Legislative Commission on Primary Care Workforce Issues

January 23, 2020 2:00-4:00pm at the NH Hospital Association –Conference Room 2, 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 - 3:05  Update on UNH Behavioral Health project focused on social workers and occupational therapists - Alexa Trolley-Hanson MS OTR/L, Clinical Assistant Professor, Department of Occupational Therapy, University of New Hampshire

3:05 - 3:15  Update on SLRP Summit – Alisa Druzba

3:15 - 3:40  Review of Statewide Workforce Efforts – see attached spreadsheet

3:45 - 4:00  Legislative Update – priority bills

4:00  Adjourn

Next meeting: Thursday February 20, 2:00-4:00pm
Welcome and Introductions – Laurie Harding – Chair, NH Commission on Primary Care Workforce Issues

Update on UNH Behavioral Health project focused on social workers and occupational therapists - Alexa Trolley-Hanson MS OTR/L, Clinical Assistant Professor, Department of Occupational Therapy, University of New Hampshire

Refer to presentation “UNH PCBH Training Program.”
3:05 - 3:15  **Update on SLRP Summit** – Alisa Druzba

Refer to handout “State Loan Repayment Program Summary.”

- Working to determine and implement new guidelines by 7/1
  - Takes 3 months to get providers processed and established as contracted providers

3:15 - 3:40  **Review of Statewide Workforce Efforts**

Refer to handout “Current List of Statewide Health Care Workforce Efforts.”

- Back of the budget cuts – DHHS must provide list to fiscal but the committee doesn’t have to approve them
  - Effort to retain all SLRP funds
    - Bi-State to encourage past, current, and new providers in program to write letters describing importance of the program
    - Bi-State to put together video of impact
      - Will push out to stress how well the program works
- Next steps for JUA funds
  - Hope to have right groups on spreadsheet but some may be missing (i.e. other things happening locally that we don’t know about)
  - Handout obtained from Governor’s Taskforce but Leslie Melby developed it

3:45 - 4:00  **Legislative Update – Priority Bills**

Refer to handout “2020 Workforce Bills.”

4:00  **Adjourn**

Next meeting: Thursday February 20, 2:00–4:00pm
UNH
PCBH Training Program Update
Our Team Includes

Co-Principal Investigators
Alexa Trolley-Hanson, Occupational Therapy & Will Lusenhop, Social Work

Project Manager
Melissa Mandrell, Institute on Disability (IOD) Evaluation
JoAnne Malloy & Sara Chapo, IOD

Provider Training
Jeanne Ryer & Katherine Cox, Institute for Health Policy and Practice (IHPP)

External Consultant
Alexander Blount, Antioch University
Brief Overview

• The PCBH Training program consists of graduate course-work, internships, and outreach and education in the rapidly expanding area of integrating physical and behavioral health into primary care settings.

• The program is made possible by a 1.9-million-dollar grant for 4 years from the Health Resources Services Administration (HRSA).

• Provides funding for faculty and staff to develop and implement the program as well as stipends for students.

• The program’s overarching goals are to train students to work in medically underserved and rural areas across the state/country in the area of primary care behavioral health.

• 116 students over 4 years.
Overview of the Training Program
Interprofessional Training

• Students work together on teams including social work, occupational therapist and nursing students using a case-based method

Course Work

• Pre-Course Modules on PCBH
• PCBH I: Introduction to PCBH: Screening and Assessment
• PCBH II: Clinical Skill Development and Program Transformation

Internship

• Internship in an integrated and or setting moving toward the integration of primary care and behavioral health
  • 9 month/24 hour-week placement (SW)
  • 6 month/16 hour-week placement (OT)
PCBH Training Program competencies are based on the “Core Competencies for Behavioral Health Providers Working in Primary Care” developed by the Eugene S. Farley Health Policy Center.
PCBH Training Program Competencies

- **PCBH Foundational knowledge and skills**
- **Collaborative care roles**
- **Population based care**
- **Client engagement**
- **Team function and relationships**
- **Communication skills**
- **Whole-person care**
- **Social justice**
Federally Qualified Health Care Centers
- Greater Seacoast Community Health Center
- Indian Stream Health Care
- Child Health Services
- Manchester Community Health Center

Hospital Primary Care Practices
- Concord Hospital
- Elliot Hospital
- Higgins Hospital

Community Based Programs/Centers
- Center for Life Management
- Granite Pathways
- Easter Seals
Resources for Supervisors and Organizations

- Free seminars leading to state supervision certification (for social workers).
- Topical seminars and technical assistance through the Citizens Health Initiative, Behavioral Health Learning Collaborative, a component of (IHPP).
  - Connection to state-wide network of over 50 organizations working toward the integration of behavioral health and primary care services.
- Access to UNH faculty and students on current, knowledge, research, practice, and policy in PCBH.
Advisory Board
Meeting

- June 2019: Focused Discussion on
  - Program strengths and areas for improvement
  - Sustainability-who and how to target different workforce development needs
PCBH Training Program
Year 1
March 2018-May 2019

• Trained 20 PCBH Students: 17 Social Work, 3 Occupational Therapy
• Developed 4 New Training Sites
• Expanded Existing Sites to include 8 Additional Training Program Slots
• Developed and Implemented 2 New Graduate Courses: PCBH I and PCBH II
• Developed a Collaboration between NH Academic Institutions with BH HRSA Grants
• Presented on PCBH at NH Provider’s Association and Citizens Health Initiative
• Participated in Outreach to Numerous IDN’s, Provider Organizations, Providers
PCBH Training Program
Year 2: March 2019-May 2020

- Started Cohort 2 including 28 PCBH students: 13 OT students and 15 SW students
- Revised Graduate Courses including Pre-Grant Modules, PCBH I and PCBH II
- Developed 6 New Sites, (Hanover, Manchester, Dover, Colebrook, Portsmouth)
- Presented at the Collaborative Family Healthcare Association Conference, Oct, 2018
- Co-hosted a Professional Development Conference for Supervisors Fall, 2018
- Presented at the National American Occupational Therapy Association Conference in New Orleans in April, 2019
- Hosted a PCBH Presentation to UNH Faculty, April 2019
- Co-hosting an Interprofessional Student Conference with Academic Partners Summer, 2019
PCBH Training Program: Year 3 March 2020–May 2021

- Application period is ongoing- Expect 35-40 students this year
  - Current number: 29
  - Expected: 35-40 based on continued expansion into community mental health center with integration goals

- Presentations:
  - Collaborative Family Healthcare Association Oct 2019
  - American Occupational Therapy Association April 2019
  - Citizens Health Initiative Sept 2019
  - NH Occupational Therapy Association Oct 2019
  - NH Behavioral Health Summit Dec 2019
Specific Student Projects

**OT**

- Developed Substance Use Disorder education for service providers of Easter Seals Early Supports and Services so they can better support their families in the community.
- Adapting psychosocial clubhouse environment using checklists to best support member independence
- Developing discharge planning to decrease readmission rates to inpatient programs
- Developing psychoeducational program for non-pharmaceutical pain management for adults in a community mental health program
- Promoting Access and Participation in Primary Care for individuals with Brain Injury: Connecting with Families First staff to ID needs they have related to providing services to individuals with brain injury, addressing those needs in a way that will best reach the largest areas of need.
- Expanding recovery programming to include living skills such as budgeting, healthy eating, work, and exercise
- Developed an intake process and employment unit in a psychosocial clubhouse to help identify resources to assess participants reflective skills prior to becoming sick.
- Focused on compiling beneficial OT resources to address needs related to chronic pain and social anxiety management

**SW**

- Identify the reach of the MAT program and the process of referring to MAT. Consider how this relates to Amoskeag patients who visit the Eliot ER for SUD.
- Providing phone based BH support as part of primary care services
- Minimizing prolonged hospital stays and risk of infection for patients without advanced care directives by supporting patients in completing their advanced care directives/DPOAH.
- Helping homeless individuals in IOP (Intensive Outpatient Program) connect with social workers from Families First
- Personal Responsibility Education Program (PREP); providing free
- Promoting regular testing of patient’s A1C scores within an Elliot primary care practice
- Establishing a method to collect information related to client’s nicotine use during intake appointments
- Running a tobacco treatment group to help people stop using tobacco products.
- Developing an agency intervention to address suicidal ideation in adolescents, by examining data from adolescents that scored “severe,” on the PHQ 9
- Coordination of care for patients in treatment in the PHP and IOP setting. Working with clients to avoid them going AMA (against medical advice) to leave the program before finishing their 90-days.
- Care Coordination for High Risk Patients with Medicaid in Primary Care: A process evaluation of WMCH’s Care Coordination Program
Data Summary

Year 1

• Competencies were assessed by a self-reported pre and post training survey. (See attached document in email)

• Students reported increased competency across all 8 areas.

• Qualitative was data was also collected from students and site supervisors and was used to revise training program for year 2.

• Year 2 data is being analyzed
Marketing Efforts

- We have developed “sicks” and brochures for students and providers
- We are developing a web-site for improved access to information about the program for students and providers
- Ongoing: Review of all materials for cultural and linguistic accessibility
- We regularly attend IDN and other stakeholder meetings to describe the program
Ongoing Grant Objectives

1. Continue to recruit student sites in NH North Country
2. Develop a coalition to address OT funding barriers at a policy level
3. Develop a Graduate Certificate for Integrated Care at UNH
Co-Principal Investigators / Program Directors

Alexa Trolley-Hanson, MS, OTR/L
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Will Lusenhop, MSW, Ph.D., LICSW
Clinical Assistant Professor
Department of Social Work
rwilliam.Lusenhop@unh.edu
tel. 603-862-5257

Feel free to reach out to learn more about the program.
SLRP as of January 13, 2020

We have 57 providers currently on contract as of January 13, 2020

Geography
Rural – 40
Non-Rural - 17

Provider Types
Primary Care = 28
Physician – 10
Nurse Practitioner (NP) – 15
Physician Assistant (PA) – 3
Behavioral Health = 23
Psychiatrist – 0
Psychologist – 2
Psychiatric Nurse Practitioner (Psych NP) – 5
Licensed Independent Clinical Social Worker (LICSW) – 5
Licensed Clinical Mental Health Counselor (MHC) – 7
Marriage and Family Therapist (MFT) - 2
Master’s Licensed Alcohol and Drug Counselor (MLADC) - 2
Licensed Alcohol and Drug Counselor (LADC) – 0
Oral Health = 6
Dentist – 3
Registered Dental Hygienist (RDH) – 3

Locations
Ammonoosuc Community Health Services – 4 (2-NP, LICSW, RDH)
Antrim Medical Group – 2 (NP)
Center for New Beginnings – 1 (Psychologist)
Cheshire Medical Center/DHC – 1 (Physician)
Community Partners – Dover – 2 (Psych NP, MHC)
Concord Hospital Family Health Center – 1 (MHC)
Coos County Family Health Services – 4 (Physician, PA, Dentist, RDH)
Dental Health Works of Cheshire County – 1 (RDH)
Easter Seals NH Dental Center – 1 (Dentist)
Families in Transition – 1 (MLADC)
Greater Seacoast Community Health Center – 1 (Dentist)
Keady Family Practice – 2 (NP)
Lakes Region General Healthcare – 5 (Physician, 4-NP)
Lakes Regional Mental Health Center – 2 (MHC)
Lamprey Health Center – 1 (PA)
Manchester Community Health Center – 3 (MFT, LICSW, MLADC)
Memorial Hospital Woman’s Health – 1 (Physician)
Mental Health Center of Manchester – 4 (2-Psych NP, LICSW, MHC)
Mid-State Health Center – 1 (NP)
New London Hospital – 1 (Physician)
North Country Primary Care – 2 (Physician, NP)
Northern Human Services – 1 (Psych NP)
Plymouth Pediatric and Adolescent Medicine – 3 (Physician, 2-NP)
Plymouth OB/Gyn – 1 (Physician)
Riverbend Community Mental Health Center – 4 (MHC, Psychologist, Psych NP, LICSW)
Saco River Medical Group – 2 (Physician, NP)
Seacoast Mental Health Center – 1 (MFT)
West Central Behavioral Health – 2 (MHC, LICSW)
Wolfeboro Family Medicine – 2 (Physician, PA)

Service Schedule
Full-time – 50
Part-time – 7

We have 41 providers in the contracting process

Geography
Rural – 20
Non-Rural - 21

Provider Types
Primary Care = 15
Physician – 2
Nurse Practitioner (NP) – 12
Physician Assistant (PA) – 1
Behavioral Health = 25
Psychiatrist – 0
Psychologist – 1
Psychiatric Nurse Practitioner (Psych NP) – 3
Licensed Independent Clinical Social Worker (LICSW) – 6
Licensed Clinical Mental Health Counselor (MHC) – 7
Marriage and Family Therapist (MFT) – 1
Masters Licensed Alcohol and Drug Counselor (MLADC) – 2
Combination LICSW/MLADC – 3
Licensed Alcohol and Drug Counselor (LADC) – 2
Oral Health = 1
Dentist – 1
Registered Dental Hygienist (RDH) – 0

Locations
Associates in Medicine (VRH) – 1 (NP)
Center for New Beginnings – 1 (MHC)
Coos County Family Health Services – 1 (Physician)
Concord Hospital Family Health Center – 1 (NP)
Doorway @ Wentworth-Douglass Hospital – 1 (LICSW/MLADC)
Families in Transition – 3 (LICSW/MLADC, 2-LADC)
Greater Nashua Mental Health Center – 3 (MHC, 2-LICSW)
Greater Seacoast Community Health – 1 (LICSW/MLADC)
Headrest – 1 (MLADC)
Keady Family Practice – 1 (NP)
Lakes Region General Healthcare – 2 (NP)
Lakes Region Mental Health Center – 2 (Psych NP)
Lamprey Healthcare – 3 (Physician, 2-NP)
Manchester Community Health Center – 1 (NP)
Mental Health Center of Greater Manchester – 2 (Psych NP, MHC)
Mid-State Health Care – 2 (Dentist, NP)
Monadnock Family Services – 2 (LICSW, MLADC)
Moultonborough Family Medicine (Huggins) – 1 (NP)
North Country Primary Care – 1 (NP)
Northern Human Services – 2 (MHC, LICSW)
Riverbend – 5 (Psychologist, LICSW, 2-MHC, MFT)
Saco River Medical Group – 2 (NP, PA)
Seacoast Mental Health Center – 1 (MHC)
West Central Behavioral Health – 1 (LICSW)

Service Schedule
Full-time – 40
Part-time - 1
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<th>Initiative Title</th>
<th>Lead Organization</th>
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<tbody>
<tr>
<td>Commission on Primary Care Workforce Issues</td>
<td>NH House of Representatives</td>
<td>Laurie Harding</td>
<td>Chair</td>
<td>lharding0625@g</td>
<td>603-667-7734</td>
<td><a href="http://www.gencourt.state.nh.us/statstudcomm/committees/152/">http://www.gencourt.state.nh.us/statstudcomm/committees/152/</a></td>
<td>The commission plans and advocates for policy changes related to maintaining and strengthening an effective primary care workforce in NH, with special concern for rural and other underserved areas. The Commission’s duties include: I. Reviewing the impact of existing policies related to strengthening NH’s primary care workforce and making recommendations relative to appropriate use of funds for training, education, and recruitment; II. Assessing the degree to which insurers, managed care organizations, and state and federal payment sources present inequities and problems regarding payment for primary care services which may serve as a barrier for attracting and retaining the providers necessary for network adequacy; III. Collecting and reviewing data and information that informs decisions and planning for the primary care workforce and looking for innovative ways for expanding the state’s primary care resources including, but not limited to, interstate collaboration; IV. Assembling and including in its annual report, required under RSA 126-T:4, data on the availability, accessibility, and effectiveness of primary care in NH, with special attention to such data in rural and d</td>
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<td>mail.com</td>
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<td>Commission continues to meet.</td>
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<td>NH Sector Partnerships Initiative (SPI), Healthcare Sector</td>
<td>The Sector Partnerships Initiative is supported by NH Works. The NH Healthcare Association has served as the lead for the healthcare sector.</td>
<td>Roxie Severance</td>
<td>Healthcare Sector Lead Consultant</td>
<td><a href="mailto:roxie@rsconsulting.services">roxie@rsconsulting.services</a>, <a href="mailto:rseverance@nhca.org">rseverance@nhca.org</a></td>
<td>603.733.6072</td>
<td><a href="https://nhsectorpartners.org/industries/health-care/">https://nhsectorpartners.org/industries/health-care/</a></td>
<td>The NH SPI seeks to facilitate a new, industry-driven statewide initiative to help healthcare organizations address their workforce needs, while also helping workers prepare for and advance in careers in the industry. Healthcare sector partnership report: <a href="http://www.nhworks.org/uploads/NH_Health_Care_Asset_Map_3-2-17.pdf">http://www.nhworks.org/uploads/NH_Health_Care_Asset_Map_3-2-17.pdf</a></td>
<td>Currently on hold. The NH Healthcare Association will be applying to continue the Healthcare Sector work for 2 years - 2020 - 2021</td>
</tr>
<tr>
<td>Apprenticeship NH - health care apprenticeships</td>
<td>Community College System of NH</td>
<td>Emily Zeien</td>
<td>Grant Manager</td>
<td><a href="mailto:ezeien@ccsnh.edu">ezeien@ccsnh.edu</a></td>
<td>603.230.3526</td>
<td><a href="https://apprenticeshipnh.com/">https://apprenticeshipnh.com/</a></td>
<td>In 2017, the U.S. Department of Labor, Employment and Training Administration awarded the Community College System of New Hampshire (CCSNH) a $1.2 million State Apprenticeship Expansion grant. This grant allows CCSNH to expand apprenticeship opportunities in healthcare, IT and advanced manufacturing, increasing opportunities for people looking to learn new skills or enter a new career.</td>
<td>Current apprenticeships include: Licensed Nurse Assistant (LNA) in long term care via White Mountains CC, at Catholic Medical Center via Manchester CC, Hillsborough Nursing Home via Manchester CC, and Medical Billing Apprenticeship w AdvantEdge Healthcare Solutions in Salem NH</td>
</tr>
<tr>
<td>DOL-funded Health Care Apprenticeships</td>
<td>US Department of Labor, Employment and Training Administration, Office of Apprenticeship, Cleveland Federal Building, Concord NH</td>
<td>Lauren Smith</td>
<td>State Director</td>
<td><a href="mailto:Smith.Lauren.M@dol.gov">Smith.Lauren.M@dol.gov</a></td>
<td>(603) 225-1446</td>
<td></td>
<td>See tab of apprenticeships for details. Program includes Home Health Aide, Medical Assistant, Medical Coder, Medical Secretary, Nurse Assistant, Pharmacy Support Staff, Phlebotomist, Surgical Tech</td>
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<td>Medical Assistant (MA) Accelerator Program</td>
<td>Exeter Health Resources and Great Bay Community College</td>
<td>Chris Callahan</td>
<td>VP, Human Resources</td>
<td><a href="mailto:ccallahan@ehr.org">ccallahan@ehr.org</a></td>
<td>603-778-7311</td>
<td><a href="http://www.exeterhospital.com/news-and-health-library/exeter-hospital-news/MA-class-partnership">http://www.exeterhospital.com/news-and-health-library/exeter-hospital-news/MA-class-partnership</a></td>
<td>This training program is a partnership between Exeter Health Resources (EHR) and Great Bay Community College to address the workforce shortage via their Medical Assistant (MA) Accelerator Program, an 8-week program training students who are immediately work-ready for jobs at EHR. Upon successful completion of the program, students are eligible to sit for the clinical MA certification exam. As an incentive, for those who secure employment through Exeter’s Core Physicians, 60% of tuition will be paid and students will receive base pay and eligible benefits during the program. Students make a 2-year commitment of employment</td>
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<tr>
<td>State Loan Repayment Program (SLRP)</td>
<td>DHHS</td>
<td>Alisa Druzba</td>
<td>Office of Rural Health and Primary Care</td>
<td><a href="mailto:Alisa.Druzba@dhrs.nh.gov">Alisa.Druzba@dhrs.nh.gov</a></td>
<td>603-271-5934</td>
<td><a href="http://www.dhhs.nh.gov/dphs/bchs/rhpc/repayment.htm">http://www.dhhs.nh.gov/dphs/bchs/rhpc/repayment.htm</a></td>
<td>The NH State Loan Repayment Program (SLRP) provides funds to health care professionals working in areas of the State designated as being medically underserved and who are willing to commit and contract with the State for a minimum of three years (or two if part-time). Funds are insufficient to meet the need for health care providers in underserved areas.</td>
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<td>Workforce Recruitment and Retention</td>
<td>Bi-State Primary Care Association</td>
<td>Stephanie Pagliuca</td>
<td>Director, Bi-State Primary Care Association</td>
<td><a href="mailto:Spagliuca@bistatepca.org">Spagliuca@bistatepca.org</a></td>
<td>603-228-2830 x111</td>
<td><a href="https://www.bistaterecruitmentcenter.org/">https://www.bistaterecruitmentcenter.org/</a></td>
<td>Bi-State’s Recruitment Center is a service of Bi-State Primary Care Association, the region’s only nonprofit state-focused recruitment resource. The Recruitment Center identifies and matches primary care doctors, dentists, nurse practitioners, physician assistants, and nurse midwives with practices and communities throughout Vermont and New Hampshire that meet the provider’s personal and professional needs. Contact us about recruitment incentive programs such as educational loan repayment, Conrad State 30, and National Health Service Corps programs.</td>
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<td>Citizen’s Health Initiative</td>
<td>UNH Institute for Health Policy and Practice</td>
<td>Jeanne Ryer</td>
<td>Director</td>
<td><a href="mailto:Jeanne.Ryer@unh.edu">Jeanne.Ryer@unh.edu</a></td>
<td>603-513-5126</td>
<td><a href="https://www.citizenshealthinitiative.org/">https://www.citizenshealthinitiative.org/</a></td>
<td>The New Hampshire Citizens Health Initiative brings together a broad cross section of citizen representatives, joined by businesses, medical providers, and community agencies in an ongoing, goal-oriented effort to achieve a plan for our state.</td>
<td>Work across behavioral health integration, payment reform, and telehealth.</td>
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<td>Alliance for Healthy Aging - workforce workgroup</td>
<td>Center on Aging and Community Living (CACL), UNH</td>
<td>Laura Davie</td>
<td>Chair, Workforce Group, Alliance for Healthy Aging</td>
<td><a href="mailto:laura.davie@unh.edu">laura.davie@unh.edu</a></td>
<td>603.862.3682</td>
<td><a href="http://www.endowmentforhealth.org/our-priorities/ensuring-the-health-and-dignity-of-elders/collaborative-approach-elders-nh">http://www.endowmentforhealth.org/our-priorities/ensuring-the-health-and-dignity-of-elders/collaborative-approach-elders-nh</a></td>
<td>The Alliance for Healthy Aging (AHA) is a statewide collaboration of numerous community partners working together to address the issues of an aging NH. AHA’s vision: NH’s communities advance culture, policies, and services which support older adults and their families, providing a wide range of choices that advance health, independence and dignity. AHA’s workforce strategy is: “Improve the availability of quality healthcare and social service workforces.” Initial efforts are focused on the following strategies: 1. “Policy makers and stakeholders have an awareness of direct care workforce shortage and AHA’s strategic area goal”; and 2. “Connect with workforce efforts in NH and deliver AHA’s messaging priorities.”</td>
<td>The AHA Workforce group meets monthly. A draft workplan is under review.</td>
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<tr>
<td>Direct Connect &amp; Interactive Career Lattice</td>
<td>Center on Aging and Community Living</td>
<td>Jennifer Rabalais</td>
<td>Project Director</td>
<td><a href="mailto:Jennifer.Rabalais@unh.edu">Jennifer.Rabalais@unh.edu</a></td>
<td></td>
<td><a href="https://chhs.unh.edu/center-aging-community-living/workforce-development">https://chhs.unh.edu/center-aging-community-living/workforce-development</a></td>
<td>DirectConnect was created to address the growing need for additional direct care workers in NH and to improve training and educational opportunities for workers pursuing careers in this field. Through DirectConnect, an interactive career guide was created to provide awareness and career guidance to those interested in starting or growing their career in direct care.</td>
<td>Funded with ARRA funds. Website still offers tools.</td>
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<tr>
<td>Monadnock Region Healthcare Workforce Group</td>
<td>Cheshire County</td>
<td>Cathy Gray</td>
<td>Chair, Monadnock Initiative and President/CEO, Cedarcrest Center for Children with Disabilities</td>
<td><a href="mailto:cgray@cedarcrest4kids.org">cgray@cedarcrest4kids.org</a></td>
<td>603.358.3384</td>
<td></td>
<td>Cheshire/Monadnock area initiative created to increase the pool of individuals available for healthcare positions in the Monadnock region and NH and to reduce barriers to their successful employment. Concerns include the loss of LPN programs throughout the state and nursing licensure delays.</td>
<td>Awaiting notice of award for a federal America's Promise grant</td>
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<td>NH Area Health Education Center</td>
<td>NH AHEC</td>
<td>Kristina Fjeld-Sparks</td>
<td>Director, NH AHEC</td>
<td><a href="mailto:Kristina.E.Fjeld-Sparks@Dartmouth.edu">Kristina.E.Fjeld-Sparks@Dartmouth.edu</a></td>
<td>603.646.3315</td>
<td><a href="https://www.dhhs.nh.gov/omb/zone1/caremgmt/healthcare/documents/hc-10-25-2016-area-health-education.pdf">https://www.dhhs.nh.gov/omb/zone1/caremgmt/healthcare/documents/hc-10-25-2016-area-health-education.pdf</a></td>
<td>The NH AHEC is a network of a program office and 2 community-based center offices that has a well-established infrastructure to meet the needs of NH's healthcare workforce. AHECs play a significant role in building a workforce while collaborating with community partners to continually improve the quality of the healthcare system for the future. NH AHECs aim to: 1. Meet the increasing demands for an adequate healthcare workforce; particularly in primary care; 2. Improve the distribution of health professions workforce particularly in rural and underserved areas; 3. Foster a diverse health professions workforce; 4. Prepare health professionals to expand collaborative practice and team-based models of care; 5. Promote innovative care delivery models that achieve more efficient and effective patient-centered care, improve professional satisfaction and retention of providers, and improve workforce capacity and care quality. AHECs also provide services that respond to key needs of the changing healthcare landscape. AHEC programs: • Integrate public health and primary care and address the increased need for the placement of students in community-based primary care settings. • Participate in efforts to increase the health care workforce at the local level through a Community Health Worker training. • Provide Interprofessional education initiatives to develop team-based care and focus on training for improved patient safety and clinical outcomes.</td>
<td>Northern AHEC: <a href="http://www.nchcnh.org/AHEC.php">http://www.nchcnh.org/AHEC.php</a></td>
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<td>Initiative Title</td>
<td>Lead Organization</td>
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<td>Evaluation of the direct care workforce on long-term care</td>
<td>Alzheimer’s Association MA/NH Chapter</td>
<td>Heather Carroll</td>
<td>Director of Policy</td>
<td><a href="mailto:hcarroll@alz.org">hcarroll@alz.org</a></td>
<td></td>
<td><a href="https://www.alzmassnh.org/advocacy/new-hampshire/">https://www.alzmassnh.org/advocacy/new-hampshire/</a></td>
<td>Mandates that all of the direct care workforce who come in contact with people with dementia have a mandatory amount of training in all levels of care</td>
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<td>Assessing the Workforce for the Integration of Behavioral Health and Primary Care in NH</td>
<td>Center for Behavioral Health Innovation, Antioch University, Keene</td>
<td>Sandy Blount</td>
<td>Co-Director</td>
<td><a href="mailto:ablount@antiocch.edu">ablount@antiocch.edu</a></td>
<td>603-283-2194</td>
<td><a href="https://www.antioch.edu/new-england/wp-content/uploads/sites/6/2017/11/WhoWillProvideIntegratedCareWFReport.pdf">https://www.antioch.edu/new-england/wp-content/uploads/sites/6/2017/11/WhoWillProvideIntegratedCareWFReport.pdf</a></td>
<td>This study fills knowledge gaps about the integrated primary care workforce in NH. Surveyed safety net clinics for workforce roles and needs. Surveyed academic and certificate programs about current and future commitment to training the primary care behavioral health workforce. Assesses workforce and training needs for Behavioral Health Clinicians, Consulting Psychiatric Clinicians, Primary Care Clinicians, and Care Enhancers. Meeting for discussion involving clinics, academic programs, and other players. Leading to the development of an ongoing forum for PCBH workforce planning.</td>
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<td>Children’s Behavioral Health Workforce Development Network</td>
<td>UNH Institute on Disability</td>
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<td><a href="https://iod.unh.edu/projects/nh-childrens-behavioral-health-workforce-development-network">https://iod.unh.edu/projects/nh-childrens-behavioral-health-workforce-development-network</a></td>
<td>This project involves the development and delivery of cross-disciplinary professional development to a diverse group of providers in order to improve the services, supports, and system for children and youth with serious emotional disturbances and their families. The Institute on Disability is working with the NH Children’s Behavioral Health Collaborative, the NH System of Care implementation project, Fast Forward, and the NH Department of Health and Human Services to facilitate a coordinated training network that will (1) expand the array of services and supports available to children/youth with SED and their families, (2) promote research-based interventions, and, (3) improve the core competencies of the children’s behavioral health workforce.</td>
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<td>Governor's Millennial Advisory Council</td>
<td>NH Governor's Office</td>
<td>Alex Fries</td>
<td>Chair of the Council</td>
<td><a href="mailto:millennial.council@nh.gov">millennial.council@nh.gov</a></td>
<td><a href="https://www.governor.nh.gov/millennial/index.htm">https://www.governor.nh.gov/millennial/index.htm</a></td>
<td>The Governor's Millennial Advisory Council was first established by Executive Order 2017-07 pdf file on September 20th, 2017 with the distinct purpose of providing the Governor with recommendations, insight, suggestions, and feedback on matters of state policy that directly impact the attraction and retention of young workers.</td>
<td>The Council meets once a month at 6:00 P.M. in the Executive Council Chamber at the State House in Concord.</td>
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<tr>
<td>Stay Work Play</td>
<td>Will Stewart</td>
<td>Executive Director</td>
<td><a href="mailto:will@stayworkplay.org">will@stayworkplay.org</a></td>
<td><a href="http://www.stayworkplay.org">www.stayworkplay.org</a></td>
<td><a href="http://www.stayworkplay.org">www.stayworkplay.org</a></td>
<td>Stay Work Play NH (SWP) is a 501(c)3 nonprofit that was established in 2009 to further the 55% Initiative, support and advance several recommendations made by the Governor’s Task Force for the Recruitment and Retention of a Young Workforce for New Hampshire and serve as an independent organization to run a website and associated marketing effort regarding what New Hampshire can offer to the 20 and 30 year old demographic in terms of staying, working, and playing here.</td>
<td>Internships, job listings, young professional networks, boomerang week</td>
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<td>Workforce Accelerator 2025</td>
<td>BIA, NH Charitable Foundation</td>
<td>Sara Colson</td>
<td>Dir. of Workforce Accelerator 2025</td>
<td><a href="mailto:scolson@BIAofNH.com">scolson@BIAofNH.com</a></td>
<td>603.224.5388 x116</td>
<td><a href="https://www.biaofnh.com/accelerator.html">https://www.biaofnh.com/accelerator.html</a></td>
<td>Workforce Accelerator 2025: a workforce development initiative of the Business and Industry Association and the NH Charitable Foundation, with support from Fidelity Investments. Created in response to the need for a sustainable solution for growing a skilled workforce in New Hampshire, the initiative includes: 65 x 25 Facilitation &amp; School to Career Pathways. Research shows that 65% of the adult workforce will need a meaningful credential or post-secondary degree by the year 2025 to meet demands of NH’s economy. Our workforce development team is working with educators, trainers, businesses, nonprofits, and the public sector to encourage collaboration and help facilitate their collective efforts to attain the 65% goal. The School to Career Pathways portion of Workforce Accelerator 2025 aims to encourage more school/business partnerships throughout the state with local high schools and area colleges through internships, apprenticeship programs, and in-house training solutions.</td>
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2020 Workforce Bills
NH Commission on the Primary Care Workforce

HB 1639  Medicaid spend down
Prime sponsor: Sen. Snow
Committee: HHSEA

HB 1491  r/t Allied Health Professions Temporary License
Prime sponsor: Rep. Peter Schmidt
Committee: ED & A

HB 1188  r/t conditional licenses of allied health professionals
Prime sponsor: Rep. Peter Schmidt
Committee: ED&A

HB 1315  r/t renewals of licenses of allied health professionals
Prime sponsor: Rep. Peter Schmidt
Committee: ED&A

HB 1440  r/t membership on the board of psychologists and the board of licensing
For alcohol, and r/t insurance credentialing of out of state applicants for licensure as alcohol and drug counselors
Prime sponsor: Rep. David Meader
Committee: Commerce

HB 1520  establishing the NH Health Policy Commission
Prime sponsor: Rep. Jerry Knirk
Committee: HHS

HB 1576  establishing a targeted workforce development program
Prime sponsor: Rep. Deanna Jurius
Committee: Labor

SB 506  establishing a commission to study workplace safety in health care settings
Prime sponsor: Sen. J. Gray
Committee: HHS

SB 567  r/t the Commission on the Primary Care Workforce
Prime sponsor: Sen. M. Hennessey
Status: Committee vote, OTP 1/16/20
SB 568  r/t establishing an oversight commission for OPLC
Prime sponsor: Sen. Kahn
Committee: ED&A

SB 576  Revision of the authority of boards and commissions for technical and health professions regulated by OPLC
Prime sponsor: Sen. Guida
Committee: ED & A