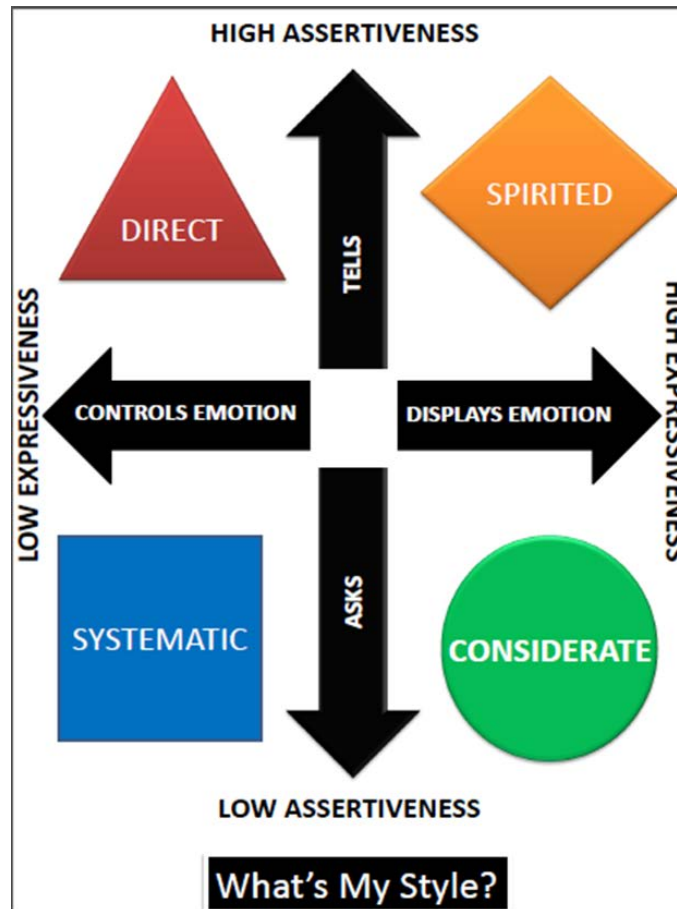
Core Competencies



Communication is Key

- Affects how we handle conflict
- Our ability to work as a team member
- Our time management
- Affects how we handle de-escalation

Communication is the first class



Personal Profile

- Participants complete a profile for each class
 - Communication
 - Team Building
 - Time Management
 - Conflict Strategies



Also included:

- **Mission and Vision**
 - Kenneth Schmidt, President and CEO
- **How to Succeed in the Workplace**
 - Sharon Swanson, COO and CIO
- **HIPAA Training**
 - Lori Dwyer, Esq.
- **Finance**
 - Kim Gonzales, CFP



Our Mission:

We provide access to Patient-Centered, high quality, comprehensive, integrated, health care services regardless of ability to pay.



PCHC Employee Comments

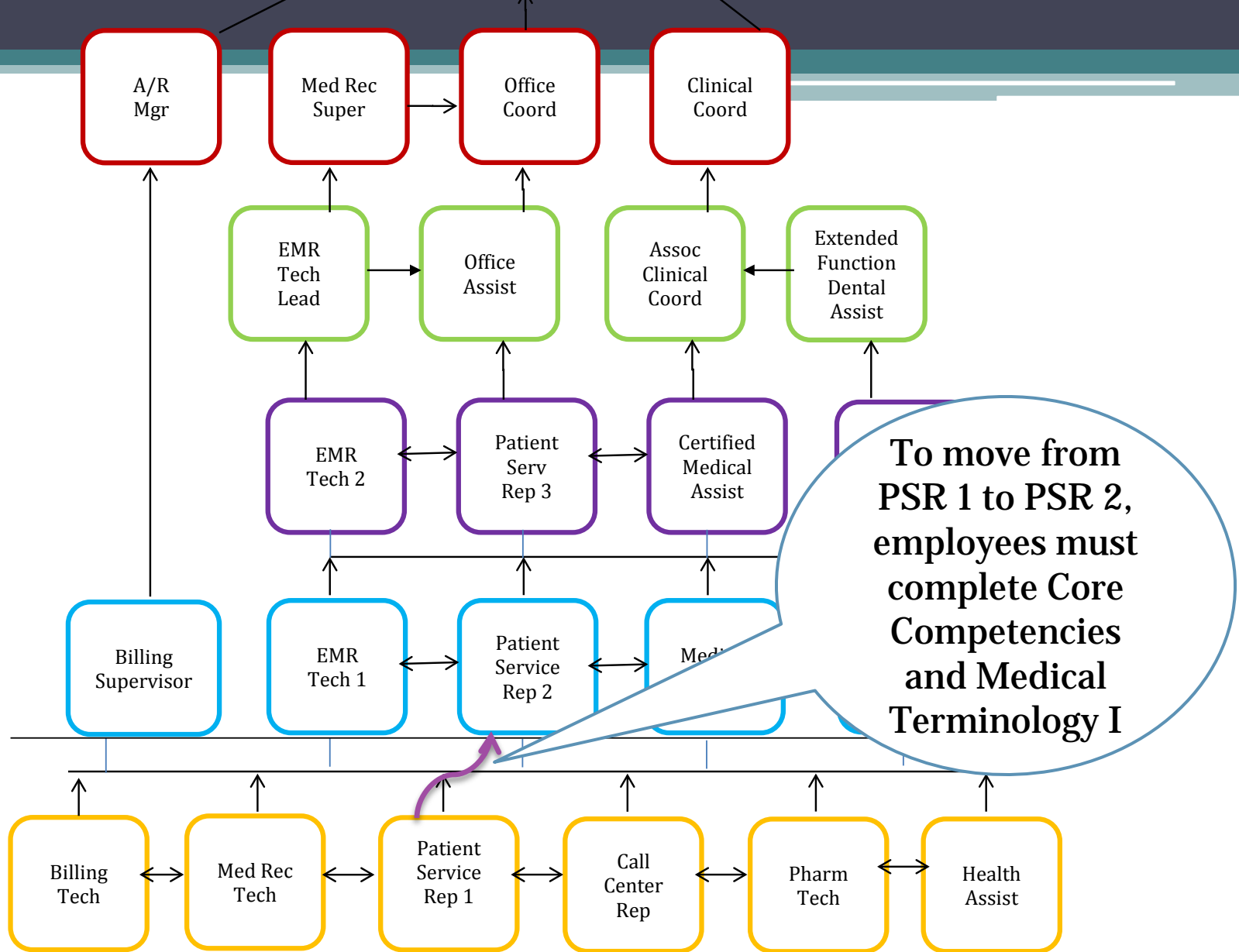
- *“Being efficient in your job is something that managers and administration value greatly.”*
- *“I feel valued as an employee of PCHC.”*
- *“Time Management helped me understand that you can get a lot more done if you plan your day according to the importance of the job you are doing that day.”*
- *“The core competency program was a great way to think more about teamwork and how to communicate better.”*

PCHC Employee Comments

- *92% of Participants found the training “extremely” useful and stated the training will help them perform their daily tasks with more confidence.*
- **I think the core competency program was:**
“Very informational. It was nice to be pulled away from your every day routine to see the big picture that you are involved with and how what you do every day effects our mission. “

Other Training Opportunities at PCHC

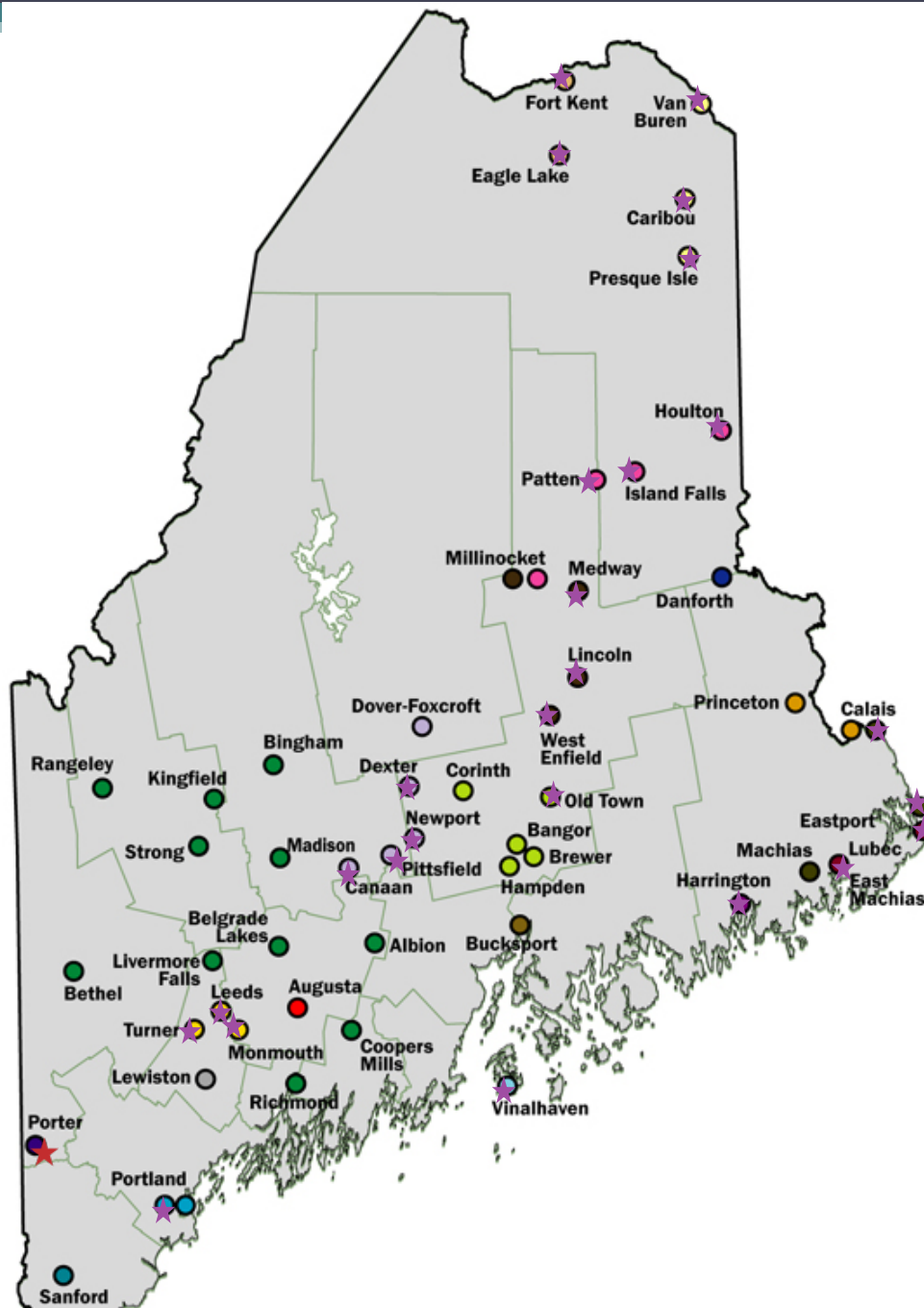
- Medical Terminology I
- Dental Terminology I
- Microsoft Office 2010 and 2013
 - Word
 - Excel
 - PowerPoint
- Certified Professional Coding
 - Anatomy & Physiology
 - Medical Terminology II
- Supervisor/Leadership 101



Train-the-Trainer Workshop

- 13 FQHC's from all over the state attended
- 27 Participants
- Many had served on the Advisory Committee

FQHC's Represented



Maine FQHC's Train-the-Trainer Workshop

- Participants received
 - Facilitator's Guide for the four Main Competencies
 - 50 Customer Service Activities
 - 50 Communication Skills Activities
 - 1 Medical Terminology 1 textbook



Comments from T³ Participants

What did you like most about the training?

- “I will feel more comfortable talking with my co-workers about change.”
- “Learning the different strategies on how to resolve conflict.”

Comments from T³ Participants

What did you like most about the training?

- “Learning to read body language and my co-workers’ personality styles.”
- “Learning about myself and my styles - I learned a lot about my employees’ styles.”

T³ Outcomes

- 3 of the 13 FQHC's implemented at least one of the training modules within 2 weeks.
- Others are gearing up to begin offering the training.
- We remain on-call for support and plan to follow up in June (6 months) to see how each facility is doing.

Health Care Workforce Training Program

Maine Department of Labor

- Saw the value in what we were teaching our employees
- Advisory Committee of 2 other FQHC's and one local hospital
 - **JOB PLACEMENT**
- Felt that the training would complement their Work Ready program
- Focusing on Veterans and Native Americans

Health Care Workforce Training Program

Maine Department of Labor

- 36 Participants
- Skill Path - All
 - Core Competencies
 - EHR Training
 - CPR
 - Medical Terminology I

Health Care Workforce Training Program

Maine Department of Labor

- **Advance Skill Path**
 - **Certified Professional Coding exam preparation**
 - Medical Terminology II
 - Anatomy & Physiology
 - **Microsoft Office Specialist exam preparation**
 - Word
 - Excel



Seattle Indian Health Board Recruitment and Retention Project

Maile Robidoux Castillo, MBA
Human Resources Director

About SIHB



Workforce Needs

Identified skills gaps:

- New Hires: Soft Skills
- Current Staff: Soft and Technical Skills

Also found:

- Overall lack of applicants with familiarity with the American Indian/Alaska Native population and desire to serve our population

Project Components

Two major elements:

➤ Recruitment

➤ Retention



Recruitment

Formalized partnerships with area vocational and community colleges

- Exclusive externship opportunities
- Development of on-site soft skills curriculum
- Cross training of externs

Recruitment

Development of recruitment brand



“For the Love of Native People”

Recruitment

Extern to Hire program development

- Fast track hiring process
- Pipeline creation

Retention

Create training modules to focus on skills gaps

- Computer skills
- Electronic Health Records
- Customer Service
- Cultural Humility
- How to Manuals

Retention

Formalized staff development program

- Individual Development Plans
- Mentorship Program
- Career Ladders

Major Accomplishments and Challenges

Accomplishments

- Availability of no/low cost computer training
- Overall organizational culture change

Challenges

- ## ➤ Internal Processes and Systems



Next Steps

- SIHB will move toward becoming Patient Centered Medical Home
 - Increased focus on customer service
 - Continued focus on building human capacity

- Start work with local Primary Care Associations and Community Health Centers



Thank You

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