

**HIT Policy Committee
Certification & Adoption Workgroup:
Workforce Development Subgroup
Transcript
August 13, 2013**

Presentation

Michelle Consolazio – Office of the National Coordinator

Good afternoon everyone, this is Michelle Consolazio with the Office of the National Coordinator. This is a meeting of the Health IT Policy Certification and Adoption Workgroup Workforce Subgroup. This is a public call and there will be time for public comment at the end of the meeting. This meeting is being transcribed and recorded so please remember to state your name before speaking. I'll now take roll. Larry Wolf?

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

I'm here.

Michelle Consolazio – Office of the National Coordinator

Bill Hersh?

William Hersh, MD – Chairman, Department of Medical Informatics & Clinical Epidemiology – Oregon Health & Science University

Here.

Michelle Consolazio – Office of the National Coordinator

Don Gull? Gretchen Tegethoff? Joe Heyman?

Joe Heyman, MD – Whittier IPA

Here.

Michelle Consolazio – Office of the National Coordinator

Michelle Dougherty?

Michelle L. Dougherty, MA, RHIA, CHP – Director of Research & Development – AHIMA Foundation

Here.

Michelle Consolazio – Office of the National Coordinator

Norma Morganti? Sorry, Norma.

Norma Morganti – Executive Director, Midwest Community College Health Information Technology Consortium – Cuyahoga Community College

No problem, here.

Michelle Consolazio – Office of the National Coordinator

Can you say your last name for me?

Norma Morganti – Executive Director, Midwest Community College Health Information Technology Consortium – Cuyahoga Community College

Morganti.

Michelle Consolazio – Office of the National Coordinator

Morganti, thank you. Patricia Dombrowski?

Patricia Dombrowski, MA – Director, the Life Science Informatics Center – Bellevue College

Here.

Michelle Consolazio – Office of the National Coordinator

Samantha Burch?

Samantha Burch Halpert, MS – Vice President, Quality & Health Information Technology – Federation of American Hospitals

Here.

Michelle Consolazio – Office of the National Coordinator

Steve Waldren?

Steven E. Waldren, MD, MS – Healthcare IT Strategist & Physician Informaticist – American Academy of Family Physicians

Here.

Michelle Consolazio – Office of the National Coordinator

Elizabeth Royal? Ed Salsberg? Nancy Brooks? Stuart Werner?

Stuart Werner – Health Care Industry Lead, Office of Workforce Investment, Employment & Training Administration – Department of Labor

Stuart Werner is here and I'm also joined by colleagues Pam Frugoli, Joe Jenkins and Stephen Sage from the Department of Labor.

Michelle Consolazio – Office of the National Coordinator

Great and are there any ONC staff members on the line?

Chitra Mohla, MS – Director, Workforce Programs Office of Provider Adoption Support (OPAS) – Office of the National Coordinator

This is Chitra Mohla.

Michelle Consolazio – Office of the National Coordinator

Thanks, Chitra.

Cinyon Reed – Office of the National Coordinator

Cinyon Reed.

Michelle Consolazio – Office of the National Coordinator

Thanks, Cinyon. With that I will turn it over to you Larry.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

Great, well I'd like to welcome everybody. Chitra and I have been busy trying to fill our queue with good things to learn about and digest. We wanted to focus on some of the work that is happening with standard occupational codes that is sort of our first topic, assuming we have our presenters. And then our second topic was to look at the apprenticeship program and it sounds like we do have some of the folks for that if I heard correctly, is that right?

Chitra Mohla, MS – Director, Workforce Programs Office of Provider Adoption Support (OPAS) – Office of the National Coordinator

Yes, they are with Steve Werner.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

Okay, so maybe we should flip the order of things

W

We also have the presentation on SOC and O*NET.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

Okay, I'm sorry; I guess I didn't – so Pam is on as well?

W

Yes.

M

Yeah, Pam is on.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

Oh, so we have a full house, so that's great. Well, then let's do things per plan.

W

Okay.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

And we'll plan to have a discussion after each of the presentations and talk about some next steps and go to public comment. So, let's start with O*NET and SOC.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Okay, hi this is Pam Frugoli from the Department of Labor I'm the Team Lead for O*NET and the Competency Model and I'm also one of the ETA representatives on the Standard Occupational Classification Policy Committee but the representative, one of the representatives, the lead from Health and Human Services is Ed Salsberg who I guess I didn't hear him say present before, but – so I'm hoping I'm not stepping on any of his toes. I'm going to talk primarily about O*NET. So, there you have the slides and are you advancing the slides from your end or are we doing it?

Caitlin Collins – Project Coordinator – Altarum Institute

Yes, just go ahead and say next slide and we will move them for you.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Okay, great, okay. So, next slide. So, just a quick overview of the Standard Occupational Classification and I'm going to be focusing on healthcare occupations, the current SOC version that is in operation right now is the 2010 SOC and there are 78 detailed occupations within healthcare broken among two major groups, healthcare practitioners and technical occupations, and then healthcare support which is a smaller group.

And then on the next slide you'll see that O*NET, which is the Occupational Information Network, is based on the SOC but we actually do have dispensation I guess from the Office of Management and Budget to have additional detail.

Okay, so I've actually bolded like a SOC code is six digits, it's the two digits and a hyphen and four digits and then if it is an O*NET code there is a decimal and two digits. So any time an O*NET code has a decimal and two zeros that means it is identical to the SOC, but this is an example of healthcare breakouts within a SOC residual category okay? I might need to explain what a residual is, it's like everything is supposed to be classified in the most detailed occupation that it can be but some things – you know, so if you've identified things at a specialized level then there are some things that don't fit there and so they go into the all others.

So, we know there's lots of specialties for physicians and surgeons and some of them are identified in the SOC like say a pediatrician but others are not and so O*NET has been able to identify them and break them out here. So, we actually have 12 breakouts of physicians and surgeons.

Now the thing is when O*NET does a breakout that means we are able to produce descriptive information which I'll talk about a little bit more shortly but it does not mean that the Bureau of Labor Statistics or the Census is able to collect their quantitative data at this level, okay.

So, and obviously we recognize, you know, there's many, many specialties of physicians and surgeons and even O*NET is never going to identify them all, that doesn't mean they don't exist that just means we can't devote enough resources to be able to collect all that data and describe it.

So, on the next slide you can see we've also done something similar for registered nurses and have identified acute care nurses, advanced practice psychiatric nurses, critical care nurses and clinical nurse specialists.

One advantage that O*NET has over the Bureau of Labor Statistics or the Census Bureau is that they are completely dependent on surveys so you have to be able to both find and sample people from either business establishments in the case of BLS or from households in the case of Census.

O*NET actually has, again, approval from OMB to sometimes use some alternative data collection methods, surveys of workers at business establishments is the primary method but for smaller occupations we are allowed to do occupational expert samples or use association lists to supplement the frame and so that is why we are able to do some of this because we're collecting descriptive information and we still, you know, make every effort to make it nationally representative.

And on the next slide, I'll just show you a few more examples but I'll show you what can happen, so we do have some O*NET breakouts within medical and clinical laboratory technologists and then we have some again in the residual occupation of health technologists and technicians, all others, but you'll notice the O*NET breakout goes .01, .05, .06, .07 and I didn't have time to confirm this exactly, but I am pretty sure what happened is that 02, 03 and 04 actually went from being an O*NET to being – having a place in the 2010 SOC and so then O*NET changed, you know, re-coded them to the 2010 SOC code and retired the 02, 03 and 04 here.

So, it is possible that sometimes if BLS and Census make the determination, you know, that an O*NET occupation might be moved up into the SOC – but, you know, it doesn't mean all of them will be and we try and think enough so that they don't go off in a totally different direction because that would really create problems if we've already collected the data.

So, that's just the general idea of how O*NET relates to the SOC and so far I know I have not touched on any Health IT occupations but in the next slide you'll see that we actually did add a breakout called informatics nurse specialist and that's, you know, just what the data looks like there, you know, it's been collected, but those of you who don't know the SOC might not know what 15-1121 is, well guess what, it's not a healthcare occupation it's a computer systems analyst, okay?

Because one of the things that the SOC is very insistent on is that occupations be classified on the work performed. Okay, so the word nurse is in the title and it may well be that you had to have been a nurse to be in this occupation but these people are no longer performing direct patient care, in fact it says apply knowledge of nursing and informatics to assist in the design, development and ongoing modification of computerized healthcare systems, and educate staff and assist in problem solving to promote the implementation of the healthcare system.

And then there are some, you know, sample of reported job titles and things, but that's something I think that you should be aware of that it is work performed and if you're going to be adding Health IT occupations you are going to need to be thinking about where they will be added, okay? And what they are going to be doing.

So, on the next slide, this shows you the kind of information that you then get if an occupation is in O*NET. O*NET collects tasks, they collect tools and technology used on the job, the knowledge skills and abilities, work activities, work context that means like working environment, you know, how much you interact with people, how much you work outdoors or, you know, travel or things like that.

Jobs we have just the five broad groups, how much education it requires, more specific information on education, interests, because we also link all O*NET occupations to an interest profiler so we have to rate them on interest so that they can be displayed and the results, you know, of an assessment, work styles and work values also support an assessment, related occupations and then those last three that are bolded are information that we get from other sources it's not O*NET information. So, wages and employment are displayed within O*NET but those come from the Bureau of Labor Statistics.

So, again, if the O*NET has broken out an occupation the only data on employment and wages they can provide will be for the aggregate 6 digit level occupation. So, like all those 12 physicians and surgeons that I showed you broken out they are going to be – they are all going to go to the same BLS employment and wage data.

Job openings then, I'm not exactly sure how that works but, unless a job bank has coded job openings to the more detailed O*NET code again it would probably just go to the general level. So, you know, I mean, O*NET is about the descriptive and the characteristic and requirements information and being an occupation in O*NET that's what occurs. And even after an occupation is added to O*NET it then goes into data collection, so it takes a while before we add something before we actually have data.

Okay, so on the next slide I'm sort of stealing maybe a little bit of Ed Salsberg's thunder at a subsequent meeting, but this is out on the web so I thought I could share this, is that if you're thinking about, you know, having input to the process first of all the next update of the SOC will be in 2018, but the process will start at the end of this year. In December there is supposed to be a federal register notice published asking for, you know, public comment on the new principles for the SOC and on, you know, which occupations need to be added or changed and things like that.

But, very strongly when I'm – and I don't think any of you would do this, but it's not a popularity contest, it's not a login campaign, do not have people write a bunch of letters because we don't weigh the letters or count them it's really based on does this make a difference, is this a separate occupation that needs to be represented? So, it's the nature of the work performed, you know, so any submission saying this should be added should describe the nature of the work performed and that includes, you know, duties that everyone does and, you know, duties that are sometimes performed and then number two is how the work performed is distinct from other detailed occupations in the SOC, which is another reason for, you know, making it a separate breakout.

Then on the next slide they are asking for an example of job titles and any indication that is available of the number of jobs or workers in the occupation. Next slide. Thanks, yeah. So, that is four principles and then there is a quite a bit they are asking for. The next slide tells you that they are looking for the types of employers, can you go one more or maybe it is just a lag time. For example one of the things is if an occupation is spread, there are like a few of them in just about every industry it is harder, well sometimes it is harder to find them then if they are concentrated and so it's good to know what industries they occur in. I mean, I think Health IT is probably going to be concentrated.

Then education and training that has typically required, licensing, tools and technology, any associated professional or trade associations and unions, because that is also a good source of information on the occupations, you know, you can look at their websites and things. And more information will be coming out and Ed will be able to provide more information about, you know, this whole process and again it won't even begin until December and I think there are like 60 days, is it 60? Either 30 or 60 day notice so there's time to respond, you know, and this material is out on the BLS website. I didn't put the link in but it is at www.bls.gov/soc.

So, sort of just to recap on the next slide the issues to consider are, yeah, placement in SOC classification because are these occupations, you know, are they IT occupations or are they healthcare occupations or are they even maybe something else I don't know. The data, you know, that will be available, you know, if it gets added to O*NET and, you know, we do look at adding something still occasionally it will be descriptive information. If it's actually added to SOC then that will mean ultimately once it is all implemented there will be quantitative information meaning wages, employment, employment projections and outlook data and demographics primarily from the Census and the American Community Surveys.

So, that's sort of an overview on occupations, but then we also do, on the next slide, we also at the Department of Labor work on industry competency models because there are so many sector initiatives too that aren't specific to – sorry, we were deciding whether to click on the competency model website, but the link is there for you if you do want to look at it even though I'm pretty sure some of you are familiar with it.

So, we have competency model clearinghouse that has 21 industry sector models on it and three of those are actually in the health sector, I'll show them to you in a moment, but what we do is we have a technical team of contractors that develop a draft model based on research about curriculum that is out there, standards, association credentials and so forth and then that draft model is reviewed and validated with input from industry associations, employers, educators, the workforce system, federal partners and in fact a bunch of you have worked on these models.

And so the next slide actually does show you what the website looks like, the home page even though we are making – we have some updates in progress, but the important thing is that we also have tools there so these aren't just, you know, national competency models they are designed to be used in like real regional and local workforce strategies so that educators and business can come together with the workforce system and, you know, decide where the skill gaps are and what training programs need to have things added to them.

You can actually take a competency model and, you know, customize it, you can download it into worksheets so that you can check your curriculum against, you know, are you teaching, you know, do all the courses in your program teach all the competencies you've identified or not and it actually can be sort of interesting to find out that there may be gaps, you know, so we've tried to make these – it's not like – it's really a framework for people to use to help them in building a skilled workforce to meet employer needs.

Okay, so then on the next slide these are just – we have an Allied Health Competency Model and as I said we work with industry partners and we work with quite a few of them but we always have several that agree to be champions of the model so this is the Allied Health Competency Model and the champions are NN2 and the Health Professions Network, and again it's not just the pyramid, you know, there is information behind each of the blocks on the pyramid it is actually fairly long 20-30 page document that you can download and again put into all the tools.

Then the next slide shows the electronic health records model now this I should emphasize because other people were doing an HIT model we thought it was important also to have the competencies that frontline health staff needed to be able to use these new electronic health records and interface with them and record the information and pull information out and be able to interpret it so that's what this focus is here and you can see that the champions were the American Health Information Management Association and again the Health Professions Network.

And then finally, we have a little older model on the next slide that's long-term care supports and services. There are a lot of champions there so actually that pyramid is weird because I widened the slide just so you could read the different champions like we have the University of Minnesota Research and Training Center and Community Living. We have National Center for Assisted Living, ANCOR, American Healthcare Association a bunch of them. So, the pyramid looks the same normally but I just made it bigger so you could read, you know, the different champions.

So, that's what we have right now and also one good thing about, because all of this is on the web we can link out to other things. So, for example if we link out to that AHIMA career map that is so interesting and, you know, we link out to information on certifications, we link to registered apprenticeships and things like that and those are easy to add, you know, you don't have to go through the whole process of doing a whole new model so we can keep that fairly up-to-date and we check for broken links. So, that's it and so if there are any questions I'll be glad to answer them.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

So, let me jump in, this is Larry Wolf, let me jump in with sort of prerogative of chair and confess my own ignorance about O*NET I've clearly learned a lot in your run through but could you step back just a little bit and give me context of what the intention of O*NET is? It sounds like it is about descriptive information.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Sorry.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

It sounds like it can do a bunch of things, but –

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Yes, yes, yes, I'm sorry, yes, I didn't – I went and dove right into the deep end. Well, we have several web tools but basically they're designed for career exploration so people to find out, you know, about the different possibilities in the labor market and get much more in depth information, you know, I remember years ago, decades ago I took a strong vocational interest test and it told me I should go into education but that was it, it said education it didn't say teaching, administering, you know, consulting, anything. So, we're trying to give people real information on occupations.

You know, you can look at the BLS data and see what is, you know, in demand, what's growing, how many openings there are and what the wages are but if you don't know what the work is like or what they will do then you might not know if you are interested in it.

So, basically all the O*NET descriptive information is collected to support O*NET on-line and My Next Move which I think one of the slides, the one that had the type of information in O*NET, just showed you a page of the kind of information in O*NET on-line which is more detailed and then the information in My Next Move which is more summarized it is for younger people or people with lower literacy levels perhaps and even just for people who just want to do an initial exploration and then dive down into the details like when they are ready for a resume O*NET on-line we've actually been told a lot is really helpful in writing a skilled-based resume. Employers also use it to help write job descriptions.

So, this is basically occupational and career information out on the web that everyone can use and I mean, we get like I think it is over 20 million visitors a year. And, you know, our American job centers use it with customers but this is available 24/7, you know, from anywhere that you have internet access in libraries, in schools, counselors use it. In fact the web statistics jump up every fall when the school year starts and, you know, they drop down a little bit in the summer, so we're pretty positive that the schools and counselors are using this information. But it is really to promote careers in different fields and let people find out what they might like to go into.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

That's great.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

And then I should explain a little bit about the competency models how they are used, I'm sorry I didn't do O*NET. Go ahead?

William Hersh, MD – Chairman, Department of Medical Informatics & Clinical Epidemiology – Oregon Health & Science University

This is Bill Hersh a member of the workgroup, actually I have two questions one is a follow on to Larry's because I actually must confess I had never heard of O*NET before today either.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Really? Oh, goodness, okay.

William Hersh, MD – Chairman, Department of Medical Informatics & Clinical Epidemiology – Oregon Health & Science University

So, but it sounds like one – but I also have a second question, but it sounds like one of your major activities then is refining the SOC codes kind of in the same way that CMS takes the generic ICD-9 and creates the US specific ICD-9 CM, maybe that example isn't familiar to you, but you further elaborate the codes to more detail.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Yes, that's right.

William Hersh, MD – Chairman, Department of Medical Informatics & Clinical Epidemiology – Oregon Health & Science University

Is that what you do?

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Yes.

William Hersh, MD – Chairman, Department of Medical Informatics & Clinical Epidemiology – Oregon Health & Science University

Okay.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Because, again, one of the reasons that SOC wants all that information is so they can – but the determination, the big determining factor of whether they put it in the SOC is whether or not they can collect it, you know, whether they can collect it through a sample survey. Like one of the big issues for Census is would anyone ever write this down on their Census form as their job title, you know, because if they just write nurse and they never write that they are a pediatric nurse or a nurse oncologist or something like that then Census is never going to be able to code to that. So – but we can – we recognize that there are lots of job titles out there and none of the actual federal systems will ever get to that level of detail but we are able to go to some additional detail.

William Hersh, MD – Chairman, Department of Medical Informatics & Clinical Epidemiology – Oregon Health & Science University

Okay, my second question then concerns the placement of informatics nurse specialist in the, I can't remember exactly what the area was but –

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Yeah, computer systems, yes.

William Hersh, MD – Chairman, Department of Medical Informatics & Clinical Epidemiology – Oregon Health & Science University

Yeah, let me give you my context, you know, I'm a Director of a Graduate Level Informatics Program that has students from all kinds of healthcare backgrounds, a fair number of physicians, but also nurses, physical therapists and so forth, I suspect that most of the people who graduate and have jobs from our program would consider themselves to be healthcare professionals more than technology professionals and in fact just a couple of points of data to support that, one is that in medicine a couple of years ago the American Board of Medical Specialties recognized clinical informatics as a subspecialty of actually any medical specialty so whether you are a surgeon or a radiologist, or pathologist.

And then a second point of data is that more and more hospitals are standing up clinical informatics departments that are often times run by either a chief medical informatics officer or a chief nursing informatics officer, many times they subsume the traditional HIM function but these are separate entities from the IT department and so I guess I would have concerns with, you know, if you have to – if you can't split something belonging to two hierarchies that the hierarchy sort of stay on the health profession side since a lot of what people in informatics do is work with data that is in systems and they not only support healthcare professionals, I mean, but they do things that are critical to the mission of healthcare organizations like quality measurement and improvement, using data for other kinds of things.

So, I don't know who made that decision, I won't belabor my point I guess I already have, but I just question that decision to put informatics in a technology bucket rather than a health profession bucket.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Right and we do recognize that they are employed in the healthcare industry, you know, and I think that's actually what you are talking about is going to be one of the considerations for the SOC Policy Committee going forward is that one of the things that's happening in the labor market today is the creation of hybrid occupations and, you know, we've always traditionally said, you know, well, you know, is it 80% this and 20% that, if it's 80% this than we put it in, you know, IT and not in healthcare.

I mean, the SOC may actually consider, but I'm not saying they will do this, but, you know, is health informatics something, such a hybrid that it needs to be its own little group, you know, so that it can cross both those things. Right now in O*NET we have to fit it within the existing structure and based on some of the coding, you know, there are coding guidelines and classification principles based on those we put it in IT, but, I mean, I understand your case and, you know, we knew that that would be an issue.

So, anyway that's one of the things that you may also – people may want to comment to the SOC on, you know, about why, you know, is there a case to be made and what is the case for them being their own separate group maybe, so yeah –

William Hersh, MD – Chairman, Department of Medical Informatics & Clinical Epidemiology – Oregon Health & Science University

Just one final point, that, you know, in reality, I suppose this is probably true in a lot of these categories, you know, informatics is really a whole spectrum of jobs from, you know, a physician and nurse, and executive informatics leaders, you know, down to analysts and people who work with data and so forth. So, it may be hard actually to have a single informatics category when it's really a very heterogeneous deal.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

I know, yeah, that's the other thing and we're not going to add all the jobs, the SOC will never add all the jobs that are in informatics because they won't be able to collect all of them, but, anyway, yeah, that's why it's a challenge. So, just be prepared to not get everything you want, ha, ha.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

So, Pam, this is Larry, so I will just follow-up to Bill's comments?

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Yeah?

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

So, first thank you for pointing out an obvious bone that we would want to chew on because it could have been buried and we wouldn't have known the difference.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Yeah.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

So, thank you for translating the codes to what they mean. But, I think, as you were talking and Bill was talking it raised a question in my mind about, so for us coming from the clinical world we see informatics as this very highly thing that is built around healthcare, but I have to believe that other domains have their knowledge specialists that do similar work to what the clinical informaticist do in terms of if they really understand their domain, they understand how information is organized and structured. Is there a parallel in other domains, so someone may be in manufacturing that has to know a lot about cars in order to do the management of, you know, car parts and assemblies, and all that stuff.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Well, they probably would be engineers though and not be production workers.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

Right.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

See that's the thing, even in manufacturing not everyone is a production worker just like in a hospital not everyone is a healthcare worker because they don't provide direct healthcare, I mean, that's the thing. You know, I think we're going to have to – that just gets into the whole idea of explaining the structure of occupations within an industry which we may need to do a little bit of background on as part of the whole SOC input.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

Yeah, that would probably be helpful.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Yeah, yeah it's classification – because the big thing is we want occupations to be counted in one and only one place otherwise we get duplicate counts and then we don't know how many people are employed you know?

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

Right, so we came in – we sort of backed into this because when this Workgroup started up we said, well what do we know about the people who are doing this right? And we said, well, we have broad classifications for, you know, clinicians some of which get pretty detailed, but none of them kind of get down to the work and we actually described it as hybrid work that is happening with people who have some technical IT kinds of skills and they have clinical skills, and they bring them together and there is specialized knowledge that doesn't really exist in either side that has been created in this discipline.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Right.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

And how do we know how big the workforce is, right?

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Yeah.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

So, we sort of looked at the clinical side of looking for a breakout and, you know, it was pointed out that the HIM people are sort of as close as we can get but that that job (a) its evolved and (b) isn't really representative or typical of most of the folks that we care about and if you flip it around and say, well how about IT workers in healthcare, right, which is sort of another way to dice it, that mostly look like it was going to tell us how many people were running servers, which isn't really what we are worried about either. We are worried about kind of really the applied IT if you will, they know something about IT but they are really applying it in a clinical setting.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Yeah, you know, I didn't think to do a slide on that, maybe, I don't know I can do some background work, but I mean, industry staffing patterns where they really do show you the share of certain work groups in industry might tell you more than you think, you know, it wouldn't just be the people doing service necessarily, but, I don't have it in front of me so I don't know what it is telling me right now.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

Yeah.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

But it is something worth looking at, yeah.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

If that is something you could do it would be really helpful to us.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Yeah, okay.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

Or if you hit an end and go “ain’t there.”

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Yeah, right.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

That’s helpful too.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

I will look into it and get back to at least Chitra if I have something I can share.

Steven E. Waldren, MD, MS – Healthcare IT Strategist & Physician Informaticist – American Academy of Family Physicians

This is Steve Waldren Workgroup member, you talked about the SOC being a classification and with any classification there is kind of an ordering principle, so could you help me understand I know there are probably lots of uses of the code but what is the primary or original goal of the SOC?

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Oh, okay, I can talk about that, it’s designed to be a standard for all federal agencies that collect statistics on occupations to use so that their data are comparable. So, we’re actually all required by OMB to use it, so Census has to use the SOC even though they go to a more collapsed level of it and BLS uses it, and ETA uses it. So, it’s so that federal data are comparable and again, you know, sometimes they go to more detail. I should have made a slide with the webpage.

M

Just tell them the –

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

It is, it’s just www.bls.gov/soc and there is a lot of information about it, because I’m sure you would be interested in the classification principles and the coding guidelines because that tells you a lot about it and that is on that page and you can download it. But, yes, it is used for federal data collection.

Joe Heyman, MD – Whittier IPA

So, this is Joe Heyman, I’m also a member of the committee and I was sitting here thinking to myself about when Census people ask me or even when they are –

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Yeah, what do you write down, right?

Joe Heyman, MD – Whittier IPA

Exactly, and I’m a physician, I’m a gynecologist, I’m a chief medical information officer.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Oh, boy.

Joe Heyman, MD – Whittier IPA

But I always write down that I'm a physician.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Exactly.

Joe Heyman, MD – Whittier IPA

I never write down that I'm a gynecologist.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Exactly, so we can't code you to anything more detailed than a physician. And the thing is, you know, I mean, eventually I think with the Internet we may get somewhere, but when you get a paper form there is no way to ask a good follow-up question because we don't know what you wrote down first. If you wrote down you were a teacher and this is on-line then we might be able to program it so it says, what grade do you teach and what subjects do you teach? If you write down that you are a truck driver we are going to say, is it a delivery truck or is it, you know, a semi-tractor trailer? If you write down that you are a doctor we'll then say, okay, what kind of doctor? But we can't do that yet, you know, I think – I don't know that might be maybe 10 years off, I don't know.

Anyway, but, yeah, that's one of the limiting factors for Census. Now the good thing about most of the BLS surveys is they go to the employer and the employer is reporting on their employees and so they can get a lot more detailed. So, the household survey data is more aggregated than the employment data. So, but next time write down gynecologist or I don't know what else where you, a chief medical information –

M

An informatician he said, right?

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Oh, Lord.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

Right, he should support our new campaign to get the detail we want.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Well only if he starts writing it on his forms.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

That's right so it's an interesting Catch-22, so that's an interesting filter we should think about as we approach this is how do people describe themselves, you know, if you are at a cocktail party how do you introduce yourself –

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Right.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

So that it communicates to the person who isn't a specialist with you, but on the flip side we do want to recognize that there are professional, you know, societies and associations that drill into these details and if we would go to one of them and say, how do you talk about your members just like some of the physician specialties you were breaking out they would have comparable level of detail.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor
Right.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare
So, it's interesting push/pull.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor
Yeah, yeah and then there is always just, you know, people who really want really detailed specialties that are tiny, you know, so anyway there is a lot of competing variables.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare
Anyone else want –

Michelle L. Dougherty, MA, RHIA, CHP – Director of Research & Development – AHIMA Foundation
This is Michelle Dougherty, I did have a quick question, it looked like using the SOC structure O*NET had additional classifications. Is there a process in which new occupations might go through O*NET first since the BLS is on that 10 year pathway and that this committee should have a strategy of maybe helping to identify or advance Health IT occupations through O*NET and then as stepping stone into the SOC.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor
Well, see we don't – unfortunately O*NET doesn't have the same sort of process where we do the public notices and stuff. The budget for the O*NET data collection is so much smaller than the BLS budget that we sort of do our own research but we do, you know, monitor professional associations and, you know, certifications that are coming out and things. And, I mean, I know that when things are submitted for registered apprenticeship, which we are going to need to segue into soon, we see those titles coming in. I guess, well –

Michelle L. Dougherty, MA, RHIA, CHP – Director of Research & Development – AHIMA Foundation
So, if a national HIT Policy Committee had identified this as a challenge would that carry some weight with O*NET to prioritize?

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor
Yeah, I mean, I guess it would be good input, you could share it with me and I could share it with them and we can see, you know, whether or not, you know, we're able to add things.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare
So, we could conceivably have ONC run this up the HHS flagpole and if there was higher level support it might actually correct some stuff.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor
Yeah, we would certainly take it into consideration, yeah.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare
Okay.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor
If it provides similar kind of documentation not maybe as detailed as what is asked for in the SOC, but that kind of information, yes, submitting – if you are going to do that anyway, submitting it to O*NET sooner might be – you know, I mean, to me to give to O*NET could be helpful, yeah.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

So, actually that's a really great line of question Michelle, because it leads me to think that in fact that could be a major thrust to what we are doing is to say this needs further definition beyond whatever happens at the SOC level and we want to actually encourage people to come into this, it is a burgeoning field. We hear from both Health IT vendors and Health IT providers that there is a real shortage of people in the field and so, you know, back to your comments about how O*NET is used that what is my next move, which is sort of like with the AHIMA lovely interactive thing gets at. I think that that could be a really interesting thing to put out there.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Yeah, okay, you know, what I'll follow up and send an e-mail with the links to the websites because you might want to tell people about them. I'm sorry that I didn't even think that no one had heard of it, which I should have been aware of. So, okay, thank you everyone.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

Any other comments? Okay that seems more than the minimum silent time for this kind of meeting. So, maybe we should move onto registered apprenticeships.

Joseph Jenkins – Team Leader, Marketing & Promotions – Office of Apprenticeship Employment and Training Administration – US Department of Labor

Okay, I'm going to start but I'm going to have to leave so Stephen will probably be around for your questions and I will certainly get back with him on the questions. I just want to talk a little bit about the HIT Program, Health IT.

I guess it has almost been over a year ago and there had been some work kind of done on this prior to us working with Chitra and company, but we finally got to the point where we realized that we had to assemble all of the parties together and that is all of the education institutions, the government institutions and also the employers to really get an agreement on this occupation on really what was required, what type of training everybody thought was required and really just what were the principle parts of the training that we wanted to concentrate on.

We also had to look at what was considered the national need for the Health IT occupation, we did that through several sources and I'll let Stephen talk a little bit about it, but, it really looked like that this was a job that was really in need and that the mechanisms set up for training new people just wasn't there but there were great possibilities for it.

We have what we call, in order to get the ball going though, we had to really look at how the role that it was going to play for each organization and who was going to be a part of this whole group to put it together and then how were we actually going to develop the occupation and finally, you know, we decided that we needed a good facilitator to do that and we got everybody in a room together and we were able to really start hashing this out.

Along with what I think the fed agencies saw and what the community colleges saw those things were very crystal clear, but I want to talk about the importance of the employer in the whole process. A lot of times a lot of the things that we see and we think are important from the stand-point of government and from the stand-point of educational institutions, they are important, but the employer was looking at what are the bottom line things that need to happen. This is what I really want from my people and how does it translate into me having a more highly skilled highly developed person. How does all of the credentials, how does all of the competencies, how do they stack up in giving me a superior performer?

And we were fortunate in that the employers in the groups were very straightforward in what that meant and how they view the competencies and how they thought that things would work within their organization and that really kind of got us focusing on the need but also on the employer driving the process and so along with that we were able to really hash out the things that were important about the occupation and really get the ball rolling.

The next key thing was the apprenticeability process and that's an internal process that after we got an employer to get together to look at the competencies, after we got everybody to agree that this is where we are going with the occupation we then had to make sure that we sent it through the apprenticeability process and Pam just mentioned some things about it and we had to make sure that we sent it out so that it got an occupational code. So Stephen you want to touch base on that?

Stephen Sage – Apprenticeship & Training Representative – US Department of Labor

Sure, for the Office of Apprenticeship part of the apprenticeability process is assigning an O*NET code and that was what took place here is we basically compiled the training outline including the on-the-job learning and the classroom instruction and submitted that onto O*NET for the determination of an O*NET code.

Joseph Jenkins – Team Leader, Marketing & Promotions – Office of Apprenticeship Employment and Training Administration – US Department of Labor

I want to make a point here though and Pam made it earlier, a lot of – it seems that a lot of people confused the SOC with the actual O*NET code, this is not a standalone occupation and this was an occupation that also came under the SOC heading but it was not a standalone and we had to make sure that the employer understood that and everybody else understood that in the process, but go ahead, I'm sorry.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Right, can I just say that the title of the apprenticeship occupation is not the same as the O*NET title that is assigned to it, it is coded within the O*NET.

Stephen Sage – Apprenticeship & Training Representative – US Department of Labor

Yeah, and I think in this particular case similar to what Pam was mentioning earlier this particular occupation was headed under IT, I think it's computer user support specialist versus a healthcare occupation.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Yeah.

Joseph Jenkins – Team Leader, Marketing & Promotions – Office of Apprenticeship Employment and Training Administration – US Department of Labor

The thing about – that was most helpful in this and I think it serves as a model for us was having the employer as – look at the employer role with structure of hiring and the structuring of the apprenticeship program, which is one of the flexible things that we have in the apprenticeship program and we are very proud of and then getting everybody to agree on the standards for the program and then on the implementation process. So, we are now in the process of completing the apprenticeability process and we are looking over, probably in the next 2 to 3 months to actually look at the rollout.

We've already been in direct discussions with the employer who is going to be the first to pilot this program and, you know, we've been just pleased with all the participation by everybody in making this happen and I think there were – I think HHS was involved, you want to just talk a little bit about who was involved Steve?

Stephen Sage – Apprenticeship & Training Representative – US Department of Labor

Sure, we had Chitra Mohla from HHS and a few other folks who are on this call, Norma Morganti.

Joseph Jenkins – Team Leader, Marketing & Promotions – Office of Apprenticeship Employment and Training Administration – US Department of Labor

Patricia Dombrowski.

Stephen Sage – Apprenticeship & Training Representative – US Department of Labor

And Patricia Dombrowski involved in putting the process together for the apprenticeability determination.

Joseph Jenkins – Team Leader, Marketing & Promotions – Office of Apprenticeship Employment and Training Administration – US Department of Labor

And also bringing on the employers which is a –

Stephen Sage – Apprenticeship & Training Representative – US Department of Labor

–

Joseph Jenkins – Team Leader, Marketing & Promotions – Office of Apprenticeship Employment and Training Administration – US Department of Labor

So that is kind of it in a nutshell and we are certainly open for questions.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

Let me jump in with the same context question. Could you say a little bit more about what particular area you are looking to do this apprenticeship program in?

Joseph Jenkins – Team Leader, Marketing & Promotions – Office of Apprenticeship Employment and Training Administration – US Department of Labor

You mean like Health IT?

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

Well, Health IT is really, really broad.

Joseph Jenkins – Team Leader, Marketing & Promotions – Office of Apprenticeship Employment and Training Administration – US Department of Labor

Right it is.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

It may be very specialized in the context of all possible jobs.

Joseph Jenkins – Team Leader, Marketing & Promotions – Office of Apprenticeship Employment and Training Administration – US Department of Labor

Yeah.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

But within Health IT it's really pretty broad.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Haven't you added four titles lately?

Stephen Sage – Apprenticeship & Training Representative – US Department of Labor

Those are actual occupations through AHIMA.

Joseph Jenkins – Team Leader, Marketing & Promotions – Office of Apprenticeship Employment and Training Administration – US Department of Labor

Yeah, through AHIMA, this is different, this is kind of a beginning level HIT occupation that is kind of what we call a feeder type of program and it's not – we consider this a kind of entry level HIT program it's not one of the – I would say the major level programs. So, this is just a – for us it's a pilot into this area and we expect to do a lot more things with Health HIT.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

But were they only asking about this one?

Joseph Jenkins – Team Leader, Marketing & Promotions – Office of Apprenticeship Employment and Training Administration – US Department of Labor

Yeah.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Do they know about the other four?

Joseph Jenkins – Team Leader, Marketing & Promotions – Office of Apprenticeship Employment and Training Administration – US Department of Labor

No, they don't know about the other four. The other four are with AHIMA which are kind of more of a – I don't like to say higher level, but it's more of a high level occupation and you want to just talk about what those are?

Stephen Sage – Apprenticeship & Training Representative – US Department of Labor

Yeah, the four occupations that we are in the process of submitting for – or in the process of doing an apprenticeability determination requests are health information management hospital coder, clinical improvement documentation specialist, health information management business analyst and HIM data analyst those are the four.

Joseph Jenkins – Team Leader, Marketing & Promotions – Office of Apprenticeship Employment and Training Administration – US Department of Labor

Yeah.

Stephen Sage – Apprenticeship & Training Representative – US Department of Labor

There probably will be other occupations that will be.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

And believe me when you start making a distinction between a data analyst and a business analyst that's the kind of thing that is going to be very difficult for like a SOC or even O*NET to handle probably but anyway.

Joseph Jenkins – Team Leader, Marketing & Promotions – Office of Apprenticeship Employment and Training Administration – US Department of Labor

Yeah, that's exactly right and this is just the beginning. We are already meeting with employers that are also a part of the AHIMA organization. So, this actually could be one of the larger programs we've had and could be our biggest venture into the HIT occupations.

I didn't mention it before and I don't know if you guys – we talked about this a little bit, but the very first – our first move in any type of Health IT occupations was with the CDC and that kind of got the ball rolling in all of the other areas and it was part of the CDC already had their CDC fellowship program but they were looking to extend the fellowship program and they were looking to look at a little bit more certification for that program as well. So, that was two years ago and that program has now expanded to two other areas in CDC so we are working with them in two other areas as well.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

So, scoping back even further, so, Department of Labor has this notion of creating apprenticeship programs and –

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

No we don't really create them, we approve them, other people bring them to us, right?

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

You approve them?

Stephen Sage – Apprenticeship & Training Representative – US Department of Labor

Yeah.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Maybe we need to explain that whole process.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

Yeah, that would be great.

Joseph Jenkins – Team Leader, Marketing & Promotions – Office of Apprenticeship Employment and Training Administration – US Department of Labor

I mean, our role is we actually do go out and market our ability to work with people from a consultant capacity to put together apprenticeship programs to tie them in with educational institutions or to tie them in with institutions like AHIMA and other institutions that provide the related instruction or provide the related training, theoretical training for those particular occupations.

Our responsibility is to try to get businesses and organizations to do that in order to fulfill projected and sometimes present skill gaps that they have in their organizations. So, yeah, you know, we do go out and sell those services but we do have a lot of employers come to us looking to develop their workforce understanding that people are not readily ready to perform at a high level simply because they have a college degree or because they've graduated from a junior college or a technical school that requires a systematic training process in order for them to produce at the highest level and therefore registered apprenticeship is a part of that systematic process.

It is the same as it has been all along as far as the health institutions or the medical institutions it has been there a long time ago when doctors actually graduate from medical school they still have to do a residence which is, you know, there are still practices that they have to go through and there are still certifications that they have to complete and after that internship they are able to become actually MDs. So, the process is still pretty much the same.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

Okay, that was helpful, thank you.

Norma Morganti – Executive Director, Midwest Community College Health Information Technology Consortium – Cuyahoga Community College

Larry, this is Norma Morganti and I certainly wanted to thank the folks at the Department of Labor for describing the registered apprenticeship and just so I could describe why we were interested from the community college consortia aspect for the very technical roles an implementation support specialist was one where we were approached by an employer and of course we had many conversations with the ONC and amongst community college consortia about perhaps working on apprenticeships and I think Patricia certainly has another aspect to that, but really to take one of the roles that we were training with and combining that with on-the-job experience that the employer was very much needing to scale their organization and start filling the gap.

So, it is really a nice partnership between what was a standard curriculum across multiple colleges and potentially, you know, a regional need for an employer or local needs and because the Department of Labor these apprenticeships can be communicated much more easily than not only along the state level but regionally and nationally. So, it's a nice way of us communicating and perhaps allowing these apprenticeships to grow a little bit more rapidly, because we all had common curriculum and a common approach underneath the ONC's community college consortia training program. So, I just wanted to add that.

Joseph Jenkins – Team Leader, Marketing & Promotions – Office of Apprenticeship Employment and Training Administration – US Department of Labor

Yeah, and I also wanted to say, this is Joe Jenkins again, how much we value that, because the community college serves basically as that base and that continuum development of the registered apprenticeship program simply because they have to structure the course and the curriculum all set up and design to make that process work. So, it's a natural partnership and it was also a natural partnership for HHS which understood where the occupation was going, how it was needed and the types of partnerships there were needed to put this together.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

So, if I can try to extrapolate this, so you created an apprenticeship program, is that right, Norma, that's what you were saying to support some of your students?

Norma Morganti – Executive Director, Midwest Community College Health Information Technology Consortium – Cuyahoga Community College

Yes.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

But now this is a registered apprenticeship so other people could look at the model and pick it up for themselves is that the notion here?

Norma Morganti – Executive Director, Midwest Community College Health Information Technology Consortium – Cuyahoga Community College

Yes.

Joseph Jenkins – Team Leader, Marketing & Promotions – Office of Apprenticeship Employment and Training Administration – US Department of Labor

Yes, other people could and I mean that's one of the great things about apprenticeship is that once the design is made, I mean, and each employer, now this is the thing about it, each employer may decide to do it basically the same but there may be other criteria that they have and other things that they need for their program and they are able to tweak it and do that as well, but it does form the base for this particular occupation and the approach.

Chitra Mohla, MS – Director, Workforce Programs Office of Provider Adoption Support (OPAS) – Office of the National Coordinator

Joseph this is Chitra is there also some funding available through the web to support the apprenticeship program?

Joseph Jenkins – Team Leader, Marketing & Promotions – Office of Apprenticeship Employment and Training Administration – US Department of Labor

You know, I'm not really one to say, I mean but there has been in the past. In the past there has been some funding, but I'm not really aware of anything right now. I think not long ago there were probably – there was a sum of money that was sent out to promote the concept, particularly in the healthcare industry. So, I'm not exactly sure of any opportunities at this point.

Chitra Mohla, MS – Director, Workforce Programs Office of Provider Adoption Support (OPAS) – Office of the National Coordinator

Thank you.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

So, I think what is sort of interesting is the two conversations might relate to each other maybe some others could comment on this. So, it sounds like in the apprenticeship program and with some of the work that has been happening with O*NET recently that you have been setting up some new classifications and so maybe we could actually learn from the things you guys have set up recently that maybe are in some sense on track to getting at least the descriptive support to lead an SOC code down the road.

Joseph Jenkins – Team Leader, Marketing & Promotions – Office of Apprenticeship Employment and Training Administration – US Department of Labor

Well, I mean, that's a long process and Pam has explained it to me very clearly, but I think that the better we can identify occupations the better we can identify the needs, the more control we have over looking at the numbers I think that's the only possibility I see as far as moving down the road toward SOC, but I understand that it's still a very difficult process.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Yeah and I would, this is Pam, I would just say that typically the level of detail that is in an apprenticeship is much more detailed then the kind of thing that would end up in SOC or O*NET.

Joseph Jenkins – Team Leader, Marketing & Promotions – Office of Apprenticeship Employment and Training Administration – US Department of Labor

Yeah, it is.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Their actual job titles and rather than groupings of job titles.

Joseph Jenkins – Team Leader, Marketing & Promotions – Office of Apprenticeship Employment and Training Administration – US Department of Labor

Right.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

But they help inform us.

Joseph Jenkins – Team Leader, Marketing & Promotions – Office of Apprenticeship Employment and Training Administration – US Department of Labor

That's exactly right. I think it is a piece of the puzzle but I don't know how big.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

All right. Any other comments from the Workgroup?

Joseph Jenkins – Team Leader, Marketing & Promotions – Office of Apprenticeship Employment and Training Administration – US Department of Labor

Thank you for your time and welcome to the world of apprenticeship.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

So, let me flip this around with a question for you guys. So, you know, there are websites and firms, and organizations various kinds that do job placement, so sort of looking at the flip side of this.

Joseph Jenkins – Team Leader, Marketing & Promotions – Office of Apprenticeship Employment and Training Administration – US Department of Labor

Right.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

You know, companies go to them to say, we're looking for people or people who are working on their resumes looking for new jobs say, you know, I want to get visibility what are the key words I should use. So, have you worked with any of those services and found them particularly helpful or effective in trying to better understand how people are actually using, you know, job titles if you will and how those might inform updates to classification?

Joseph Jenkins – Team Leader, Marketing & Promotions – Office of Apprenticeship Employment and Training Administration – US Department of Labor

I really can't say that we are doing a lot with those organizations. I think there has been a real interest in what I'm going to call – these are like some like – that would be for us kind of like contractor organizations that's what you mean?

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

No, I'm thinking about things like, you know, a few years ago Monster was sort of the one to sort of break into this whole space but there are dozens of them out there now that, you know, where you could post a resume and employers could go search for you or they could post jobs and you could go search for the jobs.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Yeah, are you talking about real-time labor market information that are analyzing the job postings and the resumes that are on-line?

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

Yeah, well so I'm looking at that and going, well, you know, that is the granularity of right, individual jobs that then sort of rollup into job titles and job roles, and job classifications of various kinds.

Joseph Jenkins – Team Leader, Marketing & Promotions – Office of Apprenticeship Employment and Training Administration – US Department of Labor

No not for us. I mean, really. I mean, we're basically dealing with what we call now non-traditional interests which is healthcare and others but we have standard organizations that have always dealt with apprenticeship over a period of time. So, we're getting in some of this non-traditional and non-traditional interest is kind of new territory for us and some of the jobs are new.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

Okay.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

This is Pam again, I can say from like the stand-point of O*NET that we do actually collect the job titles from people that – you know, we aggregate data from multiple respondents to get an O*NET description but we do collect their job titles and so those are actually listed in the O*NET report and there is a whole file of them and we actually also use it to support our key word search so that if someone types in something that, you know, people don't type in SOC titles they type in all kinds of things.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

Right.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

You know, instead of saying artist, musician or singer they put in rap artist or something, you know, crooner who knows what they put in, anyway, so we capture all those words because, you know, we can just capture them on the Internet and use them to support lay titles file. Oh, sorry, Joe has to leave, but –

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

Okay.

Joseph Jenkins – Team Leader, Marketing & Promotions – Office of Apprenticeship Employment and Training Administration – US Department of Labor

Thanks a lot guys enjoyed it.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

Thank you, Joe.

Joseph Jenkins – Team Leader, Marketing & Promotions – Office of Apprenticeship Employment and Training Administration – US Department of Labor

Well, thank you.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Yeah, so we do use that and actually, I mean, all of those data mining services now – I mean, we also – operates basically an employment service, you know, we have 2600 American job centers that provide services to people who are coming and looking for job. So, I mean, we don't necessarily go to Monster and Manpower and people like that, but we have our own, you know, people coming in the door.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

Right.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

But we also are looking at whether we can look, you know, I don't know, get a hold of some of that real-time data to look for other things to see what's going on and, you know, we do look at like the associations they have a lot of information out there. We look a lot at like information on certifications and things so the stuff that is on AHIMA's website has been very helpful for example and other, you know, other organizations like that.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

Yes.

Chitra Mohla, MS – Director, Workforce Programs Office of Provider Adoption Support (OPAS) – Office of the National Coordinator

So, Pam, are the job titles publically available?

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Yeah, well, publically available, we show – in O*NET on-line, sorry we don't have the Internet connection I could just show you, but like there are three reports in O*NET the summary, the detailed and the custom and so you can see more and more job titles at different levels, but also, I mean the whole file is there. So an analyst can download the files from the O*NET resource center site and look at what job titles we have matched under things.

You know I've got to tell you though job titles are really problematic sometimes, you know, like the title project manager in a context that means a whole lot, but it depends a whole lot if you are a project manager in an IT firm or if you are a project manager in a marketing firm, or if you are a project manager, you know, I mean what kind of project are you managing? If people write that title down we do not know what they are if that is all we know about them, you know, so there are a lot of very, very ambiguous job titles out there and people tend to – and you know.

And also some companies like to make things sound proprietary and so they make up new titles, you know, and I've even had people say, you know, in the IT world I think that is actually sort of fad and so it's the IT world it could be the Health IT world too they like to distinguish themselves so they end up with the word guru in a job title, you know, well that's a new one, you know, we don't have a code for guru. So, you know, I mean people are always doing very creative things with job titles which you cannot necessarily easily reflect in a classification system, but anyway, yeah, I can send you the link.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

I think we should push for IT guru that would be great.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Yeah, okay and then you can start reporting that on your Census form.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

That's right. We'll in fact do a campaign for people to do that on the next Census.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Right, right. But, yes, I can send you the link to the title file too that you can download.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

Okay.

Chitra Mohla, MS – Director, Workforce Programs Office of Provider Adoption Support (OPAS) – Office of the National Coordinator

Okay, thank you.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

It will probably be overwhelming but that's okay.

Pam L. Frugoli – Manpower Analyst, Employment & Training Administration – US Department of Labor

Well, I can maybe pull out the health stuff for you, let me see if I can manipulate it or not I don't know if I can download in Excel I can do something with it.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

Okay that would be great. So, any other comments before we switch to our own discussion about next steps?

Patricia Dombrowski, MA – Director, the Life Science Informatics Center – Bellevue College

This is Patricia Dombrowski, I just wanted to add a related thought to this. We are working through Department of Labor funding to establish a Health IT apprenticeship inaugurated in the veteran community and what we've found recently is it's a very attenuated process to elicit an employer commitment it's – you need to seat a job with a progressive wage into an organization and that's no small undertaking when you get into large organizations for instance the US Department of Veterans Affairs.

Norma Morganti of course can speak to this as well and Norma you're much farther down the road, however, what we've run into is while there is every aspiration and intent on the part of the employer the actual HR, the human resources part of it is very difficult and we've had the veterans – the US Department of Veterans Affairs have had to pull out from for instance their intention to be a pilot site because of that.

My hope is that perhaps a recommendation of this Workgroup could be encouragement to employers to understand the commitment sort of from the top down rather than isolated advocates within an organization and if there was a way for this Workgroup to move forward a recommendation some wording around that that pointed employers toward apprenticeships and an understanding of what that encompassed I think that would go a long way towards moving workforce development forward in that channel.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

So, if you will sort of the next level of detail of what was done with this apprenticeship program that was being developed that Joseph talked about.

Patricia Dombrowski, MA – Director, the Life Science Informatics Center – Bellevue College

Yes.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

So, I'm going to guess, but I don't know, is that something that is actually out there that the apprenticeship program maintains as sort of like here's the framework of this is what the apprenticeship program requires so we could begin to build on that?

Patricia Dombrowski, MA – Director, the Life Science Informatics Center – Bellevue College

Yeah, definitely and Norma you probably – you are farther down the road, again, so I think you probably access these resources more than we have but I think just the baseline information that apprenticeships in Health IT exists, which they never had before, and here's how they can help you, here's the way your organization prepares. I don't think there is that connector piece. Norma what do you think?

Norma Morganti – Executive Director, Midwest Community College Health Information Technology Consortium – Cuyahoga Community College

Yeah, I would agree with you Patricia and I would agree that they are of value, as you and I know, in building momentum for workforce development partnerships between colleges, universities and employers and as we all know through the time that we were working in the community college consortia those are really, really critical when you're building very, very rapidly and so having that common language and that common approach helps to scale initiatives much, much more quickly so I agree with you if we could somehow advocate and let those who would be interested know about the commitment but the value of those partnerships.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

Yeah, I guess I'm thinking I know that Kindred is involved with some discussions with one of the local universities about training programs that more directly align with the kinds of things that we need and competency exams is part of that training and sort of a very focused training. So, it might be interesting to think about the flip side if there is a structure of how we might look at apprenticeship programs we would run for these students so they could actually get the hands on skills that we always complain about they're not having. I'll pass that on. If someone has some links to the apprenticeship stuff I'll pass that on.

Okay, maybe we should transition into what we are going to do for our next steps so let me do the easy one, I think it's the easy one. Let's talk about what we think we want to do around SOC codes. We know towards the end of the year there is going to be kind of a public process for the next round of SOC codes and clearly the folks on this Workgroup are interested in seeing some progress in that direction.

It sounds like we learned today about O*NET might be an interesting staging ground for some things beyond SOC and not everything will end, begin or end with SOC, but thoughts from the Workgroup about how we might look at next steps?

Michelle L. Dougherty, MA, RHIA, CHP – Director of Research & Development – AHIMA Foundation

This is Michelle, one of the areas that I think could use this group's leadership is in the structure of the classification system. So, what I heard today, you know, was there an IT specific job?

There are healthcare clinical type jobs, but these hybrid workers, or that is how they were referenced, don't have a logical set so they've been placed under like the clinical nurse informaticist under an IT umbrella, and do many of these Health IT roles is it or can we help to justify is it its own unique classification, some type of hybrid that needs it's recognition?

It just seems like that type of thought leadership is better coming from a group like this versus, you know, independent organizations who might have different thoughts. And it just feels like a very large undertaking but a very, very important one.

William Hersh, MD – Chairman, Department of Medical Informatics & Clinical Epidemiology – Oregon Health & Science University

This is Bill Hersh, you know, I definitely agree with that and, you know, I wonder, you know, there's a lot of people and organizations out there that think about these things, you know, AHIMA, AMIA, you know, maybe even HIMSS, you know, I wonder, you know, convening, you know, maybe a larger group, I mean, not, you know, not wanting to get too unwieldy but, you know, maybe have those organizations inviting representatives to take part in it, you know, might be a way to get a broader consensus or if not consensus just a conversation.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

So, I like that notion of, you know, how do we move forward this discussion and I guess I'm wondering about what our options are for ways in which we can convene things. So, obviously we can bring some experts to come talk to us in terms of our own work or ONC's work. The other mechanism I've seen are public hearings virtual or physical. I'm not sure what other kinds of process things we can do to convene something. Other thoughts from folks?

Michelle L. Dougherty, MA, RHIA, CHP – Director of Research & Development – AHIMA Foundation

So the one – maybe going against a public hearing is having people who understand the structure of the classification system I think would be very helpful in terms of participants and some type of an expert working group or advisory working group.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

So, what I'm hearing Michelle is a concern that a public hearing is sort of like that's what it is it's a hearing expert's speak but there actually is work to be done here.

Michelle L. Dougherty, MA, RHIA, CHP – Director of Research & Development – AHIMA Foundation

Yes, I think so and it also comes down to being clear about what our umbrella definition is of Health IT workers or occupations. We've had some early thoughts on it but I think we've danced around it quite a bit and talked about some things we think are the majority or not and I know I'm a little fuzzy so it's hard to tell what should fall under the umbrella or not. So, I guess that would be a second part of or part of a classification recommendation is we have to be pretty clear ourselves what is all encompassed under Health IT occupation umbrella.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

So harking back to our earlier discussions about what are we talking about when we talked about workforce?

Michelle L. Dougherty, MA, RHIA, CHP – Director of Research & Development – AHIMA Foundation
Exactly.

Norma Morganti – Executive Director, Midwest Community College Health Information Technology Consortium – Cuyahoga Community College

This is Norma, I would agree with what Michelle just offered. I think that would be helpful as I think today that did get a little bit fuzzier for me.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

The set of things that should be in the classification?

Norma Morganti – Executive Director, Midwest Community College Health Information Technology Consortium – Cuyahoga Community College

Yeah, and certainly – and I think there are a lot of folks working within the general lumps – we can try to be concise and – it becomes more of a tool for communicating to stakeholders who need to understand what the field looks like and it is multifaceted but certainly before we make that recommendation we need consensus as Michelle had indicated would be helpful.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

So, I'm curious to pick on one small piece Michelle that lovely interactive structure you showed us how did you go about defining the nodes that made it up?

Michelle L. Dougherty, MA, RHIA, CHP – Director of Research & Development – AHIMA Foundation

In this matrix there were 6 job families and then there were levels that kind of loosely correlated to education level so you would see a progression we'll say and in the partner that we worked with on the development they helped us look at how to structure those job families and I think there is some potential foundation there for expanded job families.

So, obviously those job families reflect the AHIMA memberships so those with HIM, Health Information Management, or Health Care Informatics type of background so you saw everything from education, privacy compliance, security to information technology departments, to some of the core health information roles in its revenue cycle but that's not encompassing of all, you know, there are other job families as well that could be added.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

Sure, but in terms of your own process?

Michelle L. Dougherty, MA, RHIA, CHP – Director of Research & Development – AHIMA Foundation

Yes.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

So, is this something where you specifically surveyed members or as part of their normal membership process they have a free text box and they do like on the Census they fill in their job or – ?

Michelle L. Dougherty, MA, RHIA, CHP – Director of Research & Development – AHIMA Foundation

We did a special survey and I would have to go back into the process because I wasn't part of the research in how the families were collected. So, those families may have been decided after analyzing some type of workforce or occupation information but then special surveys went in and those surveys went out to members and it was asking them things like what were your previous occupations so trying to get – those were part of that pathway process of finding what was your job progression –

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

Right.

Michelle L. Dougherty, MA, RHIA, CHP – Director of Research & Development – AHIMA Foundation

And how did you move in your career. So, that's where the survey validation came in and then it also validated education, you know, the salary data, credentials, functions, roles and functions, you know, that went into that job as well.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

So, a fair amount of HR work if you will?

Michelle L. Dougherty, MA, RHIA, CHP – Director of Research & Development – AHIMA Foundation

Yeah, well at least analyzing data on occupations and we worked with – and that was the same group that worked with, I want to say, the Department of Energy when they did their career map and helped to identify the families and the structure. So, they have a methodology that's not, you know, that is not limited to healthcare but a methodology that is used with the job families to try to look at how we might group occupations and where there may be some leveling and there may be different job titles but there are some relationships.

So, for example our technical system architects, data scientists, you know, servers, I mean, those who maintain the physical architecture might be under one family or maybe there are multiple families that we would divide out, but I think there is potentially something there to build from since we've seen the energy industry use that type of a map to describe the breadth, you know, of occupations and job families.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

Yeah, that might actually be an interesting group to bring in.

Michelle L. Dougherty, MA, RHIA, CHP – Director of Research & Development – AHIMA Foundation

Yeah.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

If we wanted to put one of those meetings together.

Michelle L. Dougherty, MA, RHIA, CHP – Director of Research & Development – AHIMA Foundation

We heard from them early – I mean, it was so early in our workforce or in this workgroup's history that we, you know, potentially – I remember it because it was similar to the work we had done and we've had some follow-up conversations with Michelle Fox, but it was one of the first meetings that we had finding out what they went through to define the energy industries emerging occupations.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

Any other thoughts about next steps on this one?

William Hersh, MD – Chairman, Department of Medical Informatics & Clinical Epidemiology – Oregon Health & Science University

Well this is Bill again, I'll just reiterate that, you know, I tend to be a data driven person and, you know, it seems to me that, you know, having data about, you know, the needs – I've talked a number of times, you know, what do the employers actually need, you know, and want and, you know, maybe have that contribute to our agenda in some way.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

Yes. Okay, I thought that was pretty good. Any next steps relative to the apprenticeship program? My sense is that it was something else to sort of add to the toolkit some of the early things that we put together about here are things that are out there some of which had ONC sponsorship some of which were just good things that we learned about. But I didn't particularly – other than making the world aware that there is structure around apprenticeships that might be useful to build on I didn't see a specific set of issues that we should be picking up on. Did I miss something?

Norma Morganti – Executive Director, Midwest Community College Health Information Technology Consortium – Cuyahoga Community College

Larry, it's Norma, I think one of the – if I heard Patricia correctly and Patricia correct me if I'm wrong, perhaps if we have an opportunity to make additional recommendations that we would be a little bit more – have greater advocacy for leadership support amongst employers and educators for the development or the support for these apprenticeship models as they can be very valuable. So, having been aware of them and being updated on the committee that we somehow incorporate those into our recommendations in the future that was my thought the next step should be.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

Okay. So, it sounds like that one is much less the kind of actual work for us as is the SOC piece. Maybe we're at a good stopping point for now and we should open this up for public comment. Before we do that any last comments from the Workgroup? So, how about let's do that then, can we get public comment on this?

Public Comment

Michelle Consolazio – Office of the National Coordinator

Operator can you please open the lines?

Ashley Griffin – Management Assistant – Altarum Institute

If you are on the phone and would like to make a public comment please press *1 at this time. If you are listening via your computer speakers you may dial 1-877-705-2976 and press *1 to be placed in the comment queue. We have no public comment at this time.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

Well, I guess I'd like to thank everybody for their time today. We had some pretty good discussion. Thank you Chitra for helping organize our speakers that was really very informative today. And we have our next meeting scheduled but I don't have the calendar right in front of me. Chitra do you know what that is or will we just send a note to folks?

Chitra Mohla, MS – Director, Workforce Programs Office of Provider Adoption Support (OPAS) – Office of the National Coordinator

Yeah, we will send a note it's next month, it's a month from today.

W

Okay.

M

Okay.

Michelle Consolazio – Office of the National Coordinator

Thank you.

Larry Wolf – Senior Consulting Architect – Kindred Healthcare

Okay, well thank you everybody.

M

Thanks everyone.

M

Okay.