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Submitted via email to Hannah Jenuwine: jenuwine.hannah.r@dol.gov

Secretary Martin J. Walsh
U.S. Department of Labor
200 Constitution Avenue, N.W.
Washington, D.C. 20210

Re: Notice of Request for Information (RFI) on Sector Strategies to Meet Critical Workforce Needs Across Industries

Dear Secretary Walsh,

Vizient, Inc. appreciates the opportunity to respond to the Department of Labor (DoL) Employment and Training Administration (ETA) Request for Information (RFI) on sector strategies to meet critical workforce needs across industries, including healthcare. Vizient applauds DoL ETA for issuing this RFI to understand effective workforce strategies that will inform policy responses and for providing technical assistance to support broader adoption of sector strategies as the design of future grants is determined.

Background

Vizient, Inc. provides solutions and services that improve the delivery of high-value care by aligning cost, quality, and market performance for more than 60% of the nation's acute care providers, which includes 97% of the nation's academic medical centers, and more than 20% of ambulatory providers. Vizient provides expertise, analytics, and advisory services, as well as a contract portfolio that represents more than $130 billion in annual purchasing volume, to improve patient outcomes and lower costs. Headquartered in Irving, Texas, Vizient has offices throughout the United States.

Recommendations

Vizient appreciates the efforts of DoL, through the ETA, to learn from stakeholders to better understand effective workforce strategies for the healthcare sector. In addition, we encourage the agency to support current efforts, as outlined in our comments, that have been proven effective at addressing staffing challenges and protecting employees from workplace violence. Vizient offers the following recommendations for the ETA's consideration, and we look forward to future opportunities to engage with the ETA on policy solutions, particularly the need for increased funding to support healthcare providers.

Topic Area 1: Definitions

Staffing Considerations when Defining the Healthcare Sector
Vizient appreciates the efforts of ETA to learn the scope of the healthcare sector's critical workforce needs. Vizient works closely with hospitals and health systems to address staffing

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challenges that span both the clinical and non-clinical workforce; shortages of physicians, nurses, technicians, nursing aides and other bedside staff are an ongoing struggle that can have cascading effects. When technician shortages occur, the burden to complete their tasks often shifts to other employees with a broader, but overlapping, skillset. When hospitals experience shortages of professional staff, such as nurses, it drives increased utilization of technical and ancillary staff. This results in organizations implementing care models that include technical and ancillary staff, resulting in task shifting. Further, hospital finances are negatively impacted by this trend as current reimbursement rates do not reflect these staffing challenges. In addition, staffing shortages along the continuum of care, such as in a skilled nursing facility, creates backlogs of patients waiting to be transferred from a hospital, causing additional strain on the hospital workforce and patient access issues. Vizient encourages ETA to consider workforce broadly, considering both worker type and location of care given the interrelatedness of the healthcare sector.

Also, Vizient suggests ETA also consider tasks that could be reassigned to meet care needs. A [Vizient Clinical Team Insights data brief](#) found that reassigning administrative tasks and optimizing clinicians could increase advanced practice practitioner (APP) capacity by 836 visits per APP per year. Vizient also encourages ETA to consider opportunities to make available additional staff to delegate administrative tasks (e.g., medical assistance, registered nurses, care coordinators).

In addition, factors such as the Medicare Conditions of Participation (CoPs), accreditation requirements, and state and federal laws influence healthcare workforce decisions. Meeting such requirements is often essential to keeping a hospital's doors open. For example, Medicare CoPs include provisions regarding food and dietetic services, which effectively require additional staffing (e.g., food service employees and dieticians). Therefore, as ETA defines the scope of the healthcare workforce, it should also review additional requirements that healthcare employers must meet to remain operational.

Finally, it can be difficult for hospitals to find and retain staff for positions that do not commonly interact directly with patients for care purposes, such as cleaning or maintenance staff. Currently, hospitals are challenged to hire these types of employees for a variety of reasons, including increased competition in the labor market (e.g., locations not open evenings and weekends with similar wages). Vizient encourages ETA to work collaboratively with other departments and stakeholders to consider opportunities to provide additional support to hospitals to meet these staffing needs.

Partnerships
In the RFI, ETA requests comment on whether sector partnerships benefit from consensus on common definitions or key program components. Vizient believes that common definitions and clarity regarding definitions and key program components are important to partnerships as they help improve communication, consistency and performance improvement. To reach a consensus regarding such definitions and program components, Vizient encourages ETA to consider opportunities to receive input from healthcare providers and entities with expertise in workforce-related issues, such as Vizient.
Among other functions, Vizient supports health systems by identifying opportunities to improve recruitment and increase retention, engagement and productivity. Vizient's programs include [Clinical Team Insights](#); the [Physician and Advanced Practice Provider Onboarding Program](#); and the [Vizient/AACN Nurse Residency Program™](#), developed in partnership with the

American Association of Colleges of Nursing. These programs provide insights and resources to help health systems build a successful clinical workforce. In addition to these programs and Vizient's analytical insights (e.g., Vizient's Operational Data Base), we partner with health systems looking to address workforce challenges. For example, Vizient partnered with NYC Health + Hospitals to implement a large-scale nurse residency program to reduce turnover, improve transition to practice and support first-year nurses. Therefore, should opportunities arise from this RFI to take part in a consensus-based process regarding definitions or other elements that would shape potential solutions to workforce challenges, Vizient would welcome the opportunity to participate.

Topic Area 2: Partnership Roles and Requirements

As ETA is aware, hospitals and health systems are often the largest employers in their communities. Thus, it is important to view such providers as local and regional partners when designing regional sector partnerships. Vizient encourages inclusion of hospitals and health system leaders and employees when developing strategies that aim to respond to industry needs in a geographic area. With appropriate funding and support, these providers may also be well-positioned to lead partnerships.

As ETA considers partnership opportunities, Vizient suggests ETA also weigh key industry trends to support longer-term partnerships that reflect forward-looking care models. For example, the Vizient Workforce Intelligence Report highlights that travel nurse demand in October 2022 was more than double compared to October 2019 and demand is projected to stay at least 20% higher throughout 2023, compared to pre-pandemic times. As a result, hospitals have been encouraged to start engaging in more strategic partnerships with contract labor vendors as high costs of contract labor have been challenging for hospitals, particularly during the COVID-19 pandemic. The report also highlights the need to reimagine staffing models and support top-of-license practice to help reduce overtime and burnout. In addition, Vizient highlights that that the virtual nursing care model is growing in popularity where a virtual nurse's roles could include virtual rounding, documenting of care plans, calling providers to coordinate care and more. Other growing trends include the use of artificial intelligence in healthcare as a means to ease burden, among other functions. Yet, to set up these programs, additional technology and vendors may be needed, in addition to training. Given these trends, ETA could engage with payers to identify how their reimbursement strategies could be adjusted to support these care delivery changes as providers are often undercompensated or uncompensated when changes to staffing models are made or when new technology is incorporated. In addition, Vizient suggests potentially including different types of vendors (e.g., contract labor, technology) in partnerships given their growing role in newer models of care.

Topic Area 3: Promising Practices for Employer Engagement and Workforce Development (Employers, Workforce Development, Worker/Employee Representation, and Other Stakeholders May Be Interested in Responding)

Based on our experience working with hospitals and health systems on efforts to improve culture and address staffing challenges, Vizient emphasizes the importance of incorporating best practices and analytics into strategies to improve workforce challenges. For example, Vizient Safe and Reliable Healthcare is an integrated solution designed to partner with

healthcare organizations aiming to become a high reliability organization (HRO).[1] Through this solution, staffing challenges are addressed by utilizing a culture survey (i.e., SCORE Survey) and integrating culture data with clinical and operational outcome data, among other benefits. Recent research has shown that "Maintaining teamwork norms and behaviors during times of crises has long been touted as essential to support the safety of our patients and well-being of our workforce."[2] As a result, Vizient recommends that grants and other incentives be provided to hospitals and health systems to address workforce well-being and patient care. We also encourage ETA to consider opportunities to incorporate the SCORE Survey in potential policy solutions. Vizient notes our willingness to share more information with ETA regarding our work to help hospitals and health systems transition to HROs to help inform ETA's perspective on this approach in the context of workforce strategy.

In addition, Vizient is aware of a range of retention strategies, that focus on structural components (e.g., providing strong leadership; promoting wellbeing, resilience and work-life balance; leveraging learnings from data; ensuring team members possess the knowledge, skills and abilities to succeed in their role; promoting professional development). Currently, research has shown that the healthcare industry spends less on training than other industries ($600 vs. $1,296), and that the average number of learning hours per healthcare employee is lower than the average of all industries (25.5 vs. 34.1). Anecdotally, Vizient learned that it can be challenging for employees to attend trainings given competing priorities and when such training is not included in work hours. Vizient notes these statistics to highlight the room for growth in the structural considerations identified, and a potential opportunity for ETA.

Sharing lessons learned and best practices is foundational to Vizient's efforts. This has been shown to be one of the most effective ways to advance strategies to address workforce challenges. Some of the recent lessons learned include the deployment of robots for fetching and delivering items to reduce unnecessary wait times and reduce time wasted. Organizations have also implemented changes by using technical and support staff to fulfill bedside caregiver roles or used virtual nursing personnel for appropriate patient level tasks to reduce the burden on the staff in the unit. The use of virtual nursing has also been effective in supporting those who might otherwise leave the workforce, such as staff near retirement or working parents, by providing increased flexibility while bolstering the workforce. There are many available strategies that support developing a better pipeline of future healthcare workers and improving bedside care delivery. One of the challenges is balancing the cost to deliver care with financial reimbursement.

Also, residency programs are critical to transitioning new nurse residents into clinical roles and can help improve retention of new nurses. The need for such residency programs is critical as tenured nurses are retiring and it grows more challenging for hospitals to find experienced nurses to fill open positions. The Vizient/AACN Nurse Residency Program™ includes an evidence-based curriculum and final project, as well as interactive exercises. Vizient has long recognized the need for nurse residency programs and suggests ETA consider opportunities to

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[1] *See* https://psnet.ahrq.gov/primer/high-reliability stating "High reliability organizations are organizations that operate in complex, high-hazard domains for extended periods without serious accidents or catastrophic failures. The concept of high reliability is attractive for health care, due to the complexity of operations and the risk of significant and even potentially catastrophic consequences when failures occur in health care."
[2] https://journals.lww.com/journalpatientsafety/Fulltext/2023/01000/Teamwork_Before_and_During_COVID_19__The_Good,_the.6.aspx

fund additional programs as this will help satisfaction and retention. Further, as nurse residency program are considered, we also suggest supporting efforts to recruit and retain staff, including preceptors, for nurse residency programs.

Lastly, Vizient notes that we recently announced a pilot program to help hospital bolster retention by identifying and addressing employee social needs. Through this pilot, healthcare providers would apply the patent pending Vizient Vulnerability Index™ to their workforces and examine how social drivers of health affect a hospital's employee population. While results of this pilot are pending, we welcome the opportunity to further discuss this effort with ETA and how an area-based index could be utilized while providing technical assistance regarding workforce challenges.

Topic Area 4: Promising Practices for Worker-Centered Sector Strategies

As noted above, Vizient's workforce efforts often emphasize worker-centered sector strategies. These efforts range from culture, professional development, safety and social determinants of health. We encourage the ETA to convene listening sessions with stakeholders such as Vizient to further elaborate on the promising practices outlined in our comments.

Vizient also emphasizes the importance of considering solutions to workplace violence (WPV). In 2021, Vizient's Performance Improvement Collaboratives group hosted a WPV collaborative which addressed leading practices such as ensuring management commitment and worker participation with WPV efforts, performing worksite analysis and hazard identification, ensuring hazard prevention and control, and performing recordkeeping and appropriate WPV program evaluation. Other resources from Vizient also highlight steps to help address WPV (e.g., establish a threat assessment team; train employees to recognize and report warning signs to prevent incidents of workplace violence; and design a "zero incident" initiative"). Vizient encourages ETA to consider such promising practices to address WPV and additional resources to support providers' implementation of such efforts.

Topic Area 5: Resources

Given the drastic increase in labor costs since the start of the pandemic, employers such as hospitals and health systems are experiencing significant financial strain. Reimbursement rates have not kept pace with costs and the drastic changes that occurred to the healthcare system more broadly due to the pandemic are still being learned. As a result, providers need additional resources to support both ongoing and new workforce strategies. Vizient supports continued efforts to increase the number of Medicare-funded graduate medical education slots and applauds the passage of the Dr. Lorna Breen Health Care Provider Protection Act, which provides grants to improve mental and behavioral health among healthcare provider employees. Vizient also supports efforts that aim to prevent workplace violence and protect healthcare workers. However, more needs to be done to support healthcare providers in rebuilding their workforce and ensuring that said workforce does not continue to suffer from burnout, mental health challenges, and WPV. Providing additional resources to hospitals and health systems to allow them to implement such changes, including physical changes to buildings, are critical, yet often limited.

Topic Area 6: Federal Support for Sector Strategies

Vizient emphases that healthcare is a "critical" industry that demonstrates the greatest need for skilled workers in the next decade. For example, Vizient's [Workforce Intelligence Report](#) highlighted that as patient volumes and lengths of stay rise, financial margins struggle and nurse turnover remains high. Further, [Vizient](#) outlined how recent events have contributed to the "perfect storm of clinical workforce shortages." Healthcare providers furnish lifesaving care to patients. Thus, anticipated shortages, turnover and poor retention should be a cause for significant concern that warrants Federal support for sector strategies.

Vizient also encourages additional Federal support be provided to healthcare providers looking to adopt new technology to support the workforce. Since reimbursement rates are based on historic data and not all technology is necessarily eligible for payment adjustments, such as new technology add-on payments, it can be particularly challenging for providers to make such investments. Further, adoption of new technology can also require additional time and resources initially, in addition to ongoing maintenance and security considerations. To encourage adoption of such technologies, Vizient encourages additional Federal support for providers considering implementing new technologies as a means to reduce burdens on the healthcare workforce and promote workforce sustainability.

Topic Area 8: Measuring Success

As noted above, Vizient encourages ETA to consider use of the SCORE Survey as it can help organizations understand and improve their culture, engagement and burnout.

In addition, Vizient utilizes a range of [evaluation and benchmarking tools](#) in the Vizient/AACN Nurse Residency Program™ at various intervals and utilizes both quantitative and qualitative measures. For example, evaluations include an organization site survey (once each year), a residency demographic database (on hire or prior to residency start); and the Casey-Fink graduate nurse residency survey (at initial residency session, 6-, 12-, 24- and 36-months). Other evaluations include a nursing leadership survey, Vizient/AACN residency progression surveys, a post-residency survey and the Vizient/AACN graduate nurse residency program evaluation. Vizient also provides guidance regarding how to evaluate these measures to support improvements. Also, several annual analyses are shared with our participating provider members regarding the program (e.g., benchmarking report, outcomes report, site report, optional regional and system reports). Should ETA identify additional grant opportunities for nurse residency programs, we encourage frameworks that align with the approach utilized by the [Vizient/AACN Nurse Residency Program](#).

Topic Area 9: Local Needs Assessments and Capacity

As noted above, Vizient recently announced a pilot to help hospitals and health systems assess local needs of employees by utilizing the Vizient Vulnerability Index™ (VVI). Healthcare access is one of nine domains included the VVI. The healthcare access domain variables currently include the percent uninsured, provider shortages (primary care, dental and mental health) and distance to a hospital, at a local level. Vizient believes the VVI is a tool that could potentially be used by ETA to better understand local needs by viewing the healthcare access domain. More broadly, we believe the VVI may have additional applications related to workforce well-being and health equity that we encourage ETA to explore by making additional

funds available to hospitals and health systems. Also, ETA could consider use of the VVI in their decision-making processes as related to health equity for patients.

Topic Area 11: Sustainability and Scalability

Given the range of solutions that have been developed by Vizient and adopted more broadly, we are acutely aware of challenges to sustainability and scalability. For example, new programs may take additional time to refine and study to ensure effectiveness. In addition, implementation, both staff time and technological infrastructure can also pose challenges to sustainability as workforce strategies take time to implement but also to maintain. Despite these challenges, Vizient has been able to sustain and scale-up several of our programs.

Topic Area 12: Necessary and Beneficial Technical Assistance Support

In the near-term, as providers are emerging from the pandemic, Vizient encourages ETA to consider sharing information with stakeholders regarding regulatory changes impacting the healthcare sector to help support a smooth transition as public health emergency-related requirements and flexibilities expire. Currently, there is significant confusion regarding how the end of the PHE will impact care delivery, and so we encourage additional education to help support providers during this challenging time.

<u>Conclusion</u>

Vizient thanks the DoL ETA for the opportunity to share feedback in response to the RFI. We believe it is imperative that steps be taken to support the healthcare workforce as healthcare is a critical industry. Further, hospitals and health systems are particularly vulnerable to staffing challenges given the growing costs of clinical labor, challenging work environments (e.g., workplace violence, long hours etc.) and significant need for a range of employees. Vizient recommends ETA consider policy solutions that offer incentives and additional funds to hospitals and health systems to support effective workforce strategies. As noted throughout Vizient's comments, we have substantial and diverse experience in helping hospitals address workforce challenges and hope to be a resource for ETA as new policies are developed.

Vizient membership includes a wide variety of hospitals ranging from independent, community-based hospitals to large, integrated healthcare systems that serve acute and non-acute care needs. Additionally, many are specialized, including academic medical centers and pediatric facilities. Individually, our members are integral partners in their local communities, and many are ranked among the nation's top healthcare providers. In closing, on behalf of Vizient, I would like to thank the DoL ETA for providing us the opportunity to comment on this important RFI. Please feel free to contact me or Jenna Stern at jenna.stern@vizientinc.com, if you have any questions or if Vizient may provide any assistance as you consider these issues.

Respectfully submitted,

Shoshana Krilow
Senior Vice President of Public Policy and Government Relations
Vizient, Inc.

Appendix 1. Comparison of Various Area-Level Indices

	Area Deprivation Index	Social Deprivation Index	Community Resilience Estimates	Vizient Vulnerability Index
Data granularity	✗ County ✗ Zip Code ✗ Census Tract ✓ Block Group	✓ County ✓ Zip Code ✓ Census Tract ✗ Block Group	✓ County ✗ Zip Code ✓ Census Tract ✗ Block Group	✓ County ✓ Zip Code ✓ Census Tract ✓ Block Group
Timeliness	Updated in 2015 and 2019	2012 and 2015	Updated annually	Updated annually
Social Determinants of Health Domains	✓ Income & Wealth ✓ Employment ✓ Education ✓ Housing ✗ Access to Health Care ✓ Transportation ✓ Social Environment ✓ Physical Environment ✗ Public Safety	✓ Income & Wealth ✓ Employment ✓ Education ✓ Housing ✗ Access to Health Care ✓ Transportation ✓ Social Environment ✗ Physical Environment ✗ Public Safety	✓ Income & Wealth ✓ Employment ✓ Education ✓ Housing ✗ Access to Health Care ✗ Transportation ✓ Social Environment ✓ Physical Environment ✗ Public Safety	✓ Income & Wealth ✓ Employment ✓ Education ✓ Housing ✓ Access to Health Care ✓ Transportation ✓ Social Environment ✓ Physical Environment ✓ Public Safety
Intent	Mortality rate prediction	Health resource allocation	Assessing potential impact of disasters including COVID-19	Describes differences in life expectancy representing differences in chronic disease incidence and management
Health Care Focus	✓ Life Expectancy / Mortality ✗ Chronic Disease Prevalence ✗ Readmissions ✗ ED utilization ✗ Maternal Health	✓ Life Expectancy / Mortality ✓ Chronic Disease Prevalence ✓ Readmissions ✗ ED utilization ✓ Maternal Health	✗ Life Expectancy / Mortality ✗ Chronic Disease Prevalence ✗ Readmissions ✗ ED utilization ✗ Maternal Health	✓ Life Expectancy / Mortality ✓ Chronic Disease Prevalence ✓ Readmissions ✓ ED utilization ✓ Maternal Health
Measurement Focus	17 components 2 components account for almost all of the variation (income and housing) Poor fit to life expectancy (r^2 0.25)	9 components, including race (Black), gender and age (women 15-44) No serious issues with partial correlations Moderate fit to life expectancy (r^2 0.56)	7 household risk factors and 3 individual risk factors, including age (>64) Population with ≥3 risk factors has a moderate fit to life expectancy (r^2 0.44)	43 components in 9 domains. All are significant in different locations Good fit to life expectancy (r^2 0.87)
Geospatial Adjustments	Single index algorithm for the whole country	Single index algorithm for the whole country	Single index algorithm for the whole country	Index adapts to local relevance of each domain as it correlates with life expectancy