Legislative Commission on the Interdisciplinary Primary Care Workforce

May 25, 2023 2:00-4:00pm – NH Hospital Association, 125 Airport Road, Concord, NH 03301 – Conference Room 1 Zoom and Call in information:

Join Zoom Meeting

Join Zoom Meeting

https://nh-dhhs.zoom.us/j/82057389715?pwd=MkNXUjQzUVZEaDhGU2JXUnpVL3Z2dz09

Meeting ID: 820 5738 9715

Passcode: 650289

<u>Agenda</u>

2:00 - 2:10	Attendance & Introductions Welcome the Honorable James Murphy to the Commission
2:10 – 2:30	"Facilitate a Discussion – Language Matters", Follow Up on Future Interdisciplinary Actions William Gunn, Jr., PhD
2:30 – 3:15	Area Health Education Center (AHEC) Update Kristina Fjeld-Sparks, Director, NH AHEC Kris van-Bergen-Buteau, Director, North Country AHEC Paula Smith, Director, Southern AHEC
3:15 – 3:45	"The 2020 Behavioral Health Provider Data Reports" Danielle Hernandez-Program Manager, Health Professions Data Center, Rural Health and Primary Care
3:45 - 4:00	Legislative & Updates— Group discussion
4:00	Adjourn

Next meeting: Thursday June 22, 2023 2:00-4:00pm NH Hospital Association, 125 Airport Rd. Concord, N

State of New Hampshire

COMMISSION ON THE INTERDISCIPLINARY PRIMARY CARE WORKFORCE

DATE: May 23, 2023 TIME: 2:00 – 4:00pm

LOCATION: NH Hospital Association, 125 Airport Rd, Concord, NH 03301 – Conference Room 1 & Zoom Conferencing

TO: Members of the Commission and Guests

FROM: Amara Hartshorn

MEETING DATE: May 23, 2023

Members of the Commission:

James Murphy, New Hampshire House of Representatives

Mary Bidgood-Wilson, Chair

Kristine Fjeld-Sparks, Director, NH Area Health Education Center, Vice-Chair

Shawn Jackson, Administrator, Rural Health & Primary Care

Jason Aziz, NH Insurance Department

Kristen Corazzini, Dean, UNH College of Health and Human Services

Cathleen Morrow, Geisel School of Medicine at Dartmouth

Mike Auerbach, Executive Director, NH Dental Society

Jeanne Ryer, NH Citizens Health Initiative

Laurie Harding, Upper Valley Community Nursing Project

Kim Mohan, Executive Director, NH Nurse Practitioner Association

Tom Manion, CEO, New London Hospital

Pamela DiNapoli, Executive Director, NH Nurses Association

Dianne Castrucci, NH Alcohol & Drug Abuse Counselors Association

Karen Prazar, APRN, Lamprey Health

Patricia Shute, APRN, Coos County Family Health Services

Guests:

Danielle Hernandez, Program Manager, Health Professions Data Center

Paula Smith, Southern NH Area Health Education Center

Christine Keenan, Portsmouth Regional Hospital

Peter Mason, Headrest

Guy DeFeo, University of NE

William Gunn, Psychologist

Marcy Doyle, Clinical and Quality Improvement Director UNH IHPP

Kris van Bergen-Buteau, Director of Workforce Dev. North Country Health Consortium

Katherine Shamel, Bi-State Primary Care

Sergio Zullich, White Mountain Family Medicine Residency

Amara Hartshorn, Program Assistant, Rural Health and Primary Care

Donald Kollisch, MD, Family Medicine, Dartmouth

Bill Palmer, NH House of Representatives

Anita Selec

Meeting Discussion:

2:00 – 2:10 Attendance & Introductions

Welcome the Honorable James Murphy to the Commission

2:10 – 2:30 Facilitate a Discussion – Language Matters, Follow Up on Future Interdisciplinary Actions – William Gunn, Jr., PhD

Refer to the attached presentation "Facilitate a Discussion – Language Matters, Follow Up on Future Interdisciplinary Actions"

- Discuss being open minded to all different providers
 - Non-specialists also provide care to special areas
- Discuss ways to change how we deliver access to Primary care
- Team models vs models: learn to effectively work as a team
 - Work in a decision making body

2:30 – 3:15 Area Health Education Center (AHEC) Update-

Kristina Fjeld-Sparks, MPH, Director, NH AHEC Kris van Bergen-Buteau, CPHQ, Director of Northern NH AHEC Paula Smith, MBA, EdD, Director of Southern NH AHEC

Refer to the attached presentation "Clinical Placements Project"

Informative video - Building the Healthcare Workforce

- Positive rotation experiences can draw a candidate back to work at where they trained
 - Here they designed a program where the student has a long term placement vs one month or a short rotation
 - Students grow and work closely to the preceptor
 - Found to have the current student onboard the new student saves a lot of time
 - Both students can learn from each other
 - Ask each other questions and share tips
 - This can create a passion for teaching, and create a future preceptor
- Potential disincentives for preceptors
 - Teaching can be a lot of work
 - Administrators think it's not being productive and wastes resources
- How to motivate the administrator to see it can be a way to increase revenue
 - Students can see patients- with no additional salaries
 - Ability to schedule more patients in same time slot with alternating slots for student and preceptor, the current student and new student can see patient together.

- Teaching helps to prevent burn out- and can help preceptor stay current
- 2018 laws allowing students to document medical notes
 - Medicare Claims Processing Manual
- Consider state funding for apprentices and preceptors
 - Money for preceptors from the AHEC budget
 - Georgia state started the first program of its kind
 - Preceptor Tax Incentive Program

3:15 – 3:45 The 2020 Behavioral Health Provider Data Reports-

Danielle Hernandez - Program Manager, Health Professions Data Center, Rural Health & Primary Care

These are currently being reviewed internally for publication and, once published, will be available on the Health Professions Data Center Website

- Data request for Danielle
 - Combined provider information
 - Looks to use new data analyst to combine the data and then use filters to locate info
- NH vs North Carolina
 - More LADC in NC vs MLADC
 - Less advanced education in NC
 - Criteria to point out
- Danielle asks for ways to better present her information
 - Capacity ideas
 - Improve reports
- AHEC spell out
 - Grant writing information from HPDC reports

3:45-4:00 Legislative & Updates

Question?

What's the question?

 How do we as a commission model the term Interdisciplinary in the discussions in our meetings? Language Matters

 How do we think collectively about the various roles needed in primary care?

Definition of Interdisciplinary Team

A team is a small number of people with complementary skills who are committed to a common purpose, performance goals, and approach for which they hold themselves mutually accountable

The Wisdom of Teams: Jon Katzenbach and Douglas Smith

Elements of a Workgroup – Multi-disciplinary

Members represent different sectors of stakeholders

Engage in sharing their point of view and listen to others

Do not have an explicit goal of working together towards a goal

This group is a good example

"If you want to understand how one organization can change the competitive rules of the game for an entire industry, read this book."

> -James L. Heskett, Baker Foundation Professor, Harrard Business School and Countber of The Value-Profe Chain

Using the Power of Relationships to Achieve High Performance

JODY HOFFER GITTELL

Copyrighted Material "A bisoprint for improving healthcare quality while reducing costs-just what the doctor ordered." -Thomas A. Kochan, Professor, MIT Sloan School of Management Using the Power of Relationships to Achieve Quality, Efficiency and Resilience

JODY HOFFER GITTELL

Award-winning author of The Southwest Airlines Way



Findings

Relationships shape the communication through which coordination occurs ...



For better...



Shared goals

Shared knowledge

Mutual respect

Frequent

Timely

Accurate

Problem-solving communication





... or worse



Specialized knowledge

Lack of respect

Infrequent

Delayed

Inaccurate

"Finger-pointing" communication



Applications to our Commission Discussions

 Pay close attention and "seek to understand" about roles in primary care that we don't fully understand what they do or what are their challenges

 Look for collective actions to advocate together for all roles that add value in the primary care setting, not just who I represent on the commission.

Clinical Placements Project

Legislative Commission for the Interdiscipinary Primary Care
Workforce Meeting
May 25, 2023

Kristina Fjeld-Sparks, MPH, Director, NH AHEC Paula Smith, MBA, EdD, Director, SNHAHEC Kris van Bergen-Buteau, CPHQ, Director of Northern NH AHEC







AGENDA

- Introduction
- Findings
- Workplan Deliverables
- Thank you!

Introduction

The Legislative Commission on the Interdisciplinary Primary Care Workforce identified a misalignment between workforce needs and placement of health professional students across New Hampshire.

NH AHEC, as suggested by the Commission, was asked to study the clinical placements "system" in New Hampshire

Guidance from Forward Fund Advisors

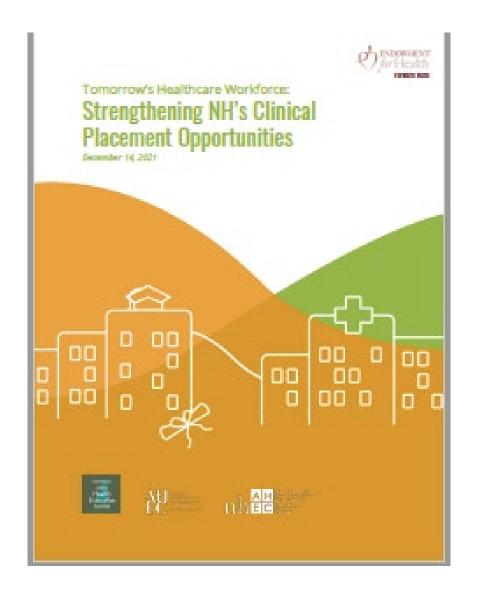
Introduction

Project Goal Statement: To conduct an environmental scan related to the community/clinical placement process that supports clinical training experiences in New Hampshire

Long term Goal: Long-term changes towards and efficient and equitable system of connecting educational institutions with clinical placements and preceptors

Year 1

- Review literature on clinical placements and relevant findings
- Developed semi-structured interview protocols (IRB)
- Conduct semi-structured interviews with select National AHEC network partners
- Identified key stakeholders involved in community placements processes for health professions training
- Conducted interviews of sites and academic institutions
- Synthesize data
 - Code themes & Compile results
 - Share findings
 - Highlight recommendations
- Solicit feedback



Highlights of workplan for second funding period

- Systems overview
- Additional AHEC interviews
- Collaborate with academic health professions training programs, health care organizations, and students to assess opportunities and barriers related to community/clinical placements in NH.
- Synthesize data/information with actionable next steps.



Review Clinical Placement systems identified during interviews:

- ➤ My Clinical Exchange
- > Castle Branch
- Centralized Clinical Placements (CCP)

Streamlined Process for your Clinical Placements

myClinicalExchange is an innovative platform specifically geared for centralizing clinical placement by leveraging webbased cloud technologies. This platform can be adopted by individual Hospitals, Educational Institutions, Consortiums, Workforce Development, and other organizations healthcare students' Clinical Placement. The open – platform concept allows Hospitals and Universities to work with any of their affiliated partners, their students and their Preceptors in an organized and streamlined fashion.



- Manage Openings by Unit or Floor
- Maintain Student On-Boarding Activities
- Upload Required Documents
- View Scheduled Rotations
- Access Rotation Documents, Orientation, etc.
- Submit Survey



- Submit Rotation Request
- Associate Students to Approved Rotations
- Maintain Student Compliance
- View Rotation Requests from partner schools
- View Conflicts
- Manage Conflicts
- Manage Capacity

Centralized Clinical Placement

MA Department of Education

Centralized Clinical Placement System

<u>Login</u>

Welcome

Operating Framework:

Operating Framework & Guidelines

Resources:

Online Orientation

Request Timeframes

Faculty Database

Contact Us

Welcome to the Centralized Clinical Placement System

Student and faculty users, please log in on this page.

The Centralized Clinical Placement (CCP) software, developed by the Massachusetts Department of Higher Education, is a stand-alone Internet-based software system designed to facilitate the display, scheduling, and management of clinical nursing education placements between health care organizations and nursing education programs. This system is regionally-based and reflects the input of the participating regional nursing education and practice communities.

©2007-2023 Massachusetts Department of Higher Education Contact the CCP Nurse Coordinator

Contact the Webmaster

Centralized Clinical Placement

MA Department of Education

2022-2023 R	enewal, New Opp	ortunity & Precept	orhsip Requests Guide	elines By Region		
		Doobon.				
		Boston	Minter 0 Contra 2022	C 2022		
		Fall 2022	Winter & Spring 2023	Summer 2023		
Nursing Programs	Send requests by:	May 6, 2022	October 14, 2022	March 3, 2023		
Health Care Orgs	Respond by:	June 10, 2022	November 18, 2022	April 3, 2023		
		Nouth and Con				
Northeast-Central						
		Fall 2022	Winter & Spring 2023	Summer 2023		
Nursing Programs	Send requests by:	May 6, 2022	October 14, 2022	March 3, 2023		
Health Care Orgs	Respond by:	June 3, 2022	November 18, 2022	April 7, 2023		
Southeast						
		Fall 2022	Winter & Spring 2023	Summer 2023		
Nursing Programs	Send requests by:	April 8, 2022	October 14, 2022	March 3, 2023		
Health Care Orgs	Respond by:	May 6, 2022	November 18, 2022	April 7, 2023		
West						
		Fall 2022	Winter & Spring 2023	Summer 2023		
Nursing Programs	Send requests by:	May 6, 2022	October 14, 2022	March 3, 2023		
Health Care Orgs	Respond by:	June 3, 2022	November 18, 2022	April 7, 2023		
New Hampshire						
		Fall 2022	Winter & Spring 2023	Summer 2023		
Nursing Programs	Send requests by:	April 1, 2022	October 14, 2022	March 3, 2023		
Health Care Orgs	Respond by:	May 6, 2022	November 18, 2022	April 7, 2023		



OUR COMPREHENSIVE CLINICAL COMPLIANCE PLATFORM

THE FIRST OF ITS KIND. THE LAST OF YOUR WORRIES.



CB Bridges™ thoughtfully integrates the solutions you need throughout the clinical rotation process, giving you peace of mind through a truly unique single source, yet multi-level, approach to the clinical experience.

Whether you take advantage of the entire platform or simply pick and choose modules as you go, CB Bridges™ is inherently designed to keep the entire clinical rotation process organized, on track, and on time—giving hospitals, schools, and students more time to focus on what really matters.

https://discover.castlebranch.com/solutions/clinical-experience/

AHEC Interviews

Why AHECs?

- HRSA Bureau Healthcare Workforce
- 25 years in NH/50 years as a program
- Ongoing needs assessments
- Program implementation
- Grant funding to meet the needs of communities.

Primary Findings National AHEC Interviews

AHECs assist in placing students rural and underserved

RELATIONSHIPS are critical

Competition for sites

Funding or resources from external sources (example: State funding)

Incentives for preceptors vary

Housing for students is important

"systems" vary significantly – some states solo some collaborative processes COVID impacted placement sites: need to focus on re-training and re-introducing



Tax Incentives

GA AHEC established a tax incentive, ranges from \$1,000 – up to \$10,000 a year in income tax credit for precepting.

160 hours per credit.

CPP Listening Session

PRIORITIZING COMMUNITY PLACEMENTS RECOMMENDATIONS

Thursday October 20, 2022 10:00 -11:30 am Via Zoom

We are inviting stakeholders who participated in interviews conducted by the New Hampshire Area Health Education Center (NH AHEC) team for the Community Placements Project and members of the Sector Partnership Initiative to a listening session.

Listening Session Priorities

1

Value of Precepting

- Preceptor training / promote professional development
- Foster interprofessional education
- Preceptor recognition / promote precepting

2

Partnerships

- Consider innovative collaborative partnerships with academia and community-based sites
- Promote collaboration and planning
- Conduct outreach and awareness

3

Students

- Prepare students to go to the community / student readiness
 Consider equity
- •Foster NH workforce
- Expand pipeline programs
- •Develop career pathways

4

Funding

- Explore funding opportunities to pay for programs
- •Explore financing to pay for preceptors for the work they do
- •Share business models for precepting

5

Logistics

- Address scheduling
- •Streamline processes

Other

- Pursue policy change
- •Expand data collection Other topics

6

Business Model of Precepting

Building the Healthcare Workforce: Preceptor Models that Work

https://vimeo.com/manage/videos/784848135









CPP Student Survey

GOAL 1: IDENTIFY TRENDS AMONG HEALTHCARE STUDENTS AND ASSESS STUDENTS' EXPERIENCES.

- FINDINGS
 - Demographics
 - Financial Debt
 - Practice Preferences
 - Placement Experience

GOAL 2: IDENTIFY DIFFERENCES IN THE PRACTICUM EXPERIENCES AMONG DIFFERENT CATEGORIES OF STUDENTS

NH AHEC Network Preceptor Recognition Awards

Vision and Creation

- Identified need in the first year of the CPP project to recognize and celebrate outstanding NH healthcare mentors and preceptors across the state
- Reflect the widespread appreciation of the value mentoring and precepting brings for the future of our NH health care workforce
- Propose an annual recognition program launched during National AHEC week in March and culminating with award announcements in September
- Provide Award recognition to recipients and create promotional electronic book highlighting NH Preceptor superstars

NH AHEC Network Preceptor Recognition Awards

Structure

- Online application easily accessed across the NH AHEC Network
- Nomination criteria highlighting best practices in precepting
- Recognition of interprofessional collaborations in NH health care
- Multiple recipients representing broad health categories aligned with the NH AHEC Network's "Finding Your Own Career in Health Care" careers catalog
- Interprofessional selection committee representing different professions and geographic locations throughout the state
- Shared media and social networking of recipients across the state in various health care professional organizations

NH AHEC Network Preceptor Recognition Awards

Sustainability

- Alignment with existing programs within the NH AHEC Network
- Targeted low-cost platforms for nomination, recognition and distribution
- Create sponsorship pathways for annual awards and promotional expenses

Thank you

