

Workforce Capacity and Data Standardization

Project Summary & Goals

This project was able to leverage designated KentuckyOne funding to request a federal match through a state-university partnership (SUP) contract with the Kentucky Cabinet for Health and Family Services (CHFS). The first aim of this project was to build a comprehensive database for workforce data integrating the numerous sources, which would assist with understanding the workforce supply and the context in which practitioners provide services (i.e., specialty designations, reimbursement sources, hours and locations of clinical practice). The second aim was to analyze workforce supply and demand and the gaps between the two. Over the course of two years, CIK developed relationships with professional licensure boards and the Kentucky Center for Education and Workforce Statistics (KCEWS), two viable sources of timely and reliable data.

Project Dates

October 1, 2015 to June 30, 2016

Principal Investigators

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Communities and Partners Involved

CHFS and KCEWS

Funders

This research was funded by KentuckyOne, and matched by the Centers for Medicare and Medicaid Services.

Key Findings

In October 2015, Dr. Susan Buchino attended the closing meeting of the National Governors Association Health Workforce Policy Academy with representatives from the Kentucky Office of Health Policy and the Kentucky Office of Workforce Investment. Participation in the one-year Policy Academy enabled Kentucky to learn from other states and receive technical support for understanding gaps in the health care workforce. During the meeting, the Kentucky team presented work from the prior year towards creating a plan to meet the aims of this project.

Throughout the project, CIK met with independent professional licensure boards to facilitate the integration of licensure board data into the Kentucky Longitudinal Data Set, which is housed at KCEWS and includes education and workforce data for the state. CIK also developed a core data set for the Kentucky, which could be used by licensure boards to promote a more comprehensive and accurate picture of medical service providers.