#### **Legislative Commission on the Interdisciplinary Primary Care Workforce**

August 26, 2021 2:00-4:00pm – Location: Brown Building Auditorium, 129 Pleasant Street, Concord, NH 03301

#### **Connection Information:**

https://nh-dhhs.zoom.us/j/97440316614?pwd=R202MTFBak51bWQ2UFB6ckpXVnVoZz09

Meeting ID: 974 4031 6614

Passcode: 133426

Call-in: +1 646 558 8656 US (New York)

Dial \*6 to mute or unmute if you connect by phone

## Agenda

2:00 - 2:15	Attendance & Introductions
2:15 – 2:50	<b>Psychiatric Nurse Practitioner Training Program</b> - Deb Fournier, APRN, Director of Quality Systems and APRN Services, New Hampshire Hospital
2:50 - 3:35	<b>NH HealthCost</b> - Tyler Brannen, Life & Health Director, New Hampshire Insurance Department
3:35 – 3:55	Legislative Agenda & Updates – Group discussion
4:00	Adjourn

Next meeting: Thursday September 23, 2:00-4:00pm





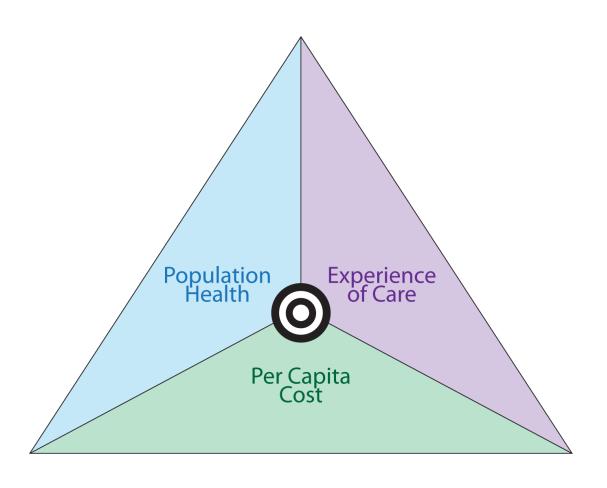
# The Development of a Nurse Practitioner Training Program in Psychiatry

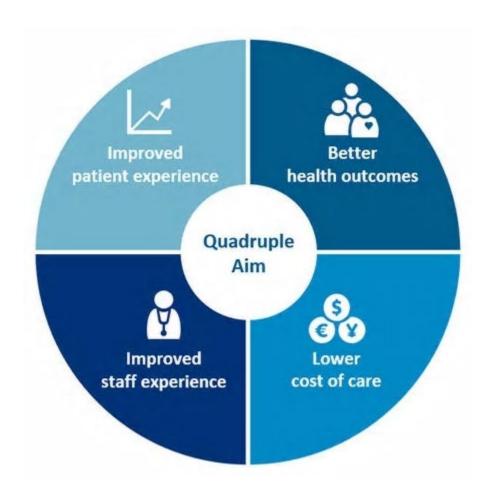
Deb Fournier, MHCDS, MSN, PMHNP-BC, ANP-BC, APRN

Legislative Commission on the Interdisciplinary Primary Care Workforce
August 26, 2021

## Triple Aim

## Quadruple Aim





## Assumptions

- NH population is aging
- NH healthcare workforce is aging
- There is an unmet need for mental health services \*
- Opioid overdose deaths higher in NH than US average \*
- Suicide rate higher in NH than US average \*
  - Age adjusted 17.3 per 100,000 vs US: 13.9 per 100,000

- Access is a problem
  - Dept of Psychiatry at DHMC reports today that there is a 2-4 month wait for general psychiatry consultation depending on region and specialty
- Nurse Practitioners (APRNs) provide high quality, affordable care
  - No difference in quality of services in primary care compared to physicians
  - Same or better patient experience / satisfaction scores

<sup>\*</sup>KFF Mental Health and Substance Use Fact Sheet

https://pubmed.ncbi.nlm.nih.gov/32607075/

<sup>•</sup>https://cdn.ymaws.com/www.pacnp.org/resource/resmgr/imported/qualityofpractice.pdf

<sup>•</sup> https://www.npnow.com/nurse-practitioner-patient-satisfaction-and-outcomes/

## Psychiatric Nurse Practitioner Scope

- Prescribe all psychotropic medication
  - Including clozapine (registry required)
  - Including controlled substances such as methylphenidate and lorazepam
  - Can be trained for Medication Assisted Treatment for Addiction
    - DEA-x, suboxone
- Independent Practice (no MD collaboration or documentation required)
  - Ordering tests, evaluations and services
  - Independent billing
    - All outpatient services
    - Procedures

## Nurse Practitioners in Psychiatry

Dr William Torrey
AJ Horvath
Dr Julia Frew

#### **Outpatient Services**

- General psychiatry clinic for adults and pediatrics
- Specialty clinics
  - OBGYN
  - Cancer Center
  - Addiction
  - Children with special needs
  - Pre-ECT H&Ps
- Embedded in Primary Care
  - New London
  - Newport
  - Concord

#### **Inpatient Services**

- New Hampshire Hospital
  - Attendings
    - Leader of Treatment Team and Treatment Plan

(2016) 4 FTE - (2021) 9 FTE

- Dartmouth-Hitchcock Medical Center
  - General consult service
  - Specialty consult team
  - (future inpatient coverage)

(2018) 3.5 FTE - (2021) 7.5 FTE

## D-H Department Of Psychiatry

- Committed to improving access to mental health care
- Investing in innovative strategies for workforce development
- Building nurse practitioner positions is a priority meet the mission of the department
  - Access to psychiatric care decreased from 4 months to les than 2 months after embedding a psychiatric nurse practitioner in to a primary care clinic

## Barriers to increasing APRN Workforce

- Recruitment
  - Geography
  - Psychosocial resources
  - Salary

- Retention
  - Professional development / advancement opportunities
  - Salary

## Why focus on a training program?

- Learners often stay where they train
- Establish a community of providers
- Frustrations with existing programs deter from entering the field
  - Students find own placements of variable quality
  - Preceptors unsupported and overburdened

### **Current State**

Referral

Student calls

• Placement
Coordinator at DH,
NHH
• Nursing leader
• Other leader
• Mentor or educator
• Provider (directly)

Coordinate Placement

- School contracts
- Student and Preceptor information
- Schedule with provider
- Clinic arrangements
- Training / orientation

Clinical Experience

- Highly variable
- MD, PhD, APRN
- Little to no consideration for matching student learning style with preceptor strengths
- No support for preceptors (burn-out, decline students)

Evaluation and Follow Up

- Student evals go to schools only
- No follow up
- No system evaluation
- No tracking or metrics for success

## NP Training Program

Referral

Student calls anyone

• Directed to Central email

• Student applies

Coordinate Placement

- School contracts
- Student and Preceptor information
- Interview student
- Schedule with provider
- Clinic arrangements
- Training / orientation

Clinical Experience

- Consistent throughout organization
- Clear objectives and curriculum
- Support to preceptor regarding teaching skills and faculty engagement

Evaluation and Follow Up Routine evaluations of students, preceptors, and the overall engagement in the program

## Program Development

#### Stakeholders

- Current APRNs
- Students
- Current coordinators
- Sites

## Defining the Program

- Description of service
- Establish metrics of success

#### **Implement**

- Coordination of entry referral
- Student interviews
- Match with preceptor / site
- Support preceptor

## Evaluate and Improve

- Metrics:
  - Engagement/ Satisfaction
  - Retention
  - Placement

### Additional Value

- Enhancing interdisciplinary education for excellent future teams
- Building community of support and mentorship for new providers throughout the state
- Enhance collaboration and communication regarding patients moving through the continuum of needs or services

## Student Experience / Ability

## First MSN

Interview skills and documentation

Assessment, diagnosis and first-line treatment

Independent evaluation of general psychiatric needs

## Post MSN

Interview skills with specific population (SPMI, SUD)

Multiple diagnoses, complementary treatments

Evaluation and Management (complex assessments and collaboration)

## Student Interviews and Staff Support

- Semi-structured interviews
- Experience in nursing
- Experience in psychiatry
- Previous education (undergrad / graduate)
- Intentions for practice
  - Inpatient
  - Outpatient
  - Special Populations
- Personality and Learning Style
- Commitment to New Hampshire

- Understand practice site
  - Workflow
  - Space
  - Team composition
- Professional goals +/- faculty aspirations or research
- Interest and commitment to teaching
- Teaching style and strengths
- Verbal and written communication skills

## Example Student Path

1<sup>st</sup> MSN, general RN experience

D-HH primary care (embedded)

DHMC general psychiatry clinics

DHMC specialty clinics

1<sup>st</sup> MSN, experienced psychiatric nurse, pediatric interest

DHMC or Manch pediatric team DHMC specialty clinics

New Hampshire Hospital

Post Masters, experienced in geriatrics or primary care

DHMC specialty clinics

New Hampshire Hospital New Hampshire Hospital

## **DRAFT**program brochure

Dartmouth-Hitchcock
Psychiatric Nurse Practitioner
Training Program

A comprehensive clinical practicum experience for psychiatric nurse practitioner students



#### **Placement Sites**

- Lebanon—outpatient pediatric psychiatry, outpatient adult psychiatry (including specialty clinics in OBGYN and oncology)
- Newport—embedded psychiatry in adult primary care
- New London—embedded psychiatry in adult primary care
- Concord-inpatient adult and geriatric psychiatry at New Hampshire Hospital, embedded psychiatry in adult primary care
- Manchester—embedded psychiatry in pediatric primary care



Dartmouth-Hitchcock is the state's only academic medical center and is committed to the education of health care providers as part of their mission to provide the best care, in the right place, at the right time.

#### Benefits of Completing Your Clinical Practicum with Dartmouth-Hitchcock

- Clinical opportunities across the continuum of care
- Knowledgeable and experienced preceptors who are passionate about teaching
- A better understanding of the mental health system in NH, including where it intersects with the legal system
- On-site education opportunities, such as psychiatry grand rounds and case conferences
- Opportunities to complete all three clinical practica within one health system
- Work within multidisciplinary teams and alongside other learners



#### Frequently Asked Questions

- What is the application process?
   Applications will be reviewed on a rolling basis. Applicants who appear to be a good fit for the program will be contacted for an interview.
- 2. When should I apply? As soon as possible. Even with multiple sites, space is limited!
- Can I request placement at a specific site?
   Placements will be assigned to offer the best clinical experience based on the individual's educational goals and needs.
- 4. If there is a special population I am interested in working with, could other opportunities at Dartmouth-Hitchcock be explored? Yes, other opportunities may be available.
- Are there any clinical practicum opportunities in the evenings or on weekends?
   Limited opportunities may be available on the weekends only at New Hampshire Hospital.
- 6. Do I have to commit to completing all of my clinical practica with Dartmouth-Hitchcock? No.
- Do I have to be a NH resident?
   No. However, applicants who intend to work in NH after graduation will be prioritized.



The Dartmouth-Hitchcock Psychiatric Nurse Practitioner Training Program provides diverse clinical practicum experiences to PMHNP students across several sites in New Hampshire.

Nurse practitioner students will be precepted by knowledgeable and experienced psychiatric nurse practitioners in both the inpatient and outpatient setting, caring for patients across the lifespan.

#### Who is Eligible?

#### PMHNP students who:

- Are currently enrolled in an accredited nurse practitioner program
- · Have a current NH RN license
- Are driven, curious, and passionate about learning

#### Interested applicants should send their resume and a cover letter to:

#### NPRotation@dhhs.nh.gov

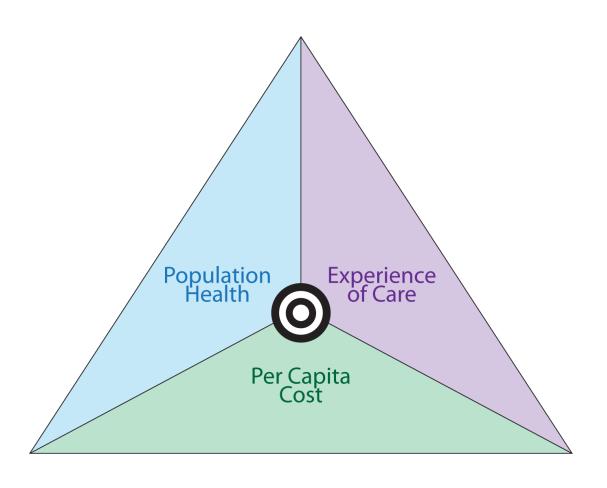
#### In your cover letter, please include the following information:

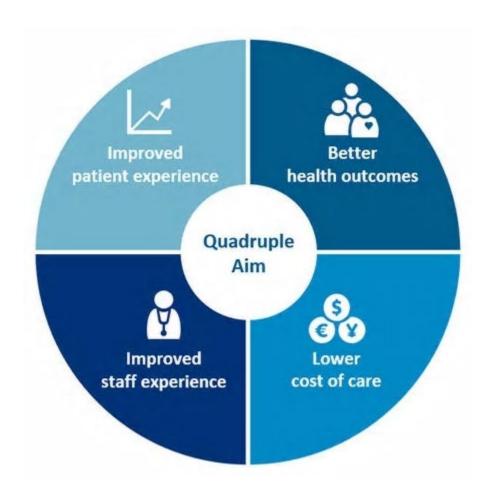
- The program you are currently enrolled in
- The approximate dates that you anticipate needing clinical placement and how many hours you need to complete
- The specific populations (pediatrics, adults, etc.) and settings (inpatient, outpatient, etc.) your program requires



## Triple Aim

## Quadruple Aim





## Next Steps in Program Development

- Short Term Goals
  - Finalize brochure
  - Collaborate with school leaders
  - Finalize interview schedule
  - Develop evaluation tool and baseline metrics
  - Coordinate Fall, Winter and Spring placements
- Medium / Long Range Goals
  - Community Mental Health Rotation
  - Specific rotation in Substance Use Disorders and MAT
  - Preceptor / Mentorship training

- Continuous collaboration with stakeholders
- Ongoing improvement

Suggestions?









Trusted Website Offering
Resources for Consumers and
Employers

## NH's CHIS Database

Law creating NH's all-payer claims database passed in **2003**:

"... the data shall be available as a resource for insurers, employers, providers, purchasers of health care, and state agencies to continuously review health care utilization, expenditures, and performance ... and to enhance the ability of New Hampshire consumers and employers to make informed and cost-effective health care choices."

NH RSA 420-G:11-a Development of a Comprehensive Health Care Information System

## What is NHHealthCost.nh.gov?

- Negotiated prices for more than 200 medical and dental services including office and emergency room visits, MRIs, x-rays, physical therapy, laboratory tests, and chiropractic treatment
  - Thousands of rates listed for providers and payers
- Quality metrics for hospitals across the state
- Benefit comparisons using interactive, customizable tools for small and large employers, and their employees and families.

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## Why Does NH HealthCost Exist?

- Legislative interest in providing patients with health care cost information
  - Website created in 2007
- NHID can objectively report the information
- Potential for improved market efficiencies

## Results

- Almost 15 years of national recognition
- Nationwide interest in adopting the NH approach
- Greater public understanding of price variation
- Benefit designs that reflect health care pricing differences
- Research that shows price concessions

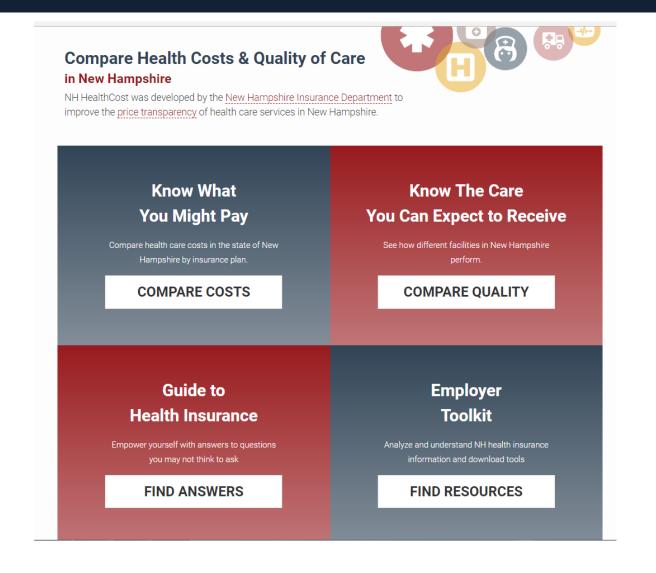
## Lower prices

- Review of Economics and Statistics journal
- Published in 2019, using data from 2005-2011
- Concluded that the "HealthCost website reduced the cost of medical imaging procedures by 5 percent for patients and 4 percent for insurers."
  - About \$45M in savings

## 2017 Public Agenda Report on Price Transparency

- National survey
- 50% of Americans tried to find health care price information
- More than half of people who compared prices saved money
- Most Americans think it is important for state governments to provide health care price information
- 70 percent of Americans say higher prices are not typically a sign of better quality medical care
  - 59 percent said they chose less expensive care

## How do I use NHHealthCost.org?



## Thank You



#### **Contact Information**

#### Tyler Brannen

Life & Health Director NH Insurance Department Tyler.j.Brannen@ins.nh.gov

## Thank You



#### **Contact Information**

## **New Hampshire Insurance Department**

21 South Fruit Street, Suite #14 Concord, NH 03301

requests@ins.nh.gov

Phone: (603) 271-2261

Fax: (603) 271-1406

TTY/TDD: 1 (800) 735-2964

www.nh.gov/insurance

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