Basic Training: Community Colleges Tackle Six-month Health IT Programs

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By Lisa A. Eramo

The federal government has put $70 million toward training programs to boost the health IT workforce. Colleges got to work without knowing who would enroll, who would teach, and who would offer the jobs. This month, the first students are in the seats.

This fall, more than 80 community colleges in five different geographic regions opened their doors to what the Office of the National Coordinator (ONC) hopes will be thousands of students enrolled in intensive six-month nondegree health IT training programs.

ONC allotted approximately $70 million for the program it has named the Community College Consortia to Educate Information Technology Specialists in Health Care. Its goal is to satisfy an expected demand for a health IT workforce that can assist with EHR implementations nationwide.

The program is intended to address a deficit the Bureau of Labor Statistics, Department of Education, and independent studies say could be as many as 50,000 health IT workers over the next five years. ONC hopes the program will yield more than 10,500 new workers annually by 2012. That workforce will help meet demand that the federal government itself is creating through 60 regional extension centers that will assist providers in joining the meaningful use EHR incentive program.

There are challenges and uncertainties for all involved. The colleges had to create programs, recruit faculty, and enroll students in short order, and no one can guarantee jobs will be waiting or that the programs can sustain themselves once the funding ends.

Looking to Accredited Programs

In April 2010 ONC awarded five cooperative agreements to five leading community colleges, each representing a distinct consortium of additional community colleges. Since April, recipients have moved quickly to establish programs scheduled to begin September 30.

"This time frame is one of the shortest I've ever worked under-and for one of the largest projects," says Kay Gooding, MAEd, MPH, RHIA. Gooding served as the program chair of the health IT program at Pitt Community College in North Carolina and now serves as the director for the region D consortium. Region D, which includes 20 community colleges, was granted $10.9 million for the first year of the two-year grant-the largest sum granted to any of the five consortia.

Fortunately, many of the community colleges throughout the nation already had well-established HIM and health IT programs, several of which are accredited through the Commission on Accreditation for Health Informatics and Information Management Education.

"We are definitely leaning into HIM and HIT faculty who are already on staff. We need to take our existing programs and align them with the national curriculum as we receive it," says Norma Morganti of Cuyahoga Community College in Ohio. Morganti is also the executive director for region C, which includes 17 community colleges.

The program curriculum was developed through a separate program. ONC awarded $10 million in grants to five institutions of higher education as part of its Curriculum Development Centers Program to develop the curriculum on which the health IT

programs are based. A related initiative-the [Competency Examination](#) for Individuals Completing Non-Degree Training Program-will help establish a baseline proficiency for the IT programs on which a potential certification may be based.

Although the five institutions of higher education provided half of the curriculum in August, the remainder is not expected until mid- to late October, presenting a variety of obstacles in terms of recruitment, marketing, and course development.

"It's very difficult to recruit students when you're not exactly sure what you're recruiting them to learn," Gooding says.

Recruiting faculty has been an unusual challenge, also. Although federal funds were awarded in April, monies weren't dispersed until budgets were official in late summer, making it difficult to hire faculty in advance, says Gooding.

"Some colleges have been able to absorb this more easily than others that have not had the flexibility. [The latter] are really going to be on a tight timeline to try and get faculty on board and be able to get the courses ready to go," she says.

The long-term uncertainty of the programs is another challenge. The ONC grants last two years, says Gooding. "One difficulty is trying to entice faculty into accepting a short-term position. Come April 1, 2012, the job will cease unless a college can maintain funding individually and continue the program. Whether or not the community college can sustain it beyond that will depend upon the number of students who continue to show an interest and the local college's ability to continue without federal funding," she adds.

CAHIIM Accreditation a Common Factor

Despite their differences, most of the schools in the consortia have one thing in common-accreditation through the Commission on Accreditation for Health Informatics and Information Management Education, otherwise known as CAHIIM.

Gooding says this commonality reflects the value that an HIM education brings to the table. "By far, we are the profession that has the level of understanding needed to be able to make this transition to EHRs happen," she says.

Gooding, who recruited only CAHIIM-accredited schools when drafting her grant proposal, says schools with this particular distinction could develop the programs under such a tight timeline because they already have sound HIM and health IT programs.

"I knew that the programs at these schools would have the level of detail that was going to be required," she says. "I also knew the schools would know exactly who to reach out to and bring in for the expertise that would be needed."

Summers agrees. "Those of us that have accredited programs have good links with employers and an excellent cadre of adjunct faculty as well as connections through the regional extension centers and healthcare providers," he adds.

Targeted Training on Six Roles

Another big unknown is whether there will be enough student interest in the programs, many of which will provide significant financial aid or stipends. Through the spring and summer, the consortia schools worked at defining who their programs were targeting.

Each of the five consortia is tasked with training individuals for six priority workforce roles:

- Practice workflow and information management specialists
- Clinician/practitioner consultants
- Implementation support specialists
- Implementation managers
- Technical/software support staff
- Trainers

HIM professionals, in particular, are well suited for all of these roles, especially the practice workflow and information management specialist, says Gooding. "I can't think of a better group of people than HIM professionals to fill this role because we understand the intricacies of the flow of medical information," she adds.

Individuals with more of an IT background may also be drawn to the programs, says Mike Summers, provost of the Virginia Beach campus of Tidewater Community College and principal investigator of the grant for region E. The region, which includes 23 community colleges, received $8.5 million for the first year of the grant.

"I don't think anybody is questioning HIM's ability to fulfill these roles," Summers says, "but it's a capacity issue. How do they do all of this in addition to everything they're doing now?" Tidewater Community College plans to focus its marketing on IT specialists looking to move into the more stable industry of healthcare.

Another challenge is determining which students will qualify for the program-a point that was frequently debated throughout the summer and during ongoing consortia conference calls.

"My personal fear is that if we don't have some sort of consensus, we'll have some regions that will enable certain individuals to qualify and other regions that would not allow that same individual to qualify. Then we'd have inequity," says Gooding.

Summers says establishing a detailed application process is the only way to ensure the right students enter the programs. "I think most of our intentions are to find people who have appropriate backgrounds so we can concentrate the curriculum on the real critical skills they need to make a difference out there," he adds.

At Tidewater Community College, candidates will be screened using an application that focuses on work background. Other evaluations will include an assessment of computer skills, IT, healthcare terminology, and culture as well as a one-on-one interview with advisors.

"When you're talking about scholarship dollars, we want to make sure that we're giving opportunities to folks who will have great success," adds Morganti. "If we can define the pre-requisite skills, experiences, and credentials that students will bring either from IT or healthcare, we can start building some really good assessment tools to help them identify their knowledge gaps and route them to additional training or experiences that will help them ramp up quickly for one of those roles."

ONC's Four-Part Program

The Community College Consortia is one piece of ONC's four-part workforce program. Two related initiatives directly support the consortia.

Curriculum Development Centers Program

ONC awarded $10 million to five institutions of higher learning to develop curriculum and instructional materials for workforce training programs, primarily at the community college level. Oregon Health and Science University will receive additional funding to serve as a training and dissemination center. The institutions are:

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

Competency Examination for Individuals Completing Non-Degree Training

ONC funded one institution to lead the development and initial administration of a set of examinations for individuals seeking to demonstrate their competency in health IT. The exams are intended for both graduates of the nondegree health IT training programs, other members of the workforce with relevant experience or training, and employers. The institution is:

- Northern Virginia Community College

Program of Assistance for University-based Training

Nine colleges and universities received funding to quickly establish or expand training programs for six health IT roles deemed to require university-level training. The majority of programs are intended to be completed within one year. The colleges are:

- Columbia University
- University of Colorado Denver College of Nursing
- Duke University
- George Washington University
- Indiana University
- Johns Hopkins University
- University of Minnesota
- Oregon Health and Science University
- Texas State University

Recruiting the First Class

As the summer progressed, schools were still unsure what types of students would be drawn to the programs. However, most assumed that local conditions would play a factor, as they typically do with community college programming.

Region C plans to localize its outreach efforts based on the unique needs and geographic area of each college, says Morganti. The consortium plans to use Web-based tools, public service announcements, and other forms of media that it can customize according to the locale. However, rural areas may pose a challenge.

"Some places have not even been connected to broadband or other types of infrastructure that will allow them to transfer data. There may be a lack of healthcare workers in the area or it could be very small practices where there just aren't enough individuals to fill all of those roles," says Morganti. "As with any monumental project such as this, we will need to be very innovative and forward thinking to create unique solutions to address varied workforce needs."

Disadvantaged or displaced workers are among the many individuals that Pitt Community College intends to target in its marketing efforts, says Gooding. In particular and due to its proximity to various military bases, the school will focus on recruiting veterans and their dependents.

Hopefully these marketing efforts will help schools reach their targeted numbers as set forth by ONC, which expects region A to train 750 students annually; region B, 1,650; region C, 2,250; region D, 3,300; and region E, 2,550.

"It's quite a large number of students-that's no doubt, but I think we may even be able to surpass these numbers," says Gooding. "We acknowledge that for our smaller and more rural schools, it's a large number, but we also have a large number of urban schools that are involved. We believe that they will be able to graduate a larger number of students, and it will balance out."

However, she worries that students may not be able to complete the program on a full-time basis, which may result in lower than expected numbers of completers at the end of the first year. "I think we're going to have more people trying to accomplish it on a part-time basis," she says.

Counting on Jobs

Summers says the largest challenge with recruiting students is trying to get them to understand that jobs will be available. "You can't get people to spend their hard-earned money to go through a program if I can't look them in the eye and say, 'Yes, we've got jobs for you.'"

The question of whether jobs will be available come March, when the first round of students is set to graduate, remains somewhat unknown, although ONC anticipates students could be hired by major healthcare systems, physician practices, clinics, software vendors, or consulting firms.

"It would be foolish to say that I'm not worried about job placement in this downward economy, but I also realize that if we can instill in the medical community the need for the electronic health record and the quality of the people that we intend to have complete the program, then I think we will have a ready source of jobs for our workers," says Gooding.

Morganti agrees. "Although many might say those jobs aren't as visible today as they may exist a year from now, I think that what we're finding when talking with RECs is that they are very concerned about having graduates ready to move into those roles," she says. "RECs are already identifying practices that are going to be implementing EHRs. RECs have said there won't be enough folks early on to fill those roles."

Each of the five regions is working closely with regional extension centers nationwide to help place students in jobs after completion of the programs.

"RECs' marketing and outreach effort is really critical to that need that our workforce training will fill. They are the front lines communicating to physicians and medical practices about meaningful use and electronic health record implementation," says Morganti.

From the start of the development process, each of the consortia was thinking ahead to how it would sustain its programs beyond the two-year grant.

Gooding says although Pitt Community College will be looking in-depth at sustainability, and she anticipates the program will continue to grow based on market demand. "We feel we have a very good chance at sustainability because we think we're going to have that many students who are interested," she adds.

It's all about building relationships with the community, which is oftentimes a strength of the community college system, Morganti says. "From our experience as member colleges, it's always about the relationships with local economic development partners and the businesses in our community. We always see our programs thrive when we're really in tune with workforce needs," she adds.

For more information about the Community College Consortia Program, visit http://healthit.hhs.gov and click on "HITECH Programs."

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