

Cancer Registrar Work Force Study



**RECRUITMENT AND
RETENTION TASK FORCE**

Linda Mulvihill, RHIT, CTR

History of Recruitment and Retention Task Force

- NCRA Strategic Management Plan
- Minimal data available
- Task Force established
- Rationale for a Workforce Study
 - Journal of Registry Management
Winter 2004

Recruitment and Retention Task Force

Linda Mulvihill

Sue Koering

Wendy Cain

Melissa Pearson

Donna Getreuer

Veronica Shrode

Jim Hofferkamp

Susan Van Loon

Stakeholders Advisory Committee

- Involve stakeholders
- Provide opinion and resources
- Bring forward specific issues

Stakeholders Advisory Committee Members

ACoS/CoC – Asa Carter

AJCC – Val Vesich

NAACCR – Vivien Chen, Betsy Kohler

NPCR – Ryan Intlekofer

SEER – Brenda Edwards



UCSF Center for the Health Professions

- Established at the University of California, San Francisco in 1992, grew out of the Pew Health Professions Commission (1989-1999)
- Conducted studies focused on allied health professions since 1995
- Audience includes health care professionals, educators, care delivery organizations, policy makers, and consumers

Cancer Registry Project Team UCSF

Susan Chapman, PhD, RN

Vanessa Lindler, MA

Christine Nielsen, BA

Dennis Keane, MPH

Vasey McClory, Intern



Purpose and Goals

To develop an understanding of the current Cancer Registry workforce

- Demographic profile
- Factors impacting supply and demand
- Workforce size, projections, vacancy rates
- Education and pathways to enter field
- Career satisfaction and retention

Methods:

Key Informant Interviews

- 30 interviews were conducted during a 4-month time period
- Structured in-person and telephone interviews lasting an average of one hour
- Drawn from leadership of professional organizations, employers, educators, and relevant credentialing and accreditation bodies



Methods: Survey

- The online survey was developed as a web-based survey
- A 143 item survey was developed
- A sample of 990 respondents was selected from three sources
- Final response rate: 55%



Methods: Focus Groups

- 6 focus groups
 - 2 in-person groups
 - 4 telephone groups
- 7–10 participants recruited for each group
- Groups lasted 1.5 hours each (with professional facilitator)
- 53 individuals participated
 - 23 from in-person groups
 - 30 from telephone groups

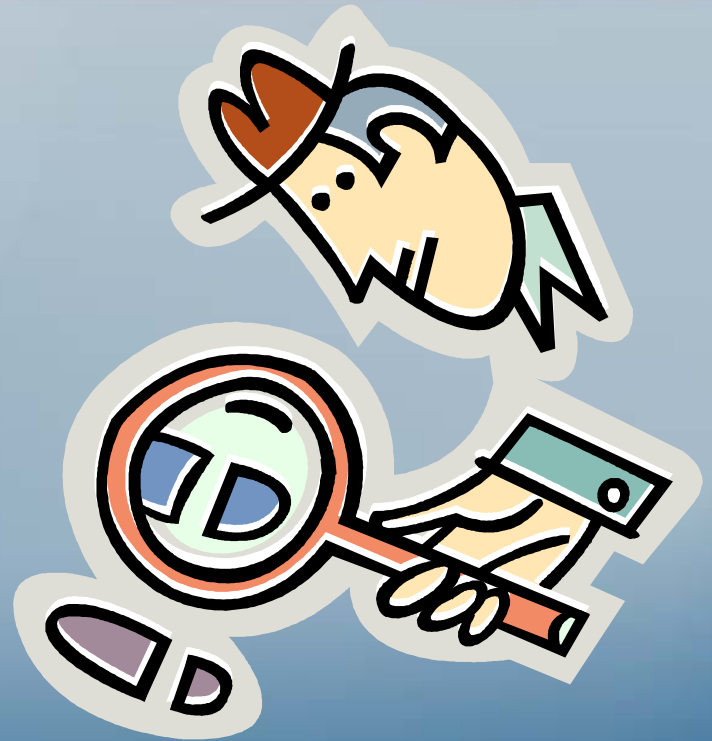


Methods: Literature Review

- An extensive literature review conducted over 9 months
- Key sources:
 - Peer-reviewed journals
 - NCRA publications
 - Federal reports
 - Information from organizations such as NAACCR, AHIMA, and the ACoS



Findings



Cancer Registrars Compared to Other Allied Health Professionals

- Wages
- Demographics
- Program graduates

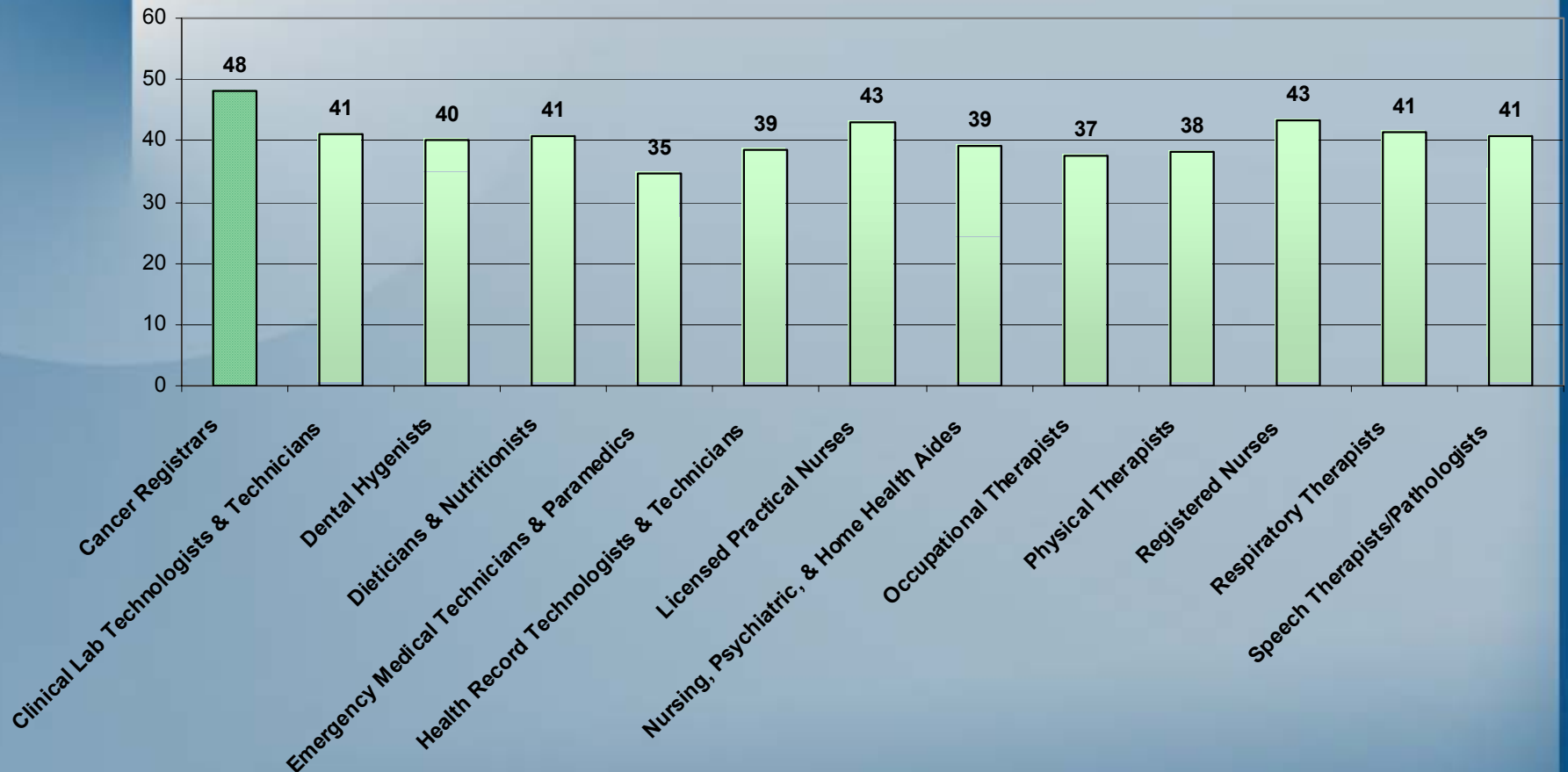
Caution!

- Different data sources
- Small numbers



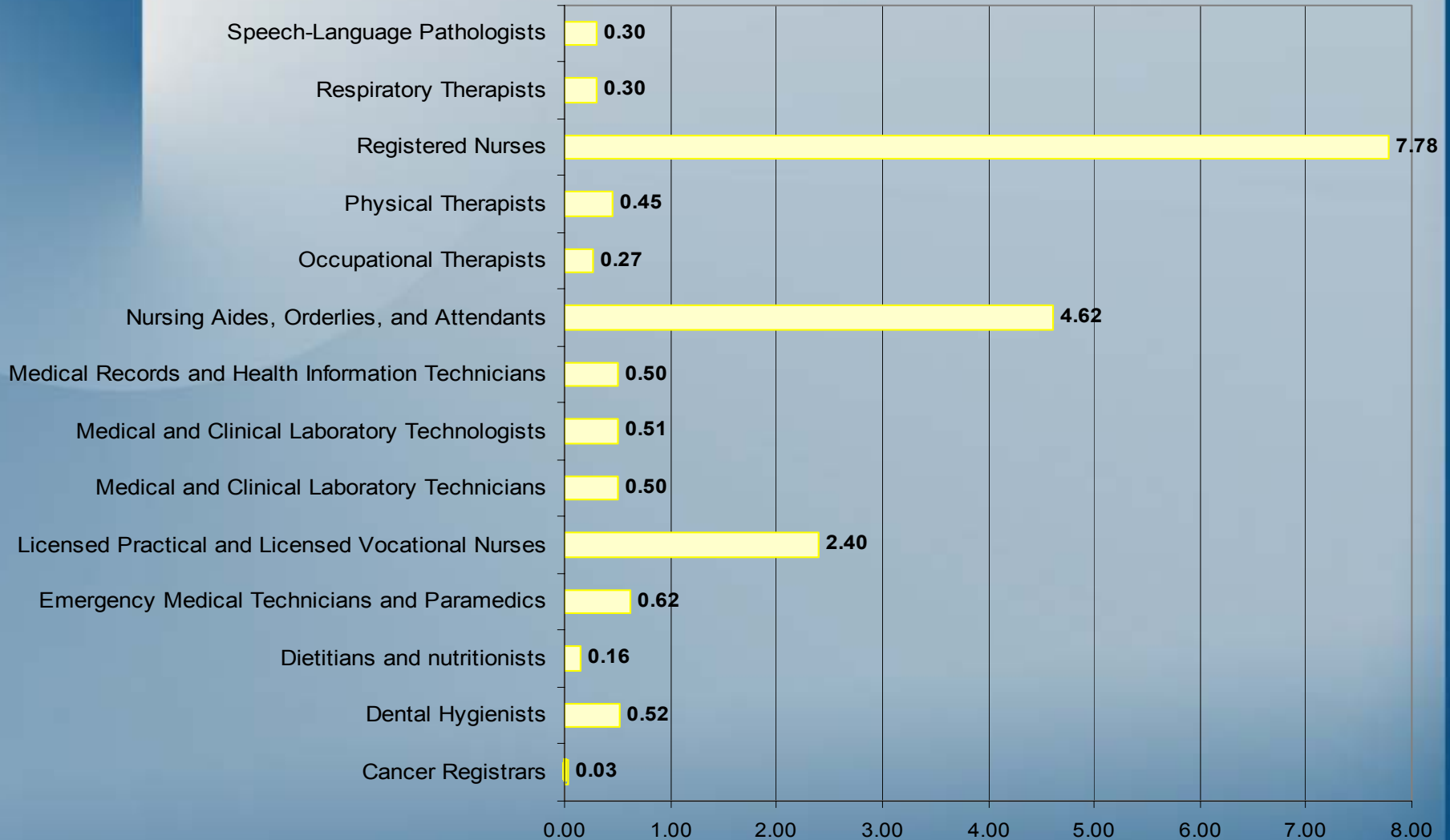
Average Age of Selected Health Professionals

Sources: 2004 National Cancer Registrars Association Online Cancer Registry Workforce Survey and 2003 Current Population Survey Outgoing Rotation Group File



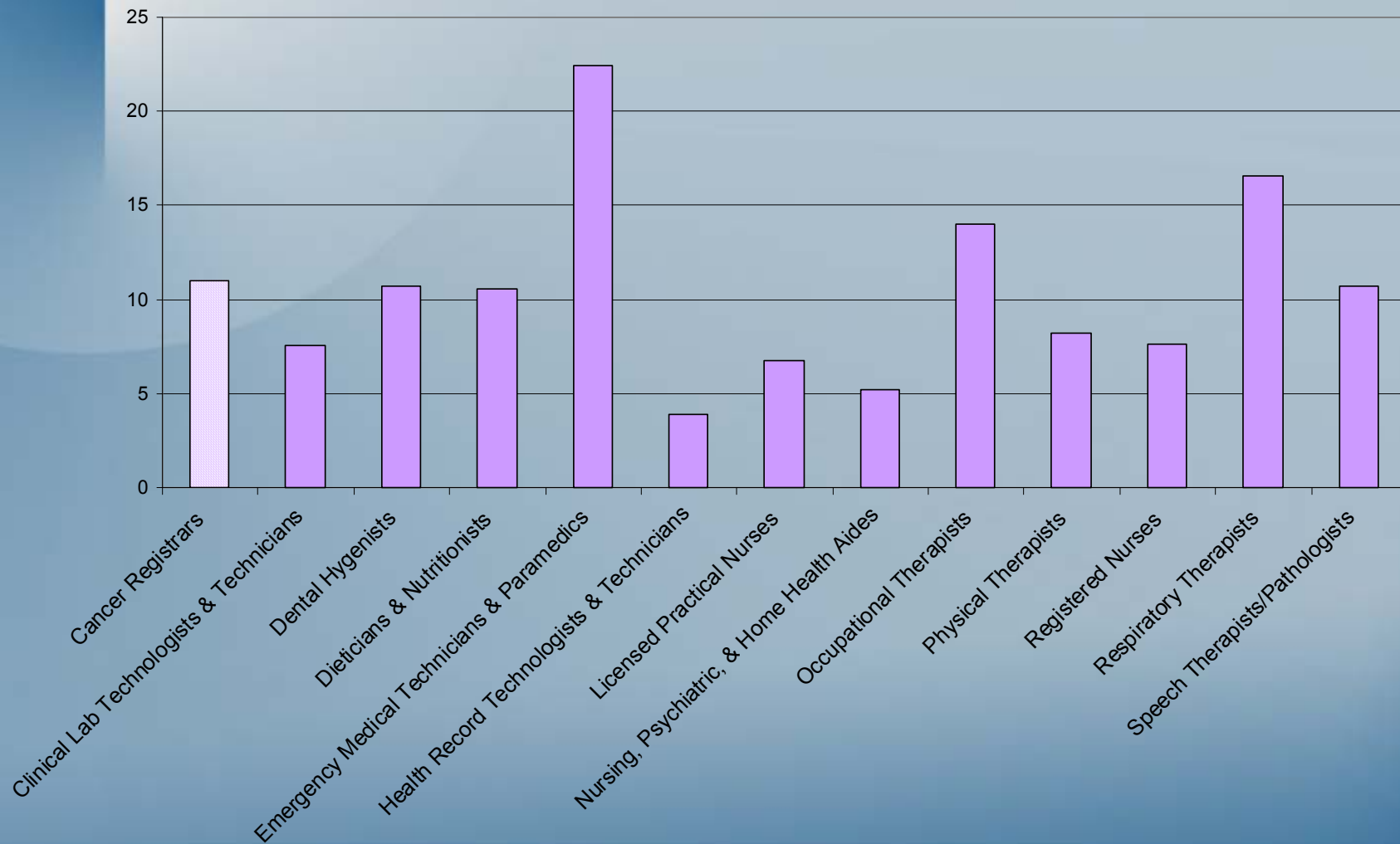
Employment Per 1,000 People in U.S. Population, 2002

Sources: U.S. Census Bureau, Bureau of Labor Statistics, American College of Surgeons
Commission on Cancer, & North American Association of Central Cancer Registries



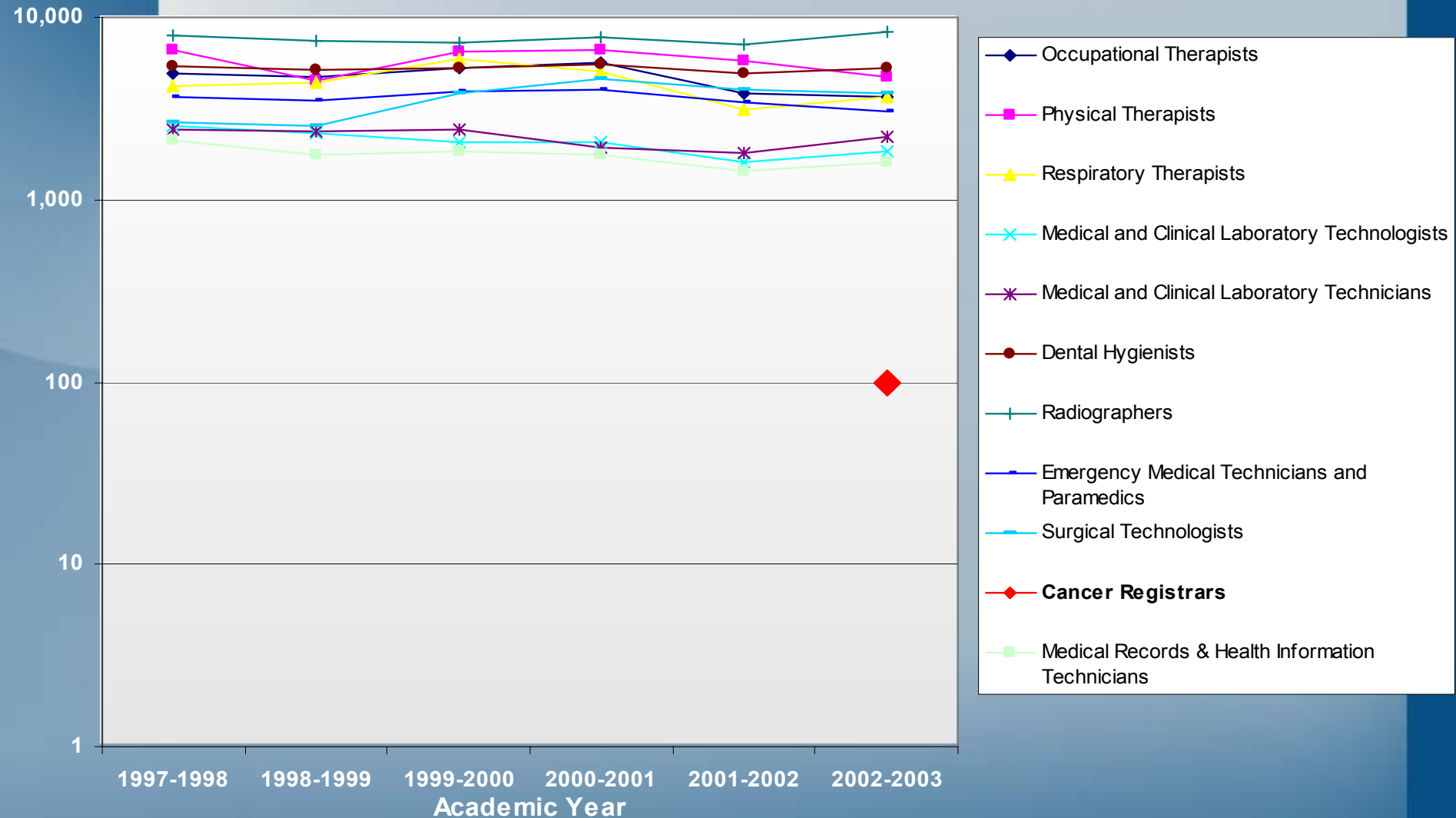
Percent with Multiple Jobs, by Occupation

Sources: 2004 National Cancer Registrars Association Online Cancer Registry Workforce Survey and 2003 Current Population Survey Outgoing Rotation Group File



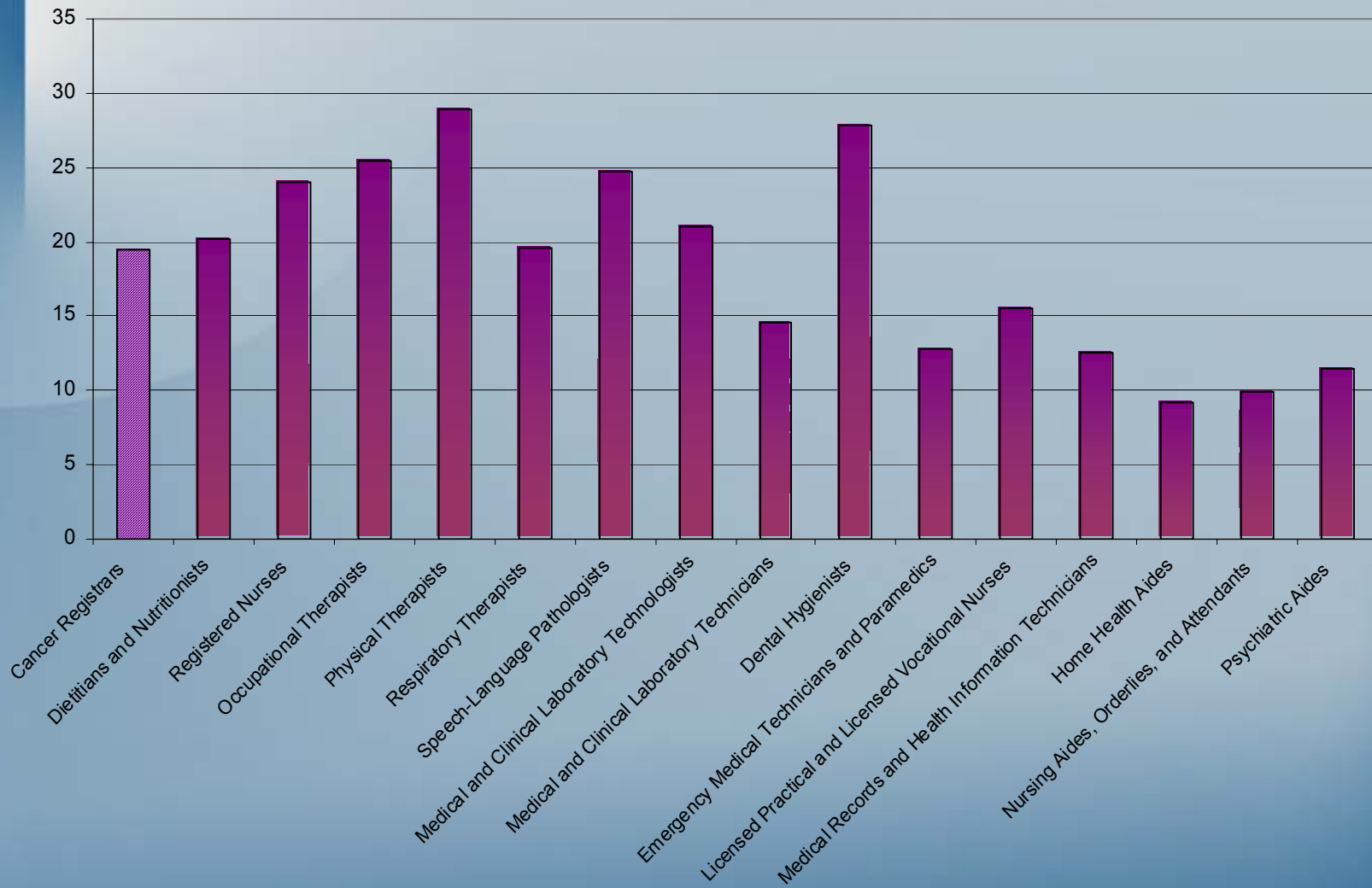
Number of Graduates from Selected Allied Health Education Programs

Sources: American Medical Association, Area Resources Training File, and Cancer Registrar Programs



Mean Hourly Wage, by Occupation

Sources: 2004 National Cancer Registrars Association Online Cancer Registry Workforce Survey and Bureau of Labor Statistics 2002 Occupational Employment Statistics



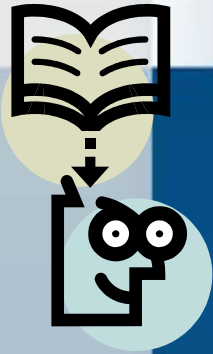


Focus Group Summary

- Generally satisfied with jobs yet frustrated by lack of support and recognition
- Longevity in positions, few new jobs open but some are unfilled for a long time
- Many “fell into the career” by chance
- Inadequate compensation for the work
- Difficult to keep up, changing standards

Key Informants Summary

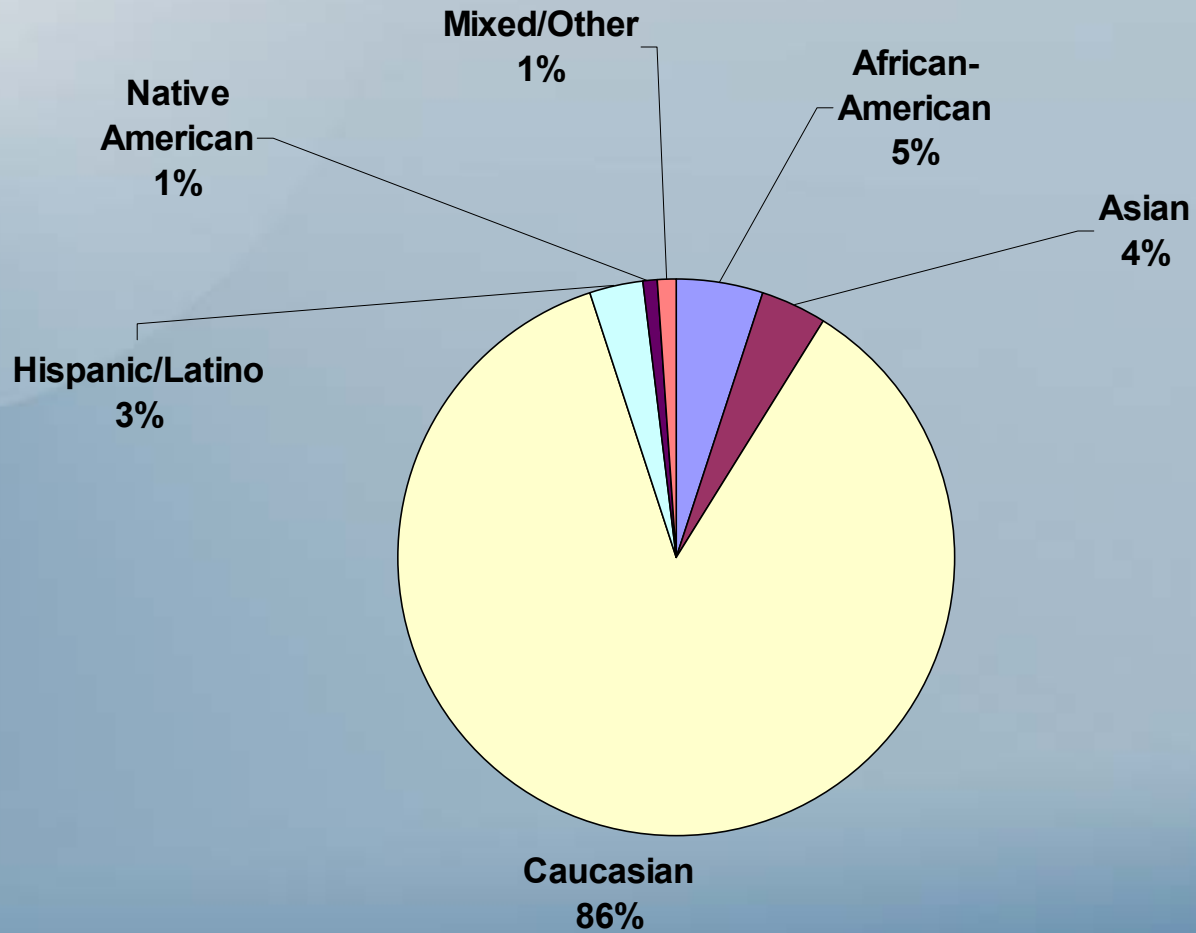
- Lack of degree requirement is a problem
- Need more anatomy, physiology, and medical terminology
- Certification important, few practical advantages, some employers don't value
- Need visibility, awareness, recognition, promotion
- Most agree there is a shortage of CTRs



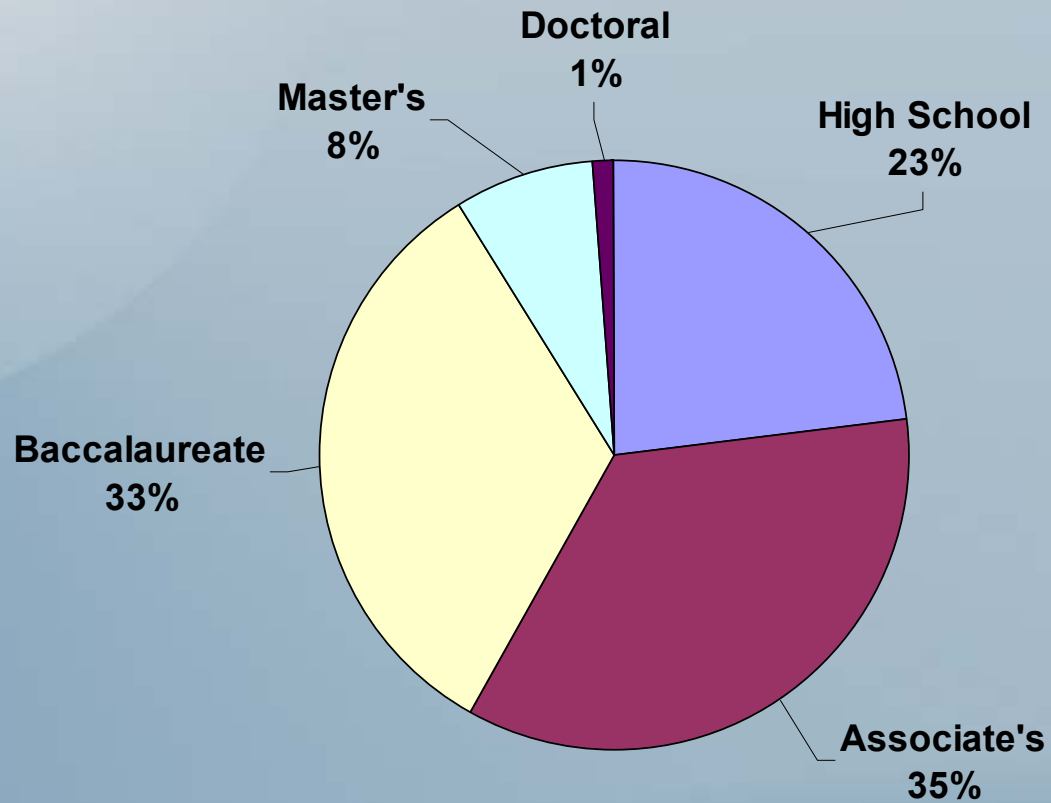
Survey Results



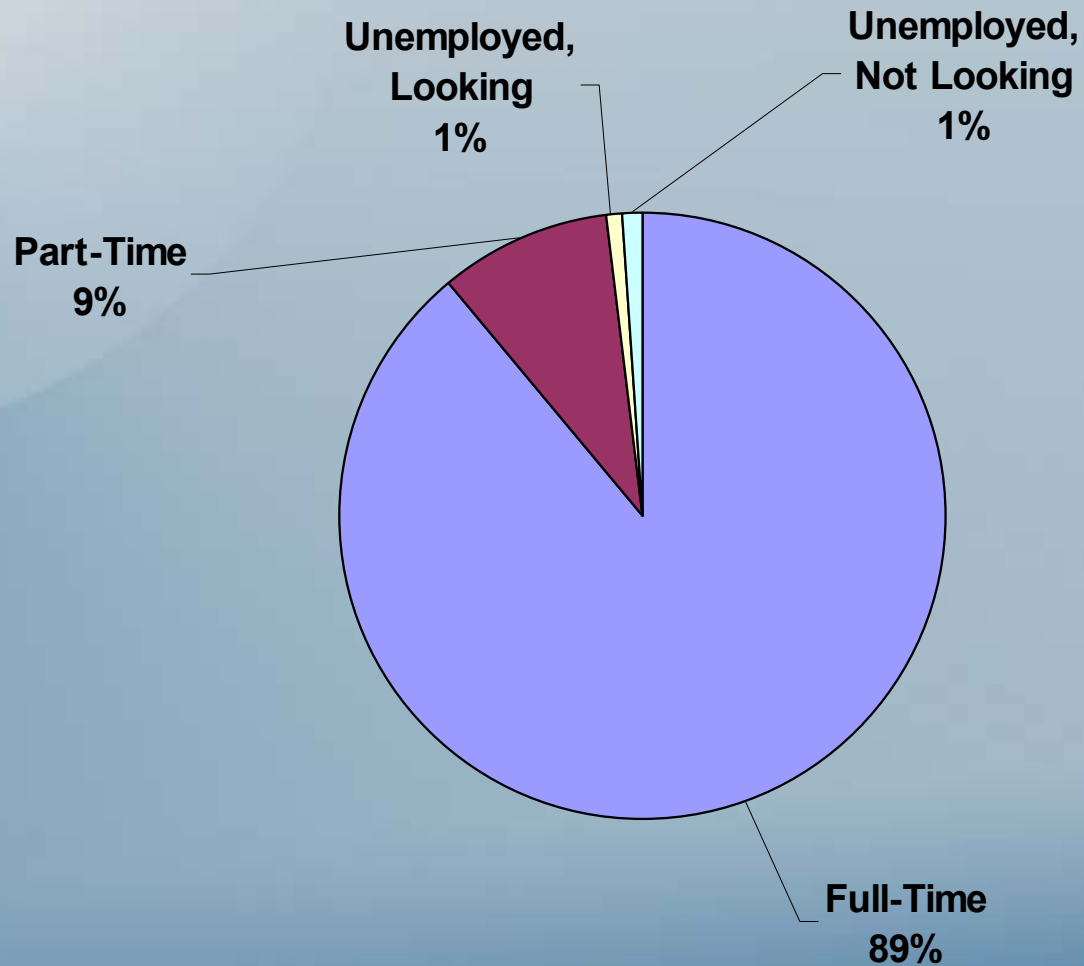
Race or Ethnicity



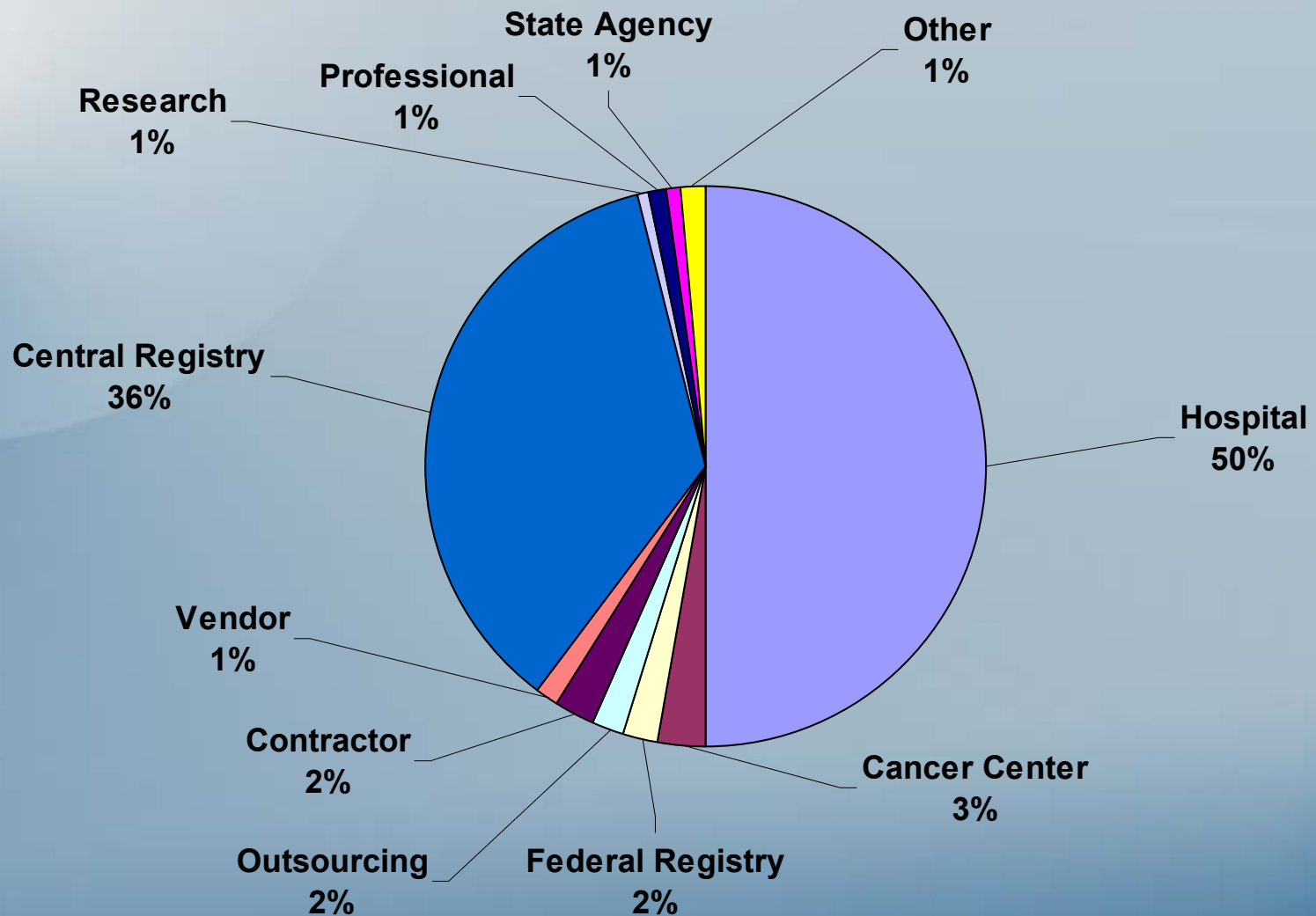
Highest Degree Received



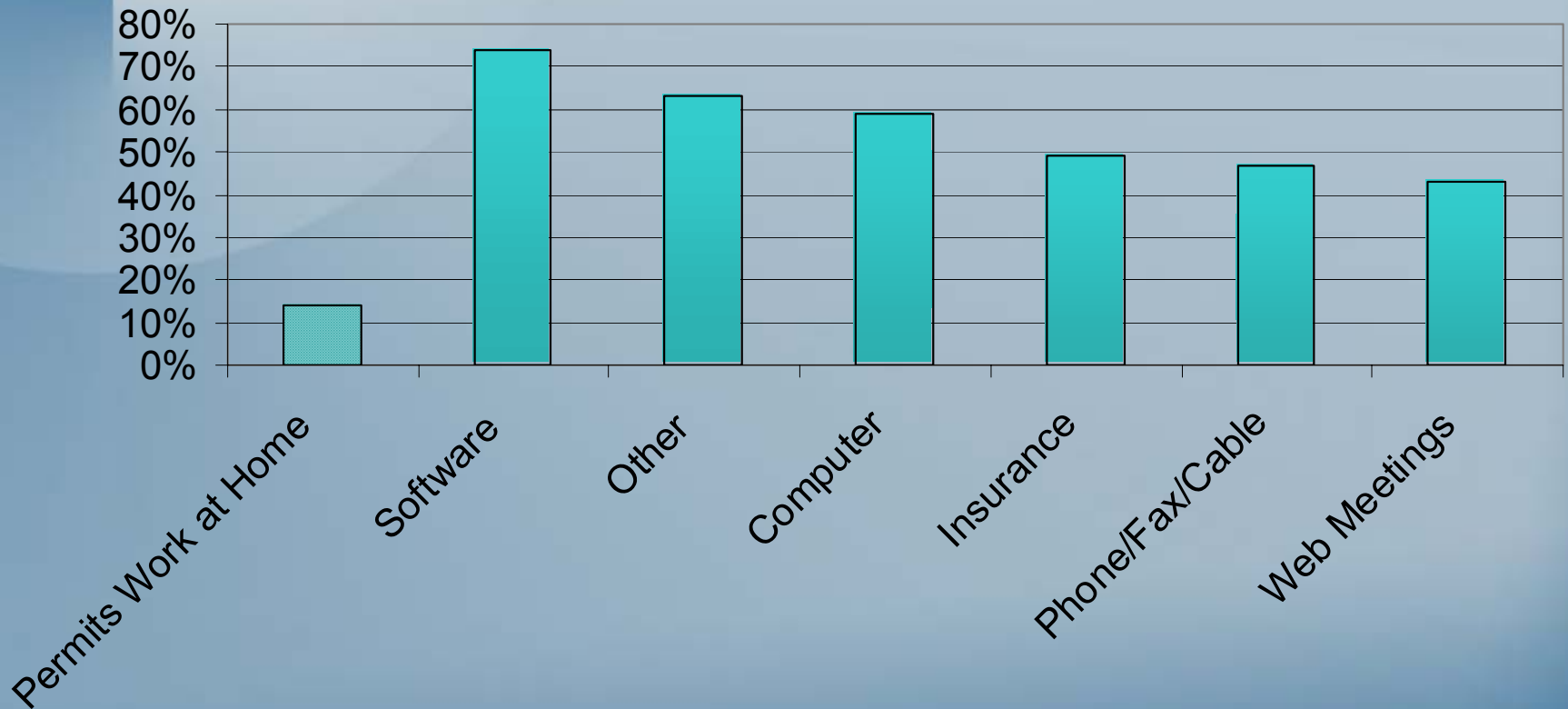
Employment Status



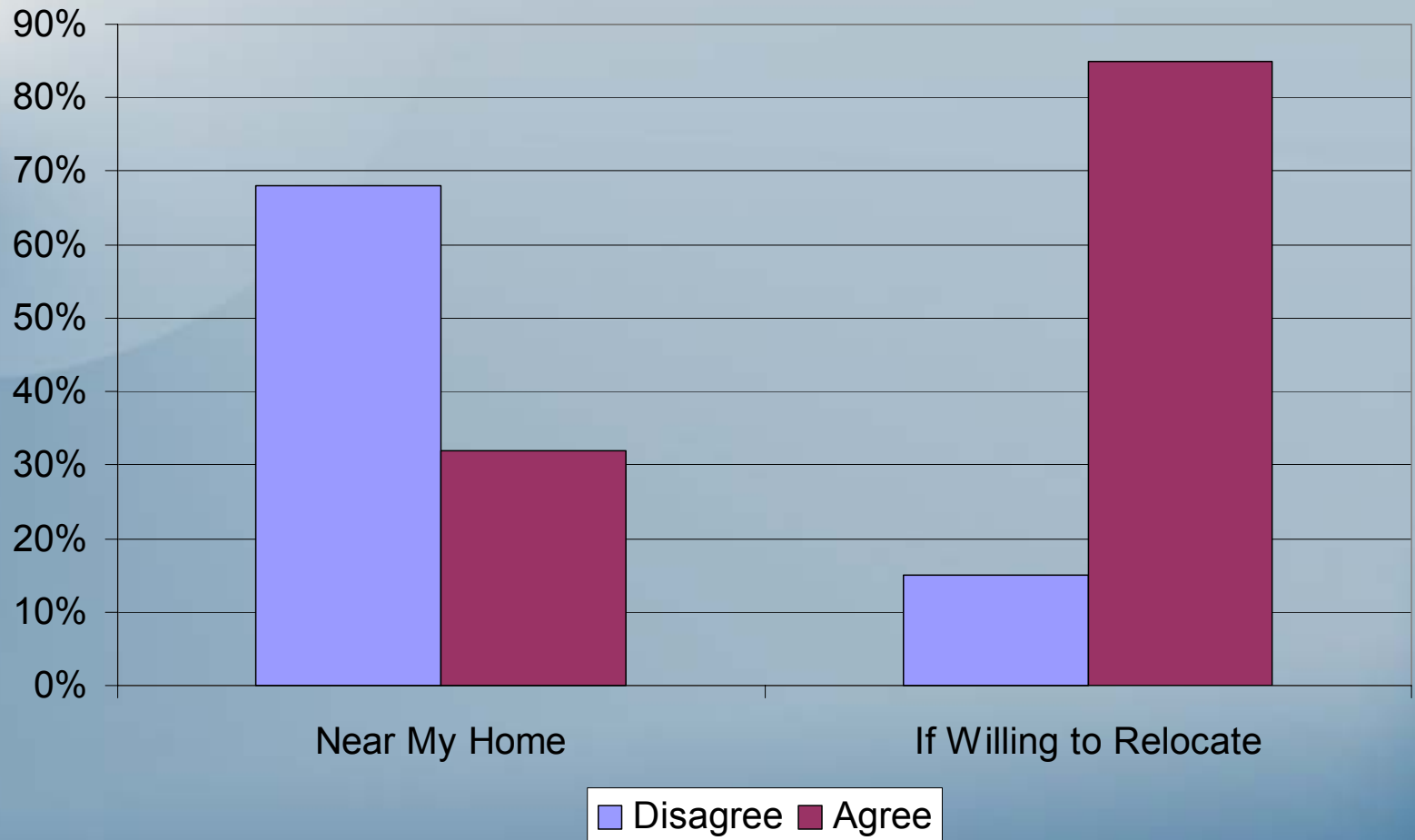
Place of Employment



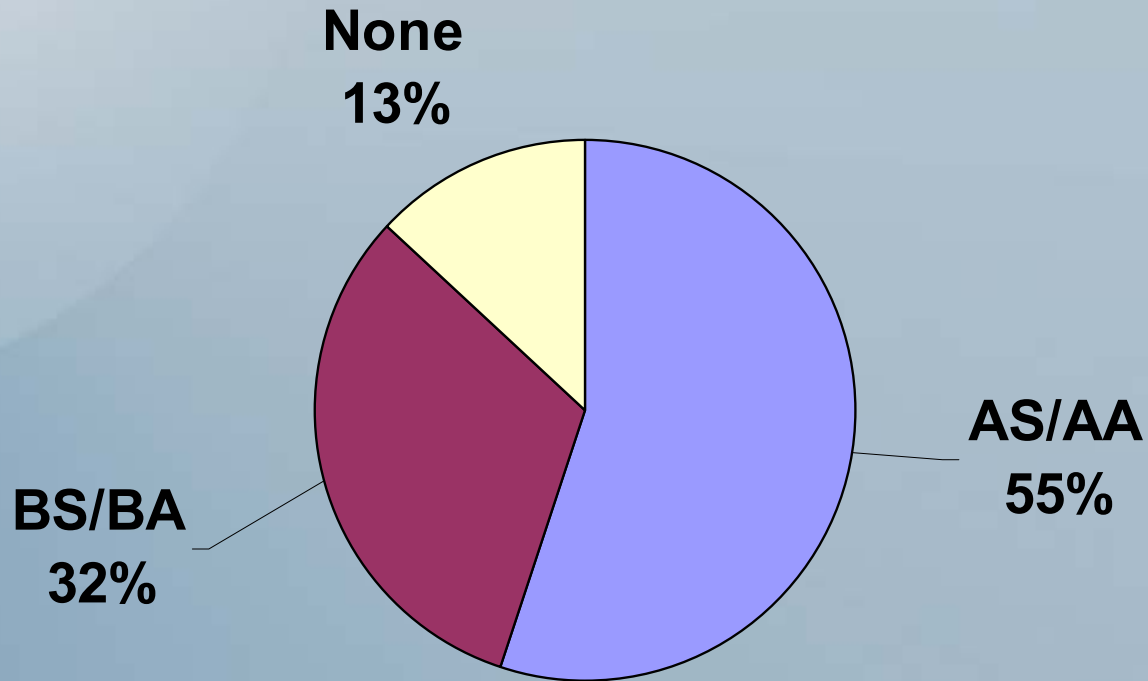
Employer Permits Working at Home and Provides These Materials



"I believe that currently there are many job openings..."



“Which college degree would best prepare students to work as a Cancer Registrar?”



Earnings Vary by Method of Reporting

- Mean annual salary for respondents reporting their earnings annually:
\$47,979 (\$21.97/hour)
- Mean hourly wage for respondents reporting an hourly wage:
\$19.12 (\$39,805/year)

Salary Varies by Place of Employment

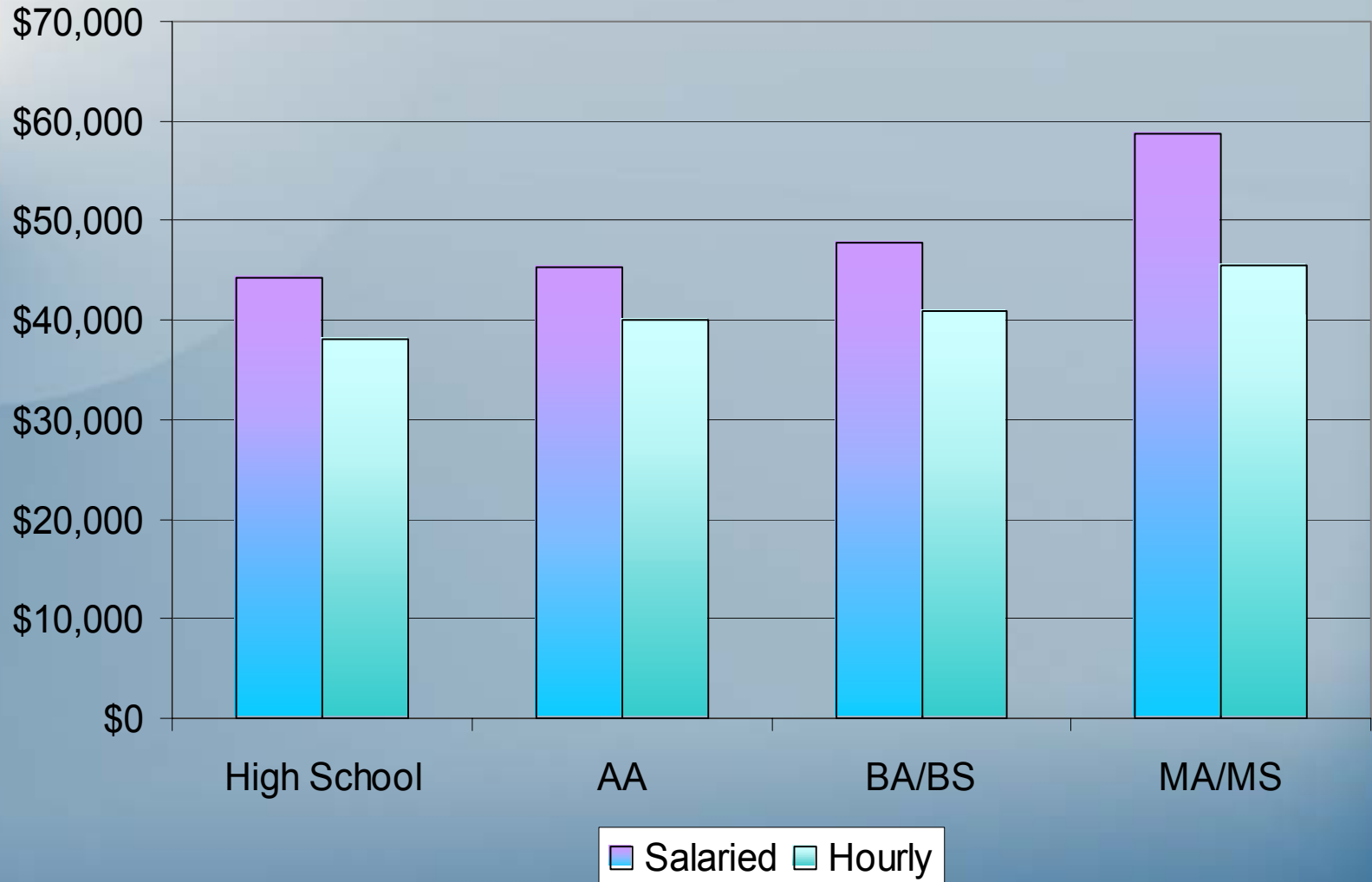
	Salaried	Hourly
Hospitals and Cancer Centers	\$46,123	\$18.78
State/Federal Registries	\$47,983	\$19.80
Other (agencies, self, vendors)	\$53,017	\$21.27

Salary Varies by Geography

Calculated for DHHS regions:

- Annual salary ranged from:
 - \$38,417 in Region 7 (IA, KS, MO, NE)
 - to \$57,206 in Region 2 (NY, NJ, PR)
- Hourly wage ranged from:
 - \$16.47 in Region 6 (AR, LA, NM, OK, TX)
 - to \$23.48 in Region 9 (AZ, CA, HI, NV)

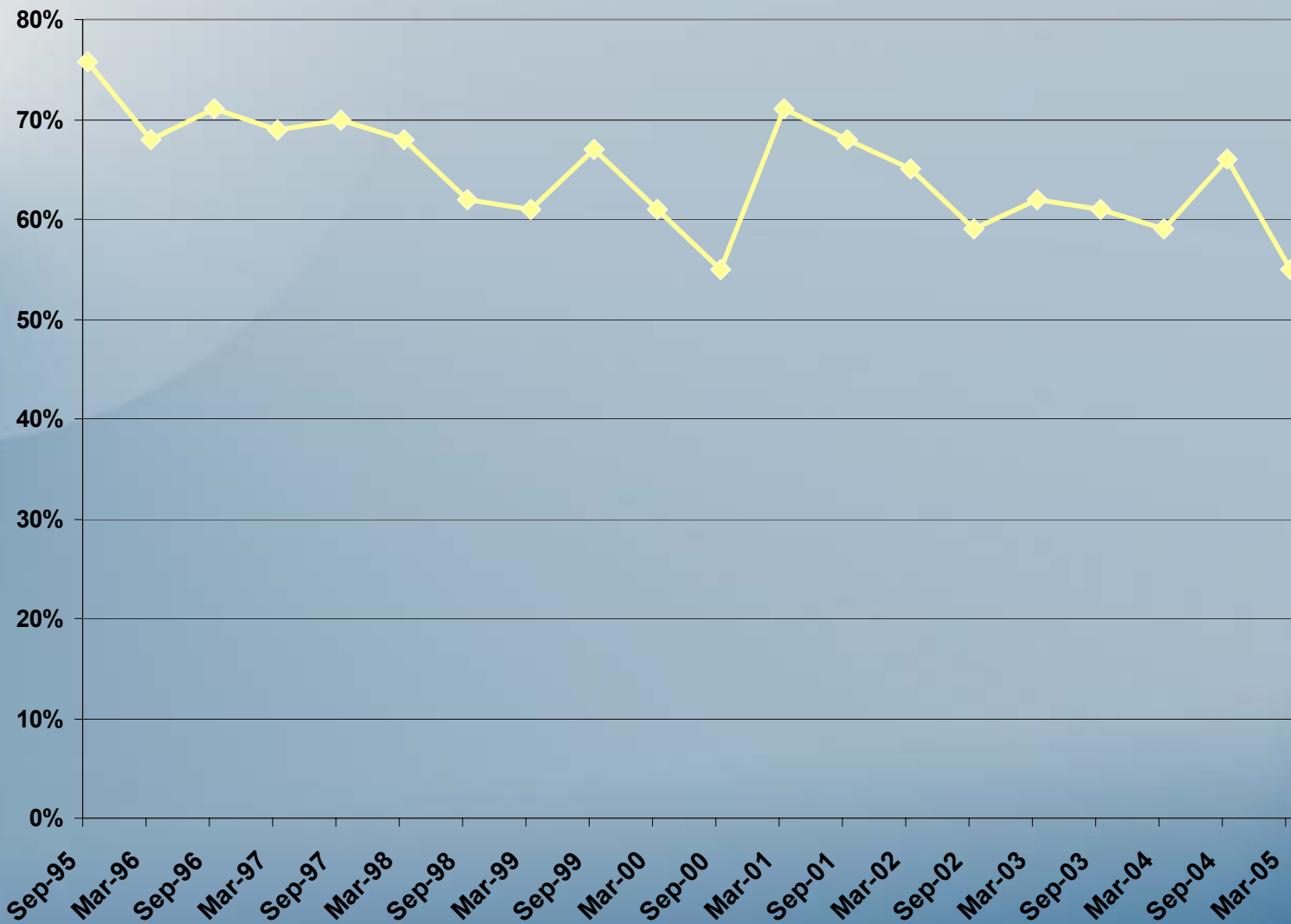
Salary Varies by Education



Other Important Data



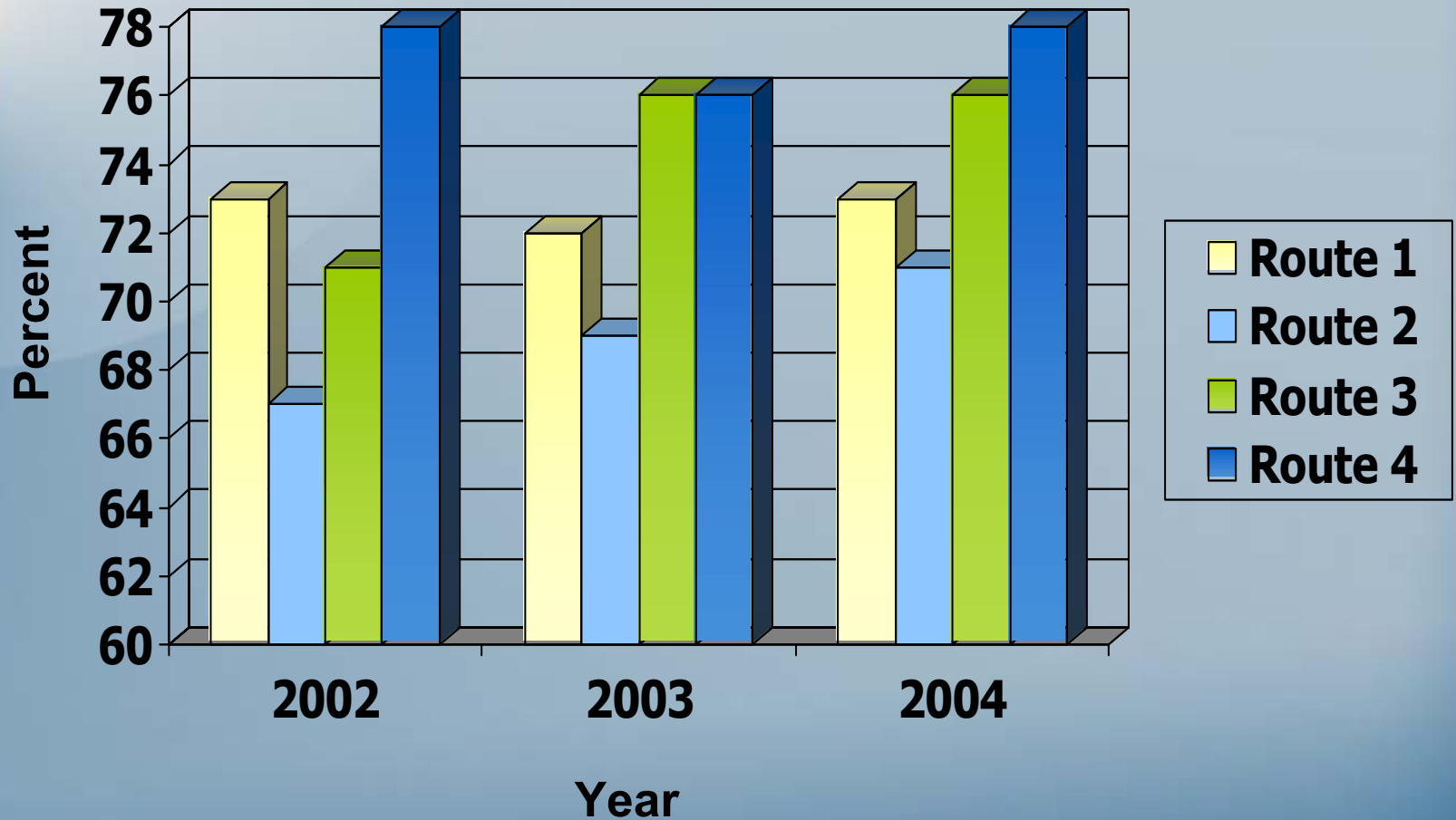
NCRA Certification Exam Pass Rates: 1995-2005



NCRA Certification Test Pass Rates by Route: 1995 - 2004



Pass Rate by Route



Major Findings and Recommendations for Workforce Strategy



Factors Influencing Need for Cancer Registrars

- Incidence of cancer
- Changes in procedures
- Increased reporting requirements
- Automation
- Turnover
- Retirement – workforce is aging

Factors Influencing Number of Cancer Registrars Available

- Requirements- education, certification
- Number of education programs
- Number of graduates
- Certification testing and pass rates
- Worker turnover, retirement
- Wages
- Other factors

Major Findings

- Lack of awareness and recognition for profession
- Salaries and wages
- Job satisfaction and career commitment high
- Certain characteristics and attributes lead to success
- Formal educational programs have space; other access issues are important

Major Findings

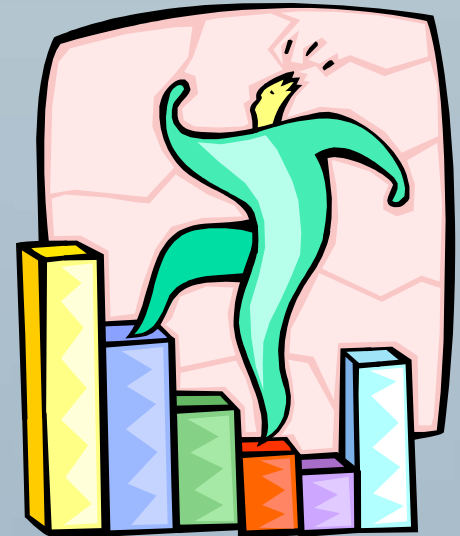
- Mixed perceptions on certification
- Demand intermittent, difficult to balance supply and demand
- Work is never caught up, increasing standards and requirements
- Independent contracting a career option but currently small % of workforce

Recommendations to Consider

- Implement minimal degree requirement
- Focus on recognition and awareness; tool kits, other strategies
- Consider standards for workload
- Consider further requirements for certification (CTR)
 - Legal, accreditation-based, employer based

Next Steps

- Further analysis
- Dissemination
- Publications
- Strategic planning
- Meeting with key interest groups



What will NCRA do with the information?

- Comprehensive Recruitment & Retention Program
 - Market cancer registry college programs
 - Promote CTR credential
 - Plan to determine future growth
 - Educate personnel departments
 - Workload Management Study
- Qualified professionals for future needs

Recruitment and Retention

- US Department of Labor
- Allied Health Reinvestment Act
- American Health Information Management
- Job Task Analysis



Q & A