

Legislative Commission on Primary Care Workforce Issues

**March 28, 2019 2:00-4:00pm at the NH Hospital Association, 125 Airport Road,
Concord**

Call in information:

(267) 930-4000

Participant Code: 564-395-475

Agenda

- | | |
|--------------------|---|
| 2:00 - 2:10 | Welcome and Introductions |
| 2:10 – 3:10 | Update on the NH ASTHO (Association of State & Territorial Health Officers) Community Health Worker Learning Community– Trini Tellez, MD |
| 3:10 – 3:35 | How UNH is meeting the workforce needs and plans for the future - Mike Ferrara, PhD, ATC |
| 3:35 - 4:00 | Legislative Update |

Next meeting: Thursday April 25, 2:00-4:00pm

State of New Hampshire
COMMISSION ON PRIMARY CARE WORKFORCE ISSUES

DATE: March 28, 2019

TIME: 2:00 – 4:00pm

LOCATION: New Hampshire Hospital Association (Rm 1)

Meeting Notes

TO: **Members of the Commission and Guests**

FROM: Danielle Weiss

MEETING DATE: March 28, 2019

Members of the Commission:

Laurie Harding – Chair

Alisa Druzba, Administrator, Rural Health and Primary Care Section – Vice-Chair

Rep. Polly Campion, NH House of Representatives

Stephanie Pagliuca, Director, Bi-State Primary Care Association

Cathleen Morrow, MD, Dartmouth-Hitchcock Medical Center

Kristina Fjeld-Sparks, Deputy Director, NH AHEC

Jeanne Ryer, NH Citizens Health Initiative

Mike Ferrara, Dean, UNH College of Health and Human Services

Trinidad Tellez, M.D., Office of Minority Health & Refugee Affairs

Bill Gunn, NH Mental Health Coalition

Pamela Dinapoli, NH Nurses Association

Diane Castrucci, NH Alcohol & Drug Abuse Counselors Association

Guests:

Danielle Weiss, Program Manager, Rural Health and Primary Care Section

Leslie Melby, NH Medicaid

Paula Smith, SNH AHEC

Phil Heywood, Executive Director, Northeast Osteopathic Medical Education Network, UNE

Dwayna Covey, Dartmouth-Geisel Medical School

Thomas Wold, Portsmouth Regional Hospital

Barbara Mahar, New London Hospital

Meeting Discussion:

2:00 - 2:10 **Welcome and Introductions** – Laurie Harding – Chair, NH Commission on Primary Care Workforce Issues

2:10 – 3:10 **How UNH is meeting the workforce needs and plans for the future** - Mike Ferrara, PhD, ATC

Refer to the presentation “UNH Health Care Workforce Programs.”

- Financial considerations

- Cost is by credit hour
- UNH graduates tend to pay off loans quicker than those from other universities
- Where do the nurses go?
 - Starting to collect data on that now
 - Mostly in hospital – acute care
 - Anecdotally they work here for 1 year and then go to Boston because they're more competitive
- What percentage of students from UNH's HHS are NH residents when they come in?
 - 50/50 between in-state and out-of-state
 - Just collecting data now to see who stays
 - Trying to better delineate care providers
- High demand; need the clinical sites and more seats at school
 - HPOP found there was a 2-yr waiting program for nursing graduates
 - Being a certified SIM lab can help towards clinical hours

3:10 – 3:35

Update on the NH ASTHO (Association of State & Territorial Health Officers) Community Health Worker Learning Community– Trini Tellez, MD

Refer to the presentation “CHW Learning Community Update.”

3:35 - 4:00

Legislative Update

- SB308 - \$250k for State Loan Repayment Program in Governor's budget
 - SB308 has been tabled in Senate – doing it for large budget bills
- Processing for loan repayment has stopped for the rest of the year because there are no additional funds
 - Those already contracted are prioritized
 - 26 providers to start 4/1 will not get funding
 - Unsure of how many were loaded for 7/1

Next meeting: Thursday April 25, 2:00-4:00pm



CHW Learning Community Update & CHW Certification Considerations

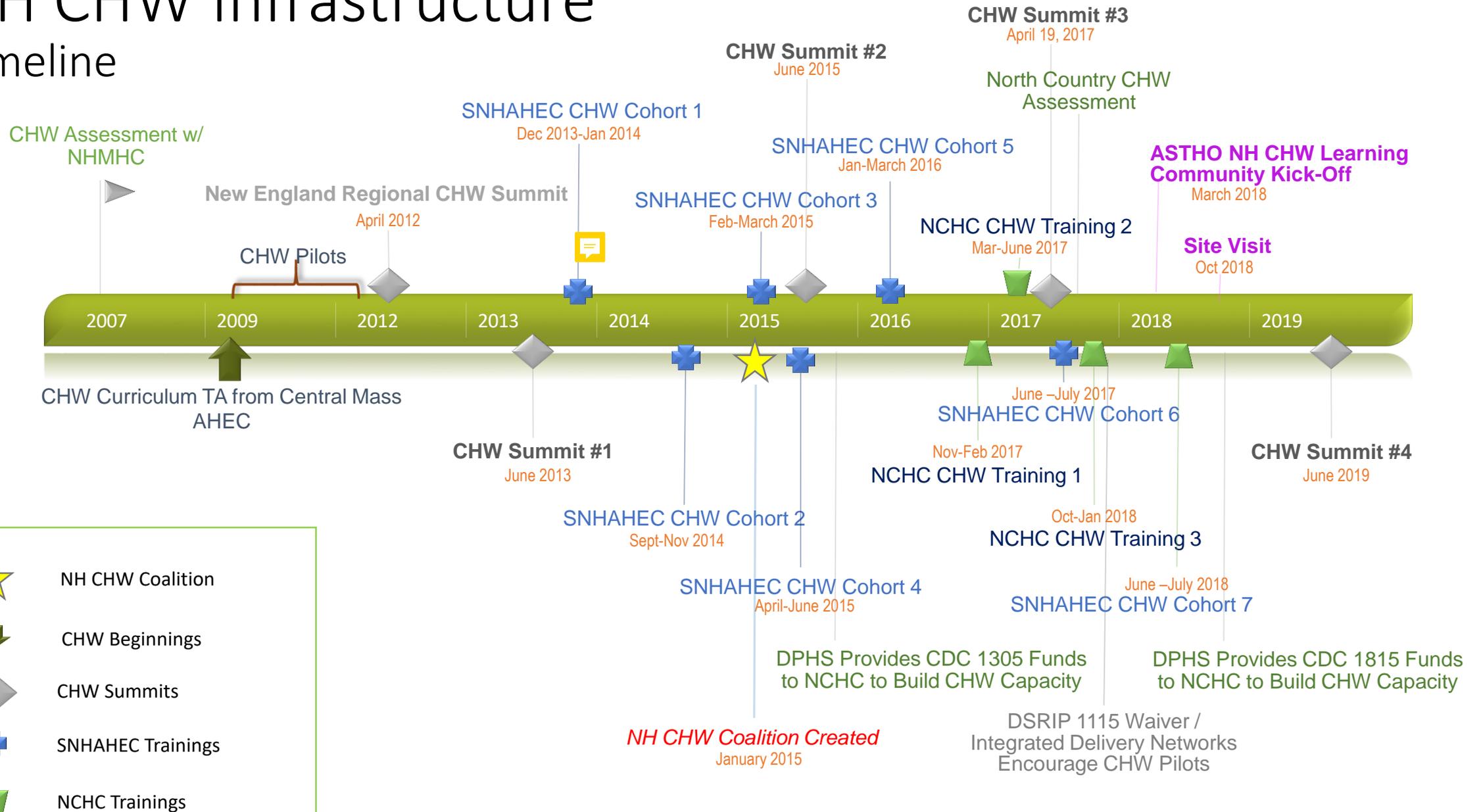
Presentation to the Legislative Commission on
Primary Care Workforce

March 2019 – Trinidad Tellez, MD / Director, Office of Health Equity, NH DHHS



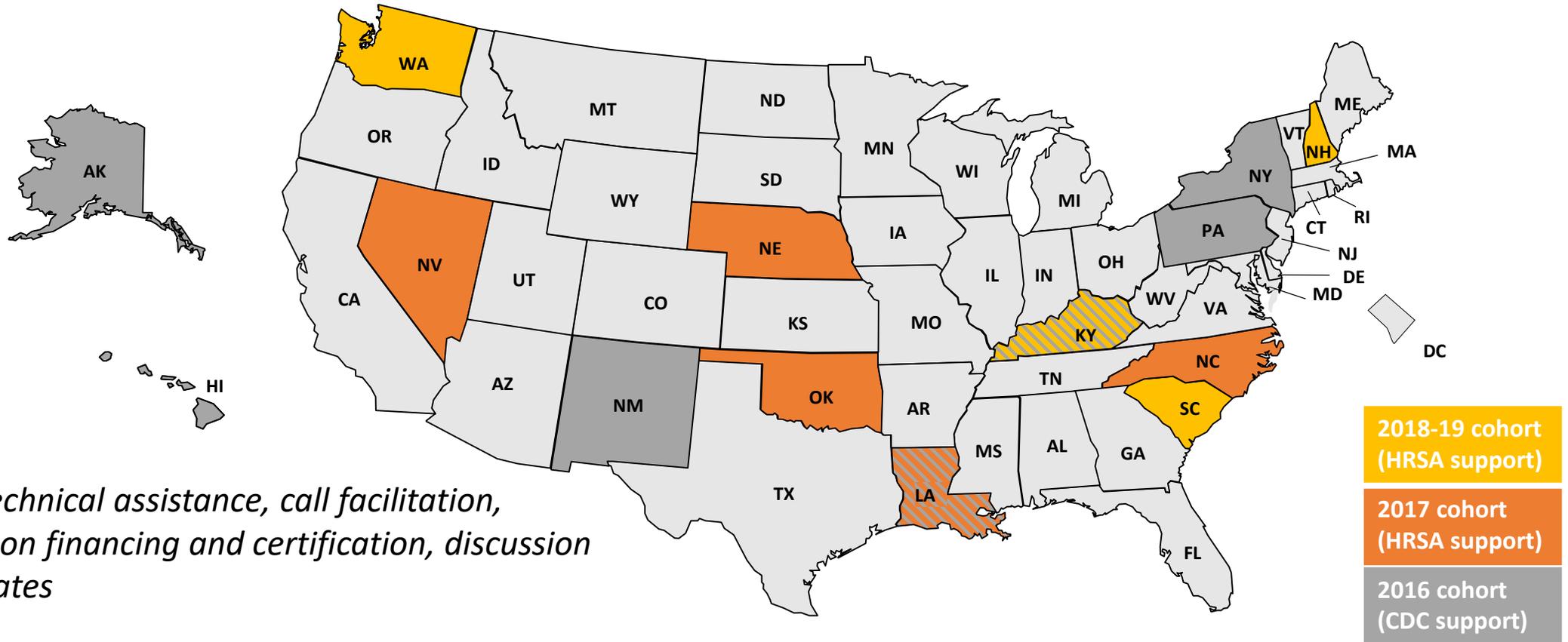
CHW Infrastructure-Building Activity in New Hampshire

NH CHW Infrastructure Timeline



-  NH CHW Coalition
-  CHW Beginnings
-  CHW Summits
-  SNHAHEC Trainings
-  NCHC Trainings

ASTHO CHW Learning Community (Mar. 2018-Mar. 2020)



Ad hoc technical assistance, call facilitation, research on financing and certification, discussion across states

CHW resources and presentations available at:
www.astho.org/community-health-workers

ASTHO CHW Learning Community

- Supported by HRSA Cooperative Agreement
- Washington, Kentucky, South Carolina and New Hampshire
- **SME team:**
 - Geoffrey Wilkinson, MSW, Clinical Associate Professor, Boston University School of Social Work
 - Terry Mason, PhD, Independent Policy Consultant, Boston, MA
 - Carl Rush, MRP, Research Affiliate, University of Texas at Houston Institute for Health Policy
- **ASTHO:**
 - Deb Fournier, Senior Director, Clinical to Community Connections
 - Emily Moore, Director, Clinical to Community Connections
 - Anna Bartels, Senior Analyst, Clinical to Community Connections

NH ASTHO CHW Learning Community Team Members

- 11 CHWs!
- DHHS: Division of Public Health Services / Medicaid / Behavioral Health & Human Services / Office of Health Equity
- Training Providers: SNHAHEC, NNHAHEC/NCHC
- Local Health Departments: Manchester HD, Nashua HD
- CHCs: MCHC, Bi-State Primary Care Association
- IDNs: IDN1, IDN4, IDN7, Myers and Staffer
- Insurers: Well Sense Health Plan, NH Healthy Families
- Hospitals: DHMC, Cheshire Medical Center, CMC
- Social Service / Comm Org: Ascentria Care Alliance

NH ASTHO CHW Learning Community Activity to Date

- March 2018 **4-state kick-off call**: Introduce teams and shared priorities
- May 8 **NH team** call: Establish priorities for NH team
- July 2018 **NH team** call: Site visit objectives updates on CHW engagement
- October 2018 **NH team** call: CHW skills and competencies, begin discussing current financing
- October 2018 **DHHS call**: CHW skills and competencies, state government roles in financing
- October 2018 ASTHO Site Visit:
 - Morning, **All-team**: Developing and Defining the CHW Workforce: Steps towards sustainable financing
 - Afternoon, **CHW Coalition**: CHW Workforce Development in NH: Workforce Voice, Value, and Credentialing Options
- February 2019 **DHHS call**: Begin discussion of DHHS' capacity for a role in the CHW certification process
- February 2019 **4-state call**: Penn Center for CHWs, presented how they have demonstrated strong ROI from CHW interventions

NH ASTHO CHW Learning Community Future Activity

- Continuing to grow network of interested stakeholders!
- Spring 2019 **NH Team** call: Financing
- SAVE THE DATE: 4th NH CHW Summit 2019 - June 26, Grappone Center, Concord
 - Certification – overview, lessons from other states, national CHW perspectives
 - Highlights of current CHW initiatives/programs
 - And more!
- More TA calls and another site visit...
 - August 2019 learning community concludes



Community Health Worker (CHW) Skills and Competencies

Nationally Accepted Definition of CHWs



“... frontline public health workers who are **trusted members of and/or have an unusually close understanding of the community they serve**. This trusting relationship enables CHWs to serve as a liaison/link/intermediary between health/social services and the community to facilitate access to services and improve the quality and cultural competence of service delivery.

CHWs also build individual and community capacity by increasing health knowledge and self-sufficiency through a range of activities such as outreach, community education, informal counseling, social support and advocacy.”

CHW SKILLS

The CHW Core Consensus (C3) Project describes the core skills of CHWs as:

1. Communication skills
2. Inter-personal and relationship-building skills
3. Services coordination and navigation
4. Capacity building
5. Advocacy
6. Education and facilitation
7. Individual and community assessments
8. Outreach
9. Professional skills and conduct
10. Evaluation and research
11. Knowledge base

CONNECTEDNESS

CHWs know the community and move freely within it.

CREDIBILITY

CHWs are known and trusted as leaders and “natural helpers.”

COMMITMENT

CHWs pursue their work out of a sincere commitment to the wellbeing of the community – because it is their community



Introduction to CHW Certification: Overview and Considerations for Stakeholder Engagement

What Certification Is (and Is Not):

- IS a declaration by issuing authority that an individual has certain qualifications (e.g., training, skills)

- Is NOT necessarily regulation of practice
- Is NOT the same as an educational “certificate of completion” unless you deliberately choose to make it so as a matter of policy
- Is NOT automatically a state government function: Issuing authority MAY be government, educational, association or employer-based

Developing Certification Policy: Process

- Ongoing **CHW leadership and inclusion!**
- Stakeholder agreement on **rationale and objectives**
- Stakeholder agreement on meaning/definition of certification **(includes airing preconceptions)**
- Commitment to create **responsive** certification policies and procedures that respect the nature of the practice

	CHWs	Payers & employers
Anticipated benefits	<ul style="list-style-type: none"> • Higher wages • Improved working conditions • Increased respect from other professions • Wider career opportunities • Stable employment • Strengthened professional identify • Consistent standards for the field 	<ul style="list-style-type: none"> • Clear scope of practice boundaries • Consistent, reliable qualifications among CHWs • Simplified recruitment • Reduced on-the-job training costs • A clearer rationale for integrating CHWs into care teams
Assumed negative impact	<ul style="list-style-type: none"> • New barriers to entry • Creation of a “class” system among CHWs and/or marginalization of volunteer CHWs • Making CHW practice more clinical and less connected to the community • Regulations or restrictions on what CHWs are allowed to do • Employing people who attend a training but do not have strong community connections 	<ul style="list-style-type: none"> • Pressure to increase wages • New regulations or restrictions on their organizations • Increased overall training costs • CHWs losing touch with the community, thereby becoming less effective overall

Major Certification Options

- Certify **individuals** who work as CHWs?
 - Voluntary v. Mandatory (Title v. Practice):
 - Will certification be required in order to use a title such as “Certified CHW?”
(*best/most common practice*)
 - Will certification be required for anyone doing the work of a CHW?
- Accredite or certify CHW **training programs/curricula**?
- Certify **instructors** in CHW training programs?
- Certify **employers**?
 - No state to date has taken this approach; would not provide CHWs with a “portable” proof of qualifications.

Basic Components of an Individual CHW Certification Program

- Authority and administrative home
- Certifying board or entity (composition, powers, operations)
- Definition of CHW
- Core competencies
- Scope of practice and practice standards
- Eligibility requirements
- Standards and protocols for assessing eligibility
- Continuing education requirements
- Procedures to apply, renew, revoke/expire, appeal, etc.

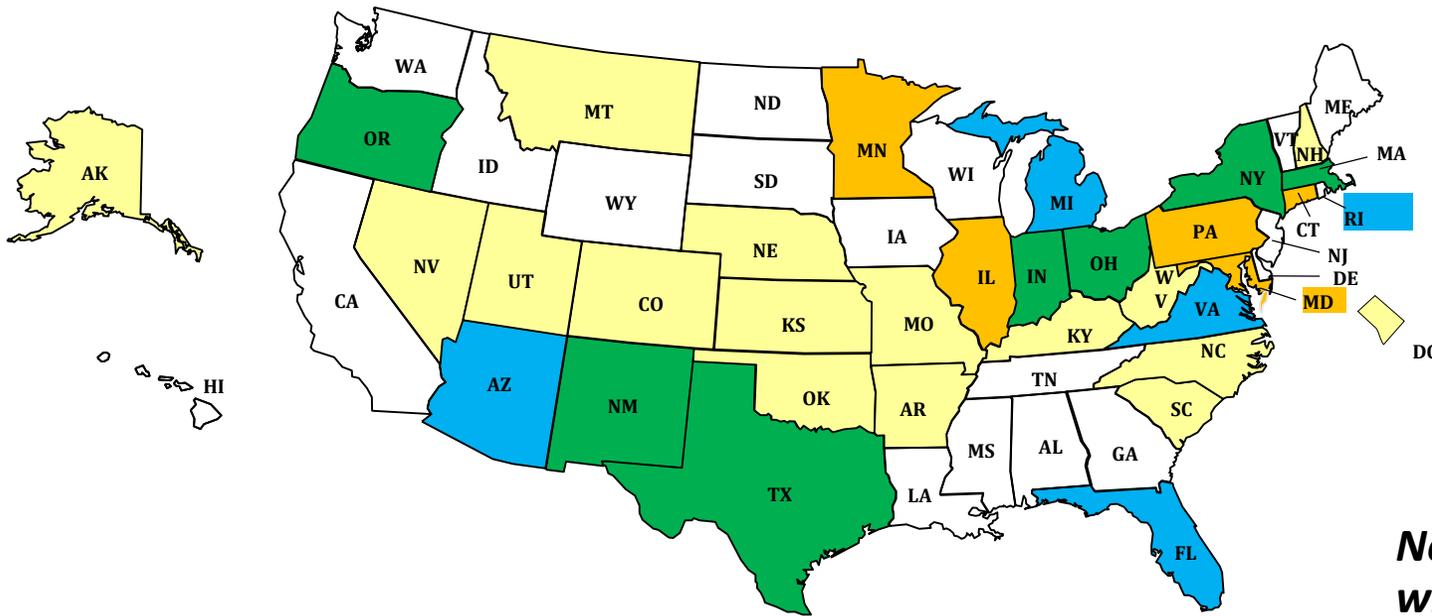
Can be the same
or distinct entities



A Responsive Certification System Has:

- **Multiple paths to entry**, including path based on experience (“grand-parenting”)
- **User friendly application process** without unnecessary barriers of education, language, citizenship status
- Any required training available in **familiar, accessible settings**
- **Skills taught using appropriate methods** (e.g., adult/popular education; CHWs as trainers)
- **Easy access to CEUs**, distance learning
- **Respect for volunteer CHWs!**

Ever-changing picture: Wide variety of state approaches to CHW certification...



State-operated program

(NY for MCH navigators only)

Privately-operated program

Program under development

Program under consideration

Updated February 2019

No evidence-based best practice for determining where to house the program.

Will vary based on state context, resources, politics, etc.

...BUT one consistent element: CHW leadership on certification boards

Arizona	Maryland	Massachusetts	New Mexico
<p>AZ CHW Association (AzCHOW) first piloted a certification process. Department of Health Services (DHS) managed a registry (passive function).</p> <p>HB 2324 passed in 2018 and directed DHS to implement a certification program and establish a CHW Advisory Council</p>	<p>SB 163 passed in 2018 and directed the Department of Health (DOH) to adopt initial regulations for CHW certification, with additional regulations based on recommendations of a CHW Advisory Committee.</p>	<p>Department of Public Health (DPH) Division of Health Professions and Licensure has administrative responsibility.</p> <p>DPH Board of Certification of CHWs has certifying authority.</p>	<p>Department of Health has administrative responsibility.</p> <p>Board of Certification of CHWs has certifying authority.</p>
<p>Majority of 9-member CHW Advisory Council must be CHWs.</p>	<p>At least nine of the 19 members of the CHW Advisory Committee must be CHWs.</p>	<p>Board includes Department of Public Health Commissioner plus ten governor appointees; at least four must be CHWs.</p>	<p>Board includes the secretary of health and eight additional members, a minimum of three of which must be CHWs.</p>

APHA Policy Statement: Support for Community Health Worker Leadership in Determining Workforce Standards for Training and Credentialing

...Encourages state governments and any other entities drafting new policies regarding CHW training standards and credentialing to **include in the policies the creation of a governing board in which at least half of the members are CHWs.** This board should, to the extent possible, minimize barriers to participation and ensure a representation of CHWs that is diverse in terms of language preference, disability status, volunteer versus paid status, source of training, and CHW roles.

Available at: <https://bit.ly/2uv9RBY>



It's a Journey... Involving Many Stakeholders!

CHW resources and presentations available at: www.astho.org/community-health-workers

SAVE the DATE



Community Health Worker Summit

The Path Forward

06.26.2019

All Day Statewide Conference

Target Audience

Community Health Workers; representatives of health systems including patient navigators, case managers, **all those who work in community health**, social service, and community organizations; and legislators who seek new models of care to promote access to services and minimize health disparities.

Join us today!

NHCHW.org

Location
Grappone
Conference Center
70 Constitution Ave.
Concord, NH

June 26, 2019
Fourth NH CHW Summit
Concord, NH

**The Path Forward:
*The Future Looks Bright!***

All CHW stakeholders
are invited!!





Human Development &
Family Studies

Recreation
Management
& Policy

Nursing

Occupational
Therapy

Institute for
Health Policy &
Practice

Social Work

Institute on
Disability

Health
Management
& Policy

Communication
Sciences &
Disorders

Kinesiology



50th Celebration – 2019-2020



University of New Hampshire
College of Health and Human Services

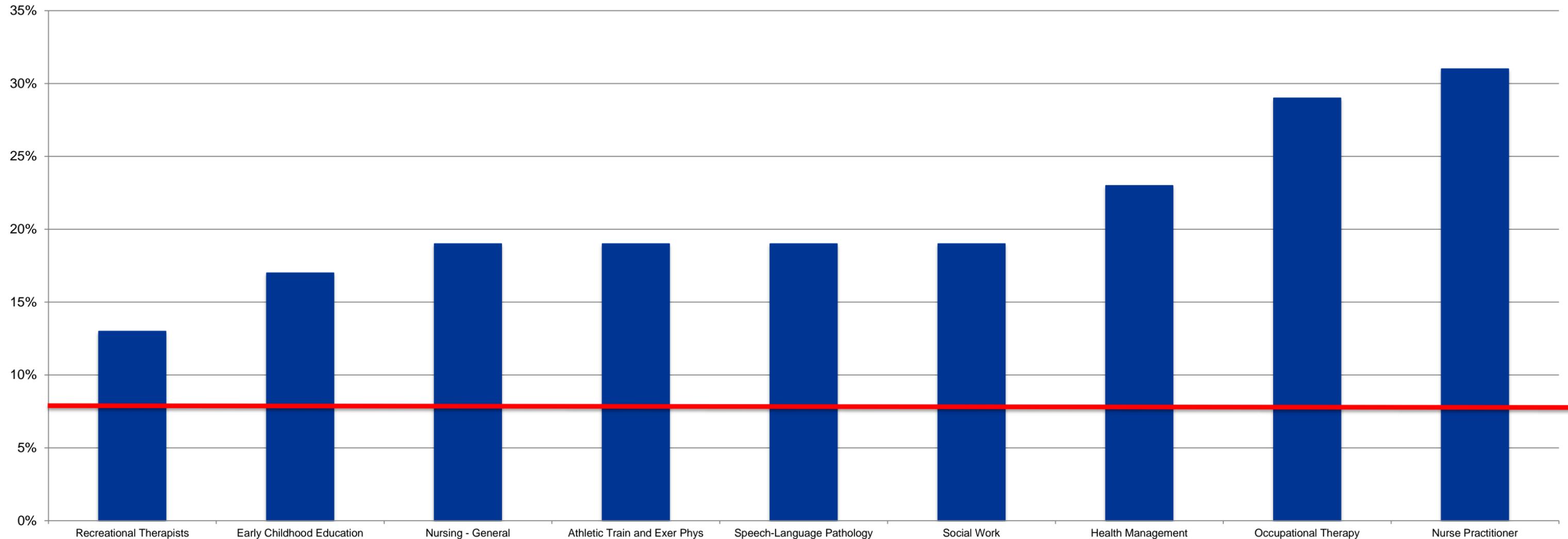
Factors Effecting College Enrollments

- **Declining birth rates – particularly in NE**
- **Fierce Competition for Students**
- **Private College High Discount Rates**
- **Trend toward entry-level graduate education**
 - **Occupational Therapy Doctorate**
 - **Athletic Training Masters**
- **Changing Medical Landscape**



Projected Growth of HHS Professions

Health Care programs are growing “faster than average” or “much faster than average”



Source: Bureau of Labor Statistics



University of New Hampshire
College of Health and Human Services

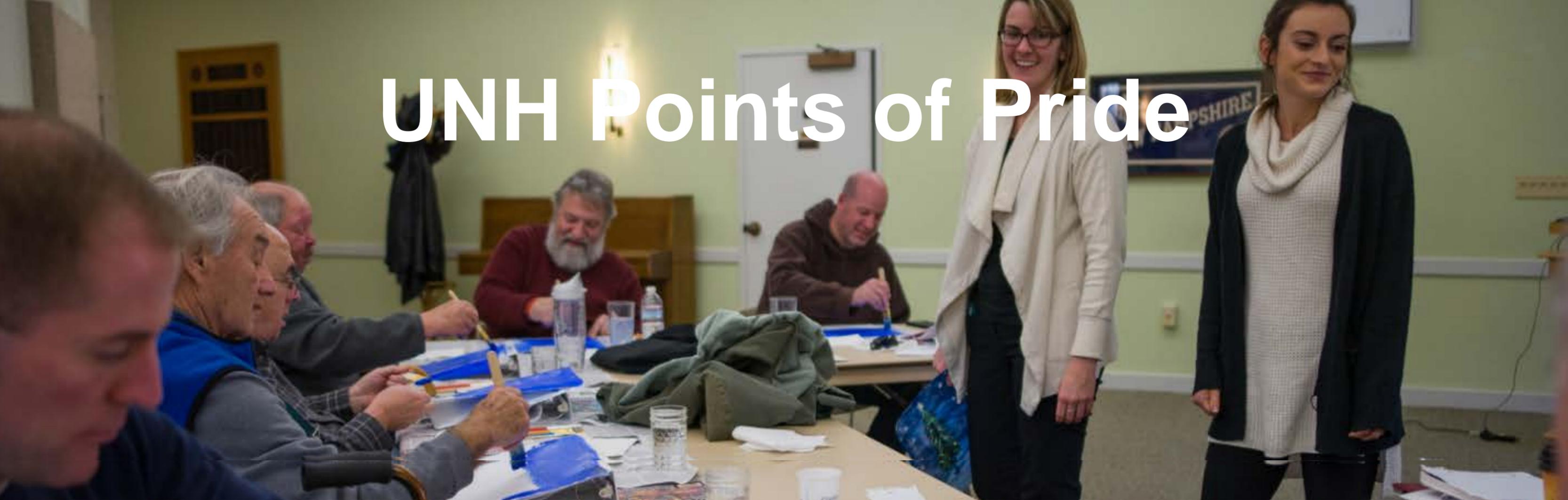
Projected Growth of HHS Professions

Health Care programs are growing “faster than average”
or “much faster than average”

- 1. Employment of healthcare occupations is projected to grow 18 percent from 2016 to 2026, much faster than the average for all occupations, adding about 2.4 million new jobs.
- 2. Healthcare occupations are projected to add more jobs than any of the other occupational groups.
- 3. This projected growth is mainly due to an aging population, leading to greater demand for healthcare services.



UNH Points of Pride

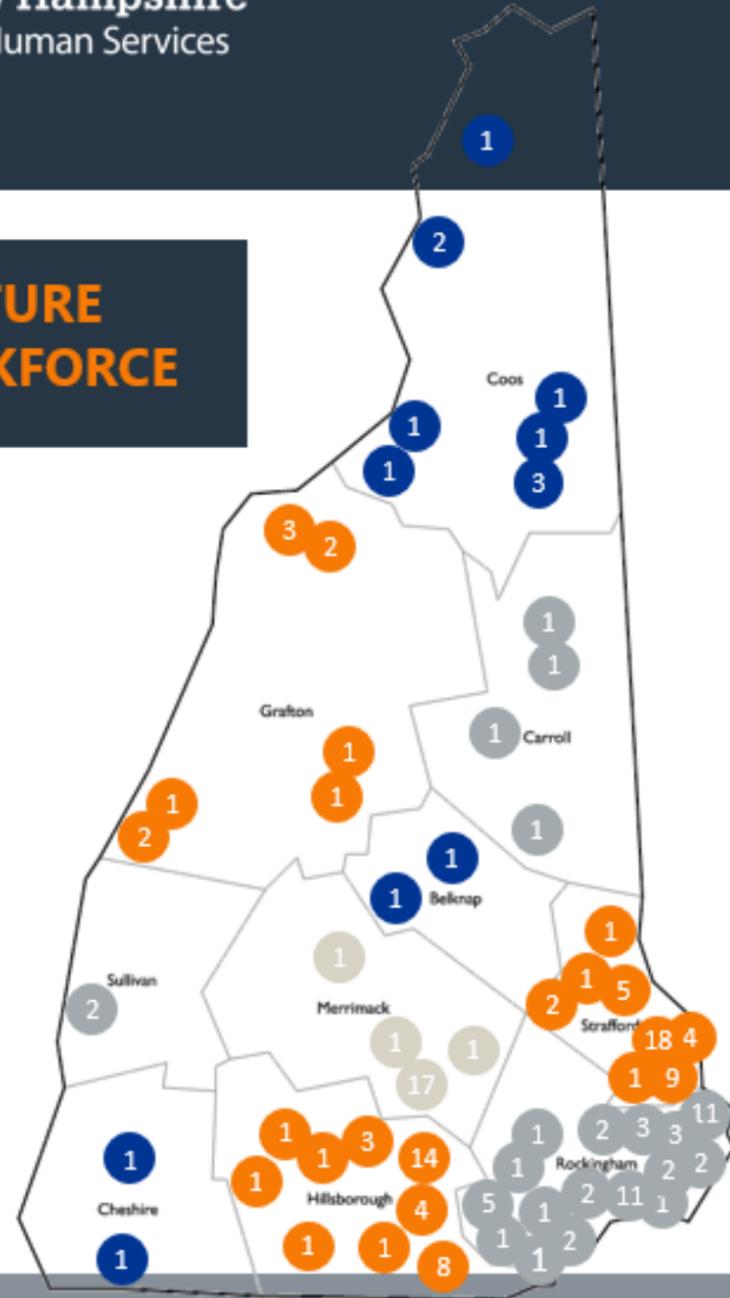




TRAINING OUR FUTURE HEALTHCARE WORKFORCE

Numbers of CHHS Experiential Learning Sites By County

Belknap	(2)
Carroll	(4)
Cheshire	(2)
Coos	(10)
Grafton	(10)
Hillsborough	(34)
Merrimack	(20)
Rockingham	(49)
Strafford	(41)
Sullivan	(2)



ACROSS NEW HAMPSHIRE:

This year, CHHS students were in:

10

Counties

59

Cities/Towns

174

NH-Based Sites

96%

CHHS undergraduates pursue an internship



61%

CHHS undergraduates who have a job in their field 6 months post graduation

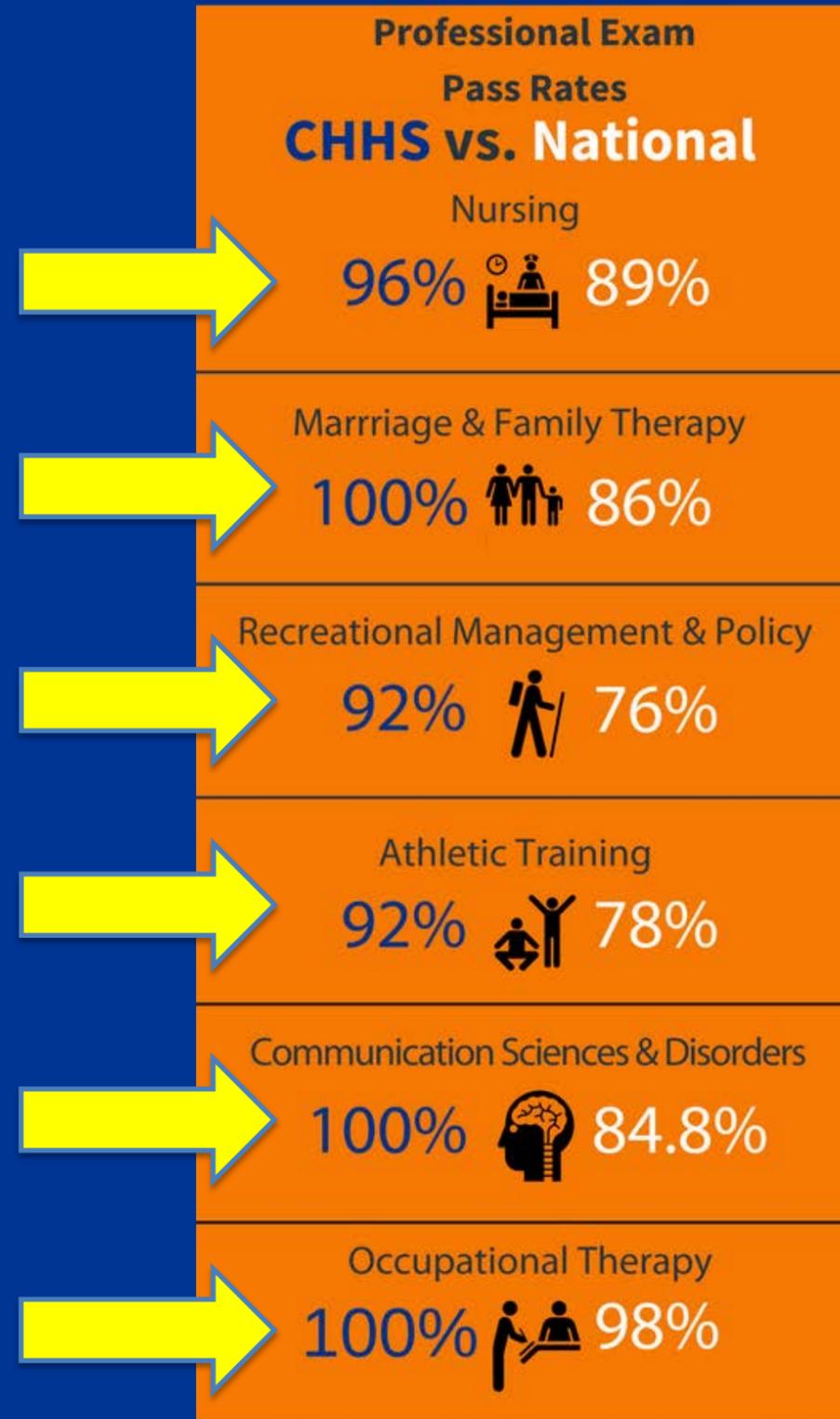
35%

CHHS undergraduates who are pursuing a graduate degree 6 months post graduation

=96% Placement Rate!



University of New Hampshire
College of Health and Human Services



**Superior Results on National
Licensure/Certification Tests**

Student Sentiments



Growth of Nursing



Growth of Nursing

Program	2014-15	2015-16	2016 - 17	2017-18
Undergrad BS	175	189	199	216
DEM N	22	21	24	31
MS CNL	6	10	12	5
MS EBN	3	3	3	7
MS NP	55	60	50	53
PM-NP	16	18	22	18
DNP	6	1	22	50
Total Students	283	302	332	380

**25% Growth in
Entry Level
Nursing**

**Increased 2018
Freshman Nursing
Admissions by 32%
(n=69 students)**

CHHS Has 3 of Top 5 Masters Programs at UNH

Master of
Social Work

Master of
Occupational
Therapy

Master in Nursing





Expanding Enrollments in Undergraduate Programs

- Nursing - BSN and DEMN
- Nursing – Masters and DNP
- Social Work
 - BSW & Advanced Standing
 - MSW Manchester moving to Hybrid
 - Online MSW
- Communications, Sciences and Disorders
- Therapeutic Recreation



New Programs

- Nurse Practitioner Programs – by 2020
 - Acute Care
 - Psych Mental Health
- Nursing as 2nd B.S. Degree
- Occupational Therapy Doctorate and OT Assistant – 2022
- Health Sciences Degree
 - Feed into athletic trainers masters program
- Speech and Language Pathology Doctorate (online) – equivalent to DMP
- SW- Advanced Standing (moving to online component)
- Continuing to align curriculum with workforce needs of the state now and in the future



College Initiatives

- Interprofessional Education
- Telehealth
- Behavioral Health
- Women's Leadership





Allied Health Initiatives

Allied Health is an area of focused growth for Plymouth State University

- Nursing, Physical Therapy, Public Health, Allied Health, Exercise and Sports Physiology, Athletic Training, Adventure Education, Counseling, School Psychology, Social Work (approx. 700 students) comprise the Health and Human Enrichment Cluster
- Students actively engage in internships, clinicals, and projects to support student professional development and support the health needs of the region
- Extensive Partnerships with regional schools and health organizations to provide professional development to in-service practitioners and to enhance health services to NH citizens

See further up here.

Workforce Initiatives

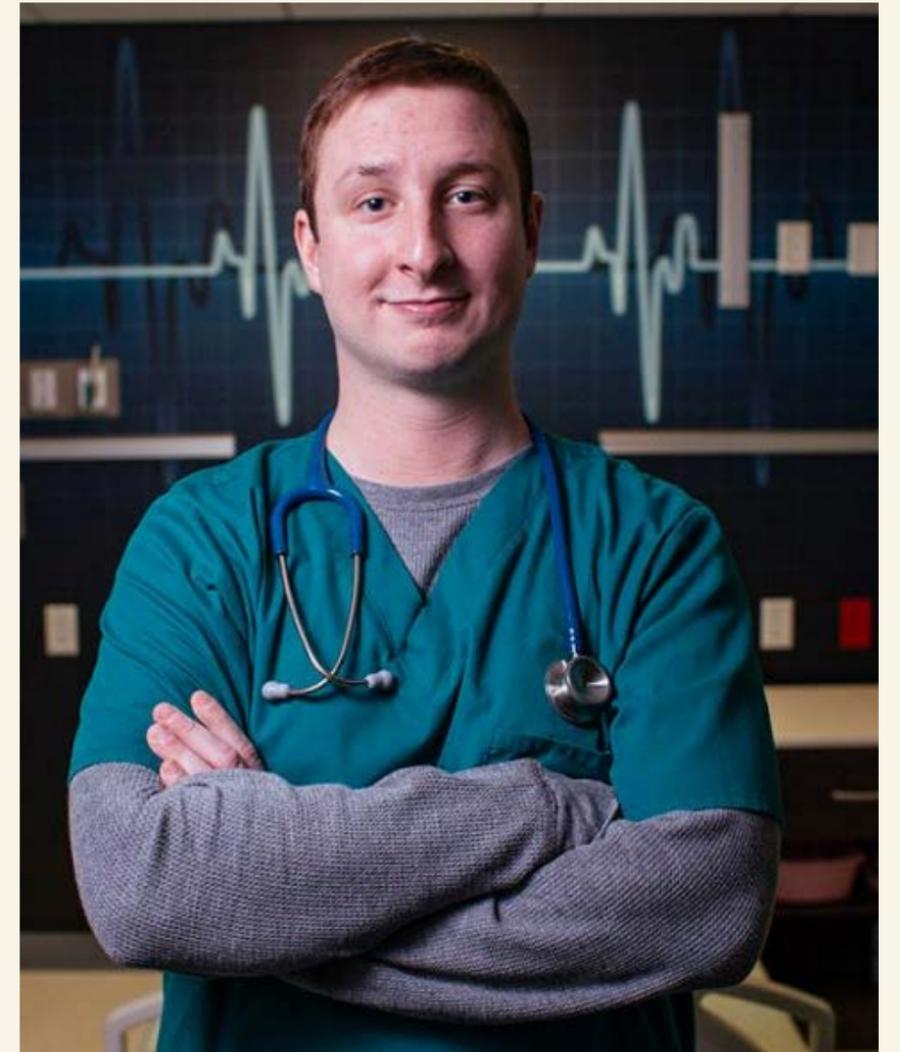
- Building a Cluster-based curriculum and focused programs in Life Sciences, Innovation and Entrepreneurship, and Health and Human Enrichment (Allied Health)
- Develop a Center for Excellence in Health Sciences that will double the size of our Nursing program while developing tracks for a Nurse Practitioner program and a Nurse Educator program that will train medical professionals to work and stay in NH
- Counselor Education and School Psychology is in its 5th year of HRSA funding to support behavioral health workforce development through funded internships and partnerships with school districts and health organizations to provide professional development to in-service staff and enhance services to NH citizens. The recent HRSA Supplement award will focus on substance use, treatment, and education by partnering with 3 Federally Qualified Health Centers in NH. An estimated 8,000 individuals have been impacted by the numerous professional development opportunities sponsored with this funding. The HRSA grants allow us to support 196 School Psychology, School Counseling and Clinical Mental Health Counseling Interns with a \$10,000 stipend over a seven-year period.

- Child Welfare IV-E Tuition Partnerships have been developed to appropriately prepare a diverse group of social workers for careers with a special emphasis on child welfare. The NH Division of Children, Youth, and Families (DCYF) has provided funding through the grant process enabling four (4) social work majors per year to receive in-state scholarships plus a one-time stipend of \$3,000 in exchange for a work commitment to the Division of 24 months for each year of tuition received. The aim of this grant is to ensure the preparedness and retention of the child welfare workforce.

Recent Program Innovations

- Second year of successful launch of our Doctor of Physical Therapy Program (90 students at full enrollment)
- Revamped our Health Education and Health Promotion into an UG program in Public Health
- Created undergraduate major in Allied Health as a pathway to graduate programs across the Health Spectrum
- Launching a STEM Educator Preparation 1-year intensive program in collaboration with P-12 district partnerships to support enhanced competencies in math and sciences.

- Keene State College has an established and expanding commitment to preparing workforce-ready graduates for entry into critical need areas of health and primary care.
- Programs address historic needs as well as those marked as priorities in the Governor's 2019 Budget.



Established Programs:

- BS in Nursing that has produced graduates placed in primary care facilities New Hampshire, Vermont, and Massachusetts as well as home health and hospice positions
 - BS in Exercise Science that prepares students to work in
 - Sports medicine
 - Pre-physical or occupational therapy
 - Personal training
 - Cardiac rehabilitation
-

Established Programs:

- Single or combined tracks in our Public Health program with training in population health, nutrition, and addiction that produce graduates ready for work as
 - Dietitians and nutritionists
 - Community health workers
 - Drug and alcohol recovery specialists
 - Patient advocates
-

Established Programs:

- A program in Safety and Occupational Health and Applied Sciences with multiple tracks to prepare students for professional work in
 - Accident prevention and response
 - Environmental health and safety
 - A Psychology program that produces majors who work in
 - Counseling
 - Human resources
 - Health care
-

Addressing the NH Health Care Workforce Shortage

Granite State College

Addressing the NH Health Care Workforce Shortage

Seamless Progress and Integration

- Clinical and Non-clinical needs
 - Recognition Health Care is an Ecosystem needing diverse needs
 - Licensed and non-licensed needs
 - Insert non-licensed roles where appropriate to maximize work of licensed professionals
- Partnerships-Medical centers to Community based organizations
 - Inform current offerings
 - Assist with future programmatic offerings

Addressing the NH Health Care Workforce Shortage

- Respect Non-collegiate Learning (Prior Learning Assessment-PLA)
 - Evaluation of DHMC Surgical Technology program for college credit to apply to Associate and/or Bachelors degree
 - College credit for specialty area nursing certification
- Instructional Approach
 - Interprofessional education collaborative team
 - Leadership based
 - Career ladder
 - Competency aligned

Addressing the NH Health Care Workforce Shortage

- Programmatic offerings
 - Degree Programs- Professional Development, Associates, Bachelors, Minors, Masters, Micro-credentials
 - ❑ CCSNH Pathway for RN-BSN to MSN
 - ❑ Bachelors- Behavioral Health/Human Services/Health and Wellness/Allied Health
 - ❑ Masters- Health Care Management, Project Management, Leadership, Management
 - ❑ Addiction Studies, Prevention Studies- minors
 - ❖ Address current issues and proactive public health approach

Addressing the NH Health Care Workforce Shortage

- Majority of students are NH Residents
 - Alumni have understanding of social determinates of health for their region/community thereby having greater impact

House Bill 2
Strategic Investments
Capital Infrastructure Revitalization Fund

Additional Prioritized Needs
One-Time Strategic State Support
UNH

UNH: Nursing and Health Sciences Initiative

UNH Nursing and Health Sciences Initiative \$12.3 million

- Investment from State \$9M
- Investment from UNH \$3.3M
- **Total Investment in Health Sciences Initiative \$12.3M**

Return on Investment

- Expansion of Nursing facilities to accommodate a total of **125** new students per year across Health Sciences programs including renovation of 20,000-30,000 sq ft of space on or near the Durham campus.
 - Expand B.S. Nursing, Direct Entry Master's in Nursing (DEMN), and explore adding nursing as a 2nd degree.
 - Create 2 additional nurse practitioner(NP) programs in Psychiatric NP and Acute Care NP
 - Develop state-of-the-art nursing simulation laboratory

This initiative will double the number of students graduating in Health Sciences occupations including Nursing in 4 years.