

*VT Health Care Innovation Project
Health Care Workforce Work Group Meeting Minutes*

Pending Work Group Approval

**Wednesday, December 17, 2014; 3:00-5:00pm
EXE - 4th Floor Conf Room, Pavilion Building, Montpelier
Call-in Number: 1-877-273-4202; Conference ID: 420-323-867**

Topic	Notes	Next Steps
Welcome and Introductions	Mary Val Palumbo called the meeting to order at 3pm. Roll was taken.	
Approval of Meeting Minutes	Dawn Philibert moved to approve the minutes and Burt Wilcke seconded. There were no objections.	
2014 Healthcare Workforce Symposium debrief and discussion; Strategic Plan process discussion	<p>Charlie MacLean commented on the success of the symposium, the following were comments or suggestions on what to take from the event:</p> <ul style="list-style-type: none"> • Erin Fraher’s comments were what the group expected to hear: more of a focus on training, less on the actual discipline. If the Work Force Work Group wanted a model demonstration she would be happy to provide it to the group. The third section of the symposium on innovation was great, the group can take a lot from this information and progressive examples. • There was no requirement to complete a report post symposium, however the Core team has asked for a brief report. • Paul Bengtson agreed that a report would be helpful and could be used to inform the next Workforce Strategic Plan. Mary Val Palumbo asked for an example of what this would look like. Paul suggested an example of taking a workforce that is working in one environment and examining how that workforce can become more integrative to increase efficiency. • Lori Lee Schoenbeck discussed choosing a single topic to move forward on that 	

	<p>is of particular concern to VT as we heard about a variety of ways to address medical issues, both through care coordination or case management.</p> <ul style="list-style-type: none">• In Feb we should ask visiting WGs to inform us on how they are working on Care Coordination and Care Management for VT specific issues.• Paul Bengtson spoke about how to link existing programs such as the Hub and Spoke to different providers and systems currently in place, and how they can be more integrative when working in the community• Mary Val Palumbo discussed her surveying of Blue Print practices. Charlie MacLean and Paul Bengtson questioned Mary Val on the meaning of the results in relation to job titles, emerging jobs, and organization size.• Molly Backup said that no longer can a medical provider be trained for one skill set. All fields now have to learn how to think through a medical issue in full, instead of just their immediate priorities as jobs and job priorities are so quickly shifting. The new standard is process thinking instead of memorization. Mary Val asked if this is reflective of older workers or those people who we are just starting to train in school. Molly Backup responded that it is both, and training them differently to expand their skill set.• Lori Lee Schoenbeck noted that we're in the middle of a paradigm shift – moving away from sectionalized thinking and working.• Burt Wilcke mentioned credentialing standards – we are operating as in the past and the standards need updating. Licensure laws often restrict what we can do and do not look at whole system needs. The reimbursement in place is also an issue and is leading to current practices..• The shift from volume based to value based mirrors the transition of workforce nicely.• Scope of practice is an issue in VT.• Dawn Philibert discussed the importance of balancing the need for more credentialing with being flexible with the workforce to fill in where most needed• Mary Val Palumbo reemphasized the importance of hearing from other WGs to clarify future direction for this WG	
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- Stephanie Pagliuca said that there were good examples given at the symposium but surveying needs to be done in VT to understand what people are looking for by way of a workforce and how health care teams currently look before deciding on what future training looks like.
- Beth Tanzman spoke to the importance of teams in the PCMH model and how teams are pulled together around forms of common measurement or goal, such as patient outcomes.
- Burt Wilcke said there are a very small percentage of public health programs that get reviewed to see if they are actually doing what is promised. Concerned there is a lack of evidence-based practice in the larger light.
- Mary Val asked if the sub grants will be evaluated. Yes, all will self-evaluate. Any “lessons learned” from these sub-grants should be shared with the work groups and leveraged.
- Dawn Philibert asked about Mary Val Palumbo’s survey – and if the hurried atmosphere of a practice had something to do with the responses given. Mary Val agreed in the affirmative. The practice manager was the respondent and so the survey was intended to get answers about the project and questions were measureable so the practice managers would be able to answer.
- Paul Bengtson reported that in the Northeast Kingdom they are building an Accountable Health Community, which requires organizations and diverse leaders together – taking time to figure out everyone’s role and how to best leverage what.
- Rick Barnett commented that he doesn’t know if the strategic plan really needs updating and that the group needs time for more discussion. Mary Val Palumbo said that this should be a focus for next meeting
- Georgia said that we are working to create a status report on the current strategic plan – we can then decide what the next steps around creating a new strategic plan will be

Staff to inventory
strategic plan
recommendations
and produce

		<u>status report of what's been completed for February meeting</u>
Community Health Workers Discussion	<p>Jeanne Hutchins updated the group on Community Health Worker workforce in VT and presented on attachment 4, the following were questions or comments on the attachment:</p> <ul style="list-style-type: none"> • Dawn Philibert asked who she was working with – it's been an internal project so far, but propose it be led by Vermont Department of Health • Mary Val noted that CHW jobs are seen as a stepping stone, not a long-term career, by many. Charlie noted that many who are considered CHWs are doing it on a volunteer basis. • Jeanne added that CHWs get curriculum training and that more specific training depends on the job, as CHWs can perform a range of duties. Also commented that it's hard to determine who is a CHW, as many CHWs don't even think of themselves as such. • Dawn Philibert asked if some CHWs were “peers”, like in substance abuse programs. • Mary Val Palumbo answered yes, CHWs perform in a wide range of roles— many in substance abuse/drug recovery/incarceration are peers who are now counselling. • Lori Lee Schoenbeck asked if CHWs could be tiered through different levels of certification or registration. • Paul Bengtson provided an anecdote about using grant money in the NE Kingdom to fund their CHW until it ran out, then funded it out of hospital bottom line, adding that Blue Print money has also helped. The community connectors they employ are varied and are representative of the population they 	

	<p>serve.</p> <ul style="list-style-type: none"> • Mary Val Palumbo talked about pros and cons of certification. How to count people if they don't have a certification? Left unanswered. Dawn Philibert responded that a lot of the care is informal as well, overall this is a hard service to count. • Peter Cobb mentioned that if we go the certification route the State will be impacted significantly. Dawn Philibert agreed. • Mat Barewicz said that this is a job title that has popped up in the past few years, working on finding a better way to track it – will report back in Feb. • Dawn Philibert said this is not an emerging group, but an emerging title. 	<p><u>Mat Barewicz to update group on further CHW research (if any) as well as panel manager research, in February.</u></p>
<p>Demand Modeling Update</p>	<p>Department of Labor to release RFP and manage contractor – they have appropriate staff and this model will help the department in the long run. Hope to release RFP soon, one challenge is that the VT Department of Labor is federally funded so there is extra clearance needed. Next steps are to wait until the New Year before RFP is released, anticipating that the whole project will take 6 months. Georgia Maheras went through the list of likely respondents to the RFP.</p> <p>Paul Bengtson asked what sort of knowledge we will have after the end of this model is completed. Georgia Maheras said that what we are hoping to be able to input the health status of our selected populations as well as any additional assumptions we'd like to include, and have the model predict what sorts of professions/skills will be needed to treat those selected populations.</p> <p>Potential for a sub-group to come out of this to help the chosen vendor make appropriate statewide assumptions.</p>	

	<p>Mat Barewicz provided the benefit from the DOL point of view over time.</p>	
<p>Public Comment/Wrap Up/Next Steps Future Agenda Topics: February: - Presentations from other work groups - LTC Report Update - Strategic Plan Proposal Further discussion: CommunityHealth Workers</p>	<p>Dawn Philibert reported that on Jan 12, their analyst will be starting Georgia Maheras informed the WG that the 2015 workforce plan is under development, and will be distributed to them in early 2015. Lori Lee Schoenbeck would like to see some interaction with the CMCM WG.</p> <p>Next meeting: Wednesday, February 18, 2015 3:00 pm – 5:00 pm</p> <p>EXE - 4th Floor Conf Room, Pavilion Building 109 State Street, Montpelier</p>	

VHCIP WF Work Group Member List

Roll Call:

12/17/2014

*1st Dawn
2nd Bunk
needed w/ no exceptions started*

Member	Last Name	Minutes	Organization
Stuart	Schurr		AHS - DAIL
Beth	Tanzman		AHS - DVHA - Blueprint
Peggy	Brozicevic		AHS - VDH
Dawn	Philibert	✓	AHS - VDH
Robin	Lunge	✗	AOA
Stephanie	Pagliuca	✓	Bi-State Primary Care
Molly	Backup	✓	Consumer Representative
David	Blanck	✓	Consumer Representative VT Dental Society
Denise	Clark		Consumer Representative
Lori Lee	Schoenbeck	✓	Consumer Representative
Deborah	Wachtel		Consumer Representative

Ethan	Berke			Dartmouth Institute for Health Policy & Clinical Practice
Tom	Alderman			Department of Education
Mat	Barewicz	✓		Department of Labor
David	Adams			Fletcher Allen Health Care
Lorraine	Jenne			HowardCenter for Mental Health
Nicole	LaPointe			Northeastern Vermont Area Health Education Center
Charlie	Maclean	✓		University of Vermont
Mary Val	Palumbo	✓		University of Vermont
Burton	Wilcke	✓		University of Vermont
Madeleine	Mongan			Vermont Medical Society
Rick	Barnett	✓		Vermont Psychological Association
Tim	Donovan			Vermont State Colleges
Ellen	Grimes			Vermont Technical College
Peter	Cobb	✓		VNAS of Vermont
Janet	Kahn	✓		

VHCIP WF Work Group Participant List

Attendance:

12/17/2014

C	Chair
IC	Interim Chair
M	Member
MA	Member Alternate
A	Assistant
S	Staff/Consultant
X	Interested Party

First Name	Last Name		Organization	Workforce
David	Adams		Fletcher Allen Health Care	M
Tom	Alderman		Department of Education	M
Susan	Aranoff		AHS-DAIL	X
Molly	Backup	<i>Phone</i>	Consumer Representative	M
Ena	Backus		GMCB	X
Mat	Barewicz		Department of Labor	M
Rick	Barnett		Vermont Psychological Association	M
Susan	Barrett		GMCB	X

Paul	Bengston	<i>Paul Bengtson</i>	Northeastern Vermont Regional Hospital	X
Ethan	Berke		Dartmouth Institute for Health Policy & Clinical Practice	M
Charlie	Biss		AHS - Central Office - IFS	X
David	Blanc	<i>phone</i>	Consumer Representative	M
Peggy	Brozicevic		AHS - VDH	M
Amanda	Clecior	<i>MB</i>	AHS - DVHA	S
Denise	Clark		Consumer Representative	M
Peter	Cobb	<i>phone</i>	VNAs of Vermont	M
Amy	Coonradt	<i>Amy Coonradt</i>	AHS - DVHA	S
Elizabeth	Cote		Area Health Education Centers Program	X
Karen	Crowley		AHS - Central Office - IFS	X
Kathy	Demars		Lamoille Home Health and Hospice	X
Tim	Donovan		Vermont State Colleges	M
Terri	Edgerton		AHS - Central Office - IFS	X
Erin	Flynn		AHS - DVHA	X
Lucie	Garand		Downs Rachlin Martin PLLC	X
Christine	Geller		GMCB	S

Ellen	Grimes		Vermont Technical College	M
Bryan	Hallett	<i>IS-CH</i>	GMCB	X
Karen	Hein			S
Deanna	Howard		Dartmouth	X
Lorraine	Jenne		HowardCenter for Mental Health	M
Joelle	Judge	<i>None</i>	UMASS	S
Janet	Kahn	<i>Phone</i>		M
Kelly	Lange		Blue Cross Blue Shield of Vermont	X
Nicole	LaPointe		Northeastern Vermont Area Health Education Center	M
Robin	Lunge		AOA	IC
Charlie	Maclean	<i>OMHA</i>	University of Vermont	M
Georgia	Maheras	<i>here</i>	AOA	S
Jackie	Majoros		VLA/LTC Ombudsman Project	X
Mike	Maslack			X
John	Matulis	<i>[Signature]</i>	<i>OHMC / GMCB</i>	X
Angel	Means		Visiting Nurse Association of Chittenden and Grand Isle Counties	X
Marisa	Melamed		AOA	A

Sarah	Merrill		DNH	X
Madeleine	Mongan		Vermont Medical Society	M
Meg	O'Donnell		Fletcher Allen Health Care	A
Stephanie	Pagliuca	<i>Stephanie Pagliuca</i>	Bi-State Primary Care	M
Mary Val	Palumbo	<i>Mary Val Palumbo</i>	University of Vermont	C
Annie	Paumgarten	<i>Anne Paumgarten</i>	GMCB	X
Dawn	Philibert	<i>Dawn Philibert</i>	AHS - VDH	M
Luann	Poirer		AHS - DVHA	X
Ken	Schatz		AHS - DCF	X
Lori Lee	Schoenbeck	<i>Lori Schoenbeck</i>	Consumer Representative	M
Stuart	Schurr		AHS - DAIL	M
Julia	Shaw		VLA/Health Care Advocate Project	X
Nancy	Solis		Dartmouth Institute for Health Policy & Clinical Practice	A
Kara	Suter		AHS - DVHA	X
Joy	Sylvester		Northwestern Medical Center	X
Beth	Tanzman	<i>phone</i>	AHS - DVHA - Blueprint	M
Tony	Treanor		Northwestern Counseling & Support Services, Inc.	X

Deborah	Wachtel		Consumer Representative	M
Anya	Wallack		SIM Core Team Chair	X
Marlys	Waller	<i>Wall</i>	Vermont Council of Developmental and Mental Health Services	X
Kendall	West			X
Burton	Wilcke	<i>[Signature]</i>	University of Vermont	M
Bradley	Wilhelm		AHS - DVHA	X
Cecelia	Wu		AHS - DVHA	X
				66

Sarah Kinsler

[Signature]

VHCIP