

New Mexico's Public Health Institute



#### **IMPROVING ACCESS TO HEALTH CARE IN RURAL NEW MEXICO**

LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE

October 13, 2020

# Collaborative Approaches to Workforce Improvements

- Ten years of working together formally to address health professional shortages through community development and systems for homegrown solutions
- Solving shortage problems through collaborative local program expansion development
- Key Concepts
  - Decentralization of Training
  - Rural and Underserved Community Enhancements
  - Local Job Creation for Community Residents
  - Cross Sector Collaboration
- Program Overview Introduce Panel



## NEW MEXICO PRIMARY CARE TRAINING CONSORTIUM

#### MISSION

The New Mexico Primary Care Training Consortium improves the quality of essential health services by supporting existing and developing new training opportunities to increase primary care workforce in New Mexico.

#### VISION

For New Mexico to be an innovative leader in training family medicine physicians and other primary care providers working in the most underserved populations in high quality, integrated primary care health systems.

# **Collaboration – Residency Development**



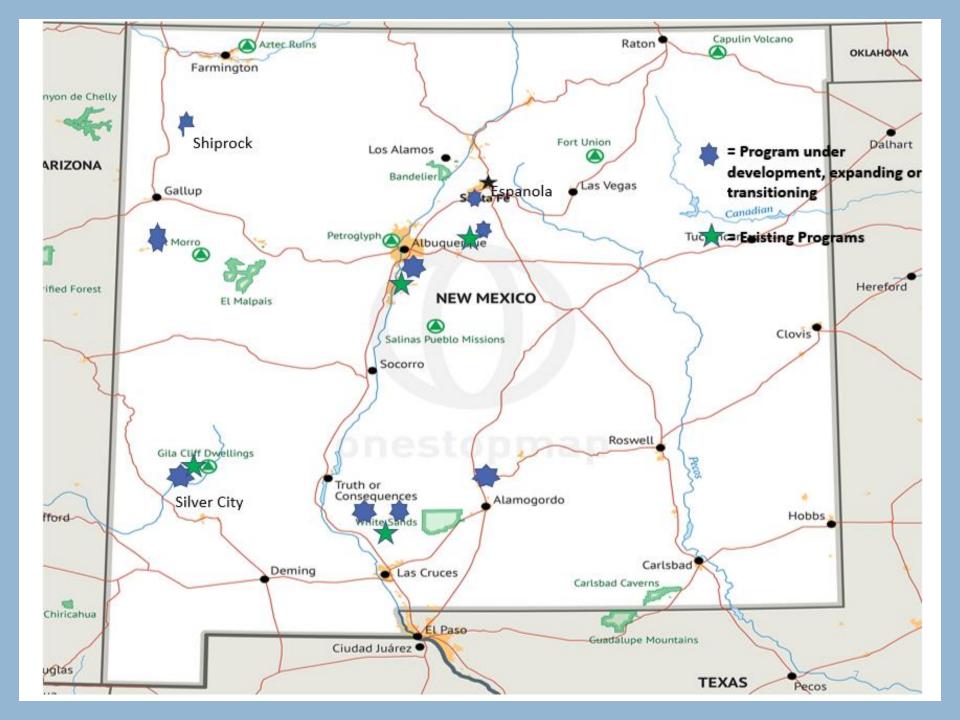
# PCTC Graduate Medical Education (GME) Development Activities

#### Quality Support

- Faculty Development contract with UNM
- Collaborative Program Development
  - Building on Program Strengths Expanding Solid Programs
- Student Recruitment
  - National and State-based Medical Student Recruitment Support
- Policy Development
  - State Medicaid Policy Support
  - Medicare GME Payment Improvements
- Program Development

# DE 879-1696 706-879-1696 NEW MEXICO PRIMARY CARE TRAINING CONSORTIUM

PROGRAM DEVELOPMENT AROUND NEW MEXICO









Established:

1996

#### Currently:

Has 4 residents /year, trying to add 2 more July 2021 UNM is the current SI

#### **Future Directions**

Going independent by 2021

Supporting Site Development in Espanola, Southern Santa Fe, IHS by 2022-2023

## Las Cruces: Memorial Medical Center Family Medicine



#### **Established:**

1996



#### **Currently:**

Has 18 residents

Supports Hidalgo Medical Services Rural Training track Program serving as first year site for HMS residents

Provides Rural Training Track Program for GCRMS in Alamogordo as Sponsoring Institution and first year of the Residency



Expanding Training with La Clinica de Familia with 4 additional resident per year starting 2021

## <u>Doña Ana County</u>: Psychiatry Residency Program Development



**Under Development:** 

Program application to be submitted January 2021



**Currently:** 

Awarded \$373k from HSD GME expansion grant for development

Applying for 3 residents/year

Will partner with behavioral health facilities around Doña Ana County, UNM and others



#### **Future Directions:**

Hope to start recruiting residents 2021

First-years will start 2022

# <u>Silver City</u>: Hidalgo Medical Services (HMS)



#### **Established:**

2012



Currently:

Rural Training Track Program in collaboration with Memorial Medical Center

Two Residents per Year



#### **Future Directions:**

Potential Additional Family Medicine

Potential to add Rural Psychiatry Program

# <u>Gallup</u>: Rehoboth McKinley Christian HCS



#### **Established:**

Program is independently accredited and will start training residents Summer 2021



#### Currently:

Recruiting for 2021

Multiple Collaborative Training Relationships with Indian Health Service facilities Ų

#### **Future Directions:**

Developing Psychiatric Rural Training Track Program

# <u>UNM/Shiprock</u>: Rural Training Track Program



#### **Under Development:**

Potential Program Application submitted late 2020 or early 2021

UNM to serve as Sponsoring Institution for Rural Training Track Program at IHS Hospital in Shiprock

2 residents per year beginning 2022 if possible



Currently:

Significant policy issues impact ability to finance the program



#### **Future Directions:**

Obtain IHS financial Support

Determine Medicaid Option

Secure Medicare Support

### University of New Mexico

- Under Development Pending Approval of Proposed Medicaid Regulation
  - Expanded Psychiatry
  - Expanded Pediatrics
  - Expanded Internal Medicine

### Other Opportunities

#### North Eastern New Mexico

- Family Medicine
- Psychiatry

#### South Eastern New Mexico

Primary Care

# Medicaid Policy and Program Support

- Development of State Graduate Medical Education (GME) Expansion Strategic Plan and Governing Board
- Provide Technical Support for HSD funding of development activities
  - State Funding Applications
  - TA to Fund Recipients
- Medicaid State Plan Amendments
  - Support all Hospitals providing accredited training programs receive Indirect Medical Education
  - Improve payments to providers for Direct GME payments and establishing incentives for Primary Care and Psychiatry residency development (4-1 federal match)
    - \$100,000 per primary care and psychiatric resident
    - \$50,000 for all "other' residents
  - We are recommending a \$160,000 per resident payment for FQHCs and RHCs as well as policy changes allowing GME payment to IHS facilities
    - Currently only NM licensed hospitals are eligible for GME payments
- Current State Funding \$200,000



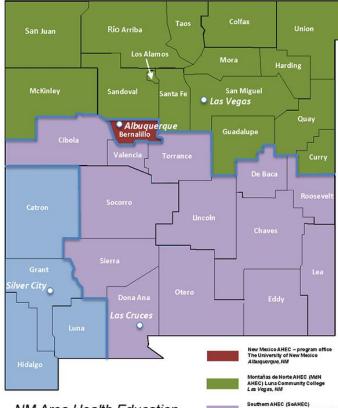
## **Center for Health Innovation**

New Mexico's Public Health Institute

## HEALTHCARE WORKFORCE PROGRAMS



# **Area Health Education Centers**



NM Area Health Education Centers Network



Forward NMAHEC (FNMAHEC) Southwest Center for Health Innovations Silver City, NM





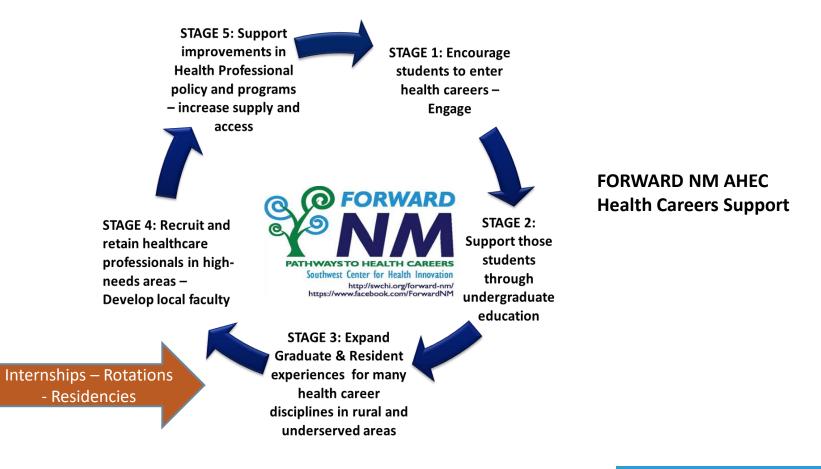
Partners



Montañas del Norte Area Health Education Center



#### **WORKFORCE PIPELINE- PREPARING OUR OWN WORKFORCE**



Pandemic Impacted Summer Programs in 2020



State Funding Impact/Summary – AHEC 2020

- AHECs are state and federally funded
  - Federally funded program since the early 1970s
  - Federal funds flow to regional AHECs through UNM
  - State funds flow through CHI to regional AHECs and UNM (for evaluation)
- All AHECs have regional advisory Boards
- Initial State funds \$277,500
- Current state funds \$192,500
- State funds expanded the impact of the New Mexico Area Education Centers (AHEC), by increasing the number of health professionals practicing in rural and medically underserved areas.

#### **Focus Areas:**

- Enhance, strengthen and support existing communitybased training in rural and underserved areas for health professions students
- Expose youth in grades 6-12 to health careers by supporting recruitment, training, interactive, and/or didactic activities

## UNM Evaluation of AHEC State Funds: Outcomes of Note

 Supported clinical rotations for 15 health professions students and 15 family medicine residents.

- Over half of these were from a rural background
- 67% came from disadvantaged backgrounds
- 57% were from underrepresented minority groups (defined by HRSA)

• Supported health career awareness activities in middle school, high school and college health career fairs

• Supported pipeline academies which targeted middle and high school students in multiple rural and/or medically underserved areas

- At least 73% of participants were from rural areas
- At least 75% of participants were from disadvantaged backgrounds

• Updated, digitized, and distributed Health Career manuals throughout AHEC service areas

• Conducted Health Career presentations throughout AHEC service areas and created digital presentations for viewing

• State funds allowed the NM AHEC centers to expand their support to more students and residents, to create new partnerships in new communities, and to increase their collaboration amongst each other to the benefit of the entire state.

## Newer Workforce Initiatives at CHI

# Expanding "grow your own" initiatives and support ...



- Increases cultural, race, ethnic and linguistic diversity.
- Promotes accessible and affordable training options.
- Improves workforce retention in rural areas
- Proactively addresses future healthcare needs of NM communities.
- Boosts healthcare as an economic driver for rural communities.
- Creates NEW career pathways (e.g. credentialing and certifications)
- Helps manage local supply and demand.

#### **Future Healthcare Workforce Demand**

Occurrentiere	2028 Projected	2018-2028 Total
Occupation	Employment	Percent Change
Medical and Health Services Managers	<mark>2,063</mark>	<mark>15.57%</mark>
Social and Community Service Managers	778	8.96%
Rehabilitation Counselors	326	6.19%
Sub Abuse, Behavioral Disorder, and MH Counselors	<mark>2,219</mark>	<mark>16.18%</mark>
Healthcare Social Workers	<mark>1,505</mark>	<mark>16.49%</mark>
Health Education Specialists	784	7.99%
Social and Human Service Assistants	3,707	9.03%
Community Health Workers	<mark>329</mark>	<mark>19.64%</mark>
Registered Nurses	<mark>20,412</mark>	<mark>11.33%</mark>
<mark>Home Health Aides</mark>	<mark>7,342</mark>	<mark>25.93%</mark>
<mark>Psychiatric Aides</mark>	<mark>157</mark>	<mark>28.69%</mark>
Nursing Assistants	7 <b>,</b> 164	9.56%
Medical Assistants	<mark>7,562</mark>	<mark>17.71%</mark>
First-Line Supervisors of Personal Service Workers	<mark>2,540</mark>	<mark>10.92%</mark>
Personal Care Aides	<mark>38,889</mark>	<mark>37.83%</mark>
Residential Advisors	490	10.11%
Personal Care and Service Workers, All Other	286	13.49%
Child, Family, and School Social Workers	1,942	5.49%
Mental Health and Substance Abuse Social Workers	590	8.46%
Social Workers, All Other	418	1.95%
Source: NM Dept of Workforce Solutions. October 2, 2020		23



# Supply

#### <u>As of May 2020</u>

- 412 Certified Peer Support Workers
- 331 Certified Community Health Workers
- 41 Certified Prevention Interns, Specialists and Senior PS
- 29 Wraparound Facilitators

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Skills	<ul> <li>Serves as an advocate for clients</li> <li>Provides active outreach</li> <li>Links and/or refers clients to other services, programs, and agencies as needed.</li> <li>Facilitate Peer Groups</li> <li>Promotes model behavior to clients</li> <li>Engages clients in services</li> </ul>	<ul> <li>Monitors and evaluates client progress toward goals</li> <li>Monitorins contact to insure stability.</li> <li>Provides active outreach as necessary</li> <li>Links and/or refers clients to other services, programs, and agencies as needed.</li> <li>Assists clients obtain and retain government benefits</li> <li>Completes required documentation in electronic records system</li> </ul>	discharge and transition plan Assists the client with developing symptom monitoring and management Connects clients with peer supports including self help and advocacy groups. Assesses client strengths and needs of clients Completes required documentation in electronic record systems	and family therapy Assists in the formulation of Individual Treatment Plans Maintains electronic clinical records Consults and collaborates with other service providers to integrate services Maintains direct service productivity	coordinates programs Responds to concerns and complaints from clients and referral sources Oversees the scheduling of adult treatment programs Monitors clinical Documentation for compliance Assures policies are followed	<ul> <li>Develops new programs for clients</li> <li>Develops, monitors, implements program evaluations</li> <li>Oversees the department budgets</li> <li>Selects and interviews all middle level clinical management staff</li> </ul>
Education	High School diploma or equivalent	High School diploma or equivalent plus experience	Bachelor Degree in a Behavior Health or related degree plus three	Masters Degree in a Behavior Health	Masters Degree in a Behavior Health Plus three years experience	Masters Degree in a Behavior Health Plus Five Years experience
Certification/ Licensing	CERTIFICATO Peer Support Certification	CERTIFICATE QMHP	CERTIFICAT OR LICENSE LPC, LSW, QMHP	LICENSED LPC, LSW, LPCC, LISW	LICENSED LPC, LSW, LPCC, LPCC-S, LISW, LISW-S	LICENSED LPC, LSW, LPCC, LPCC-S, LISW, LISW-S
Workkey Scores	Reading for Info3 Applied Math4 Locating Info4 QMH		Reading for Info4 Applied Math4 Locating Info4 SIONAL LISW = LICENSED INDEPENDEN = COMMUNITY HEALTH WORKER -S =	Reading for Info5 Applied Math4 Locating Info5 IT SOCIAL WORKER LPCC = LICENSED PI SUPERVISOR ENDORSEMENT LPC = LICE	Reading for Info5 Applied Math5 Locating Info5 ROFESSIONAL CLINICAL COUNSELOR NSED PROFESSIONAL COUNSELOR	Reading for Info5 Applied Math5 Locating Info5

## **Career Pathways in Nursing Services** Registered

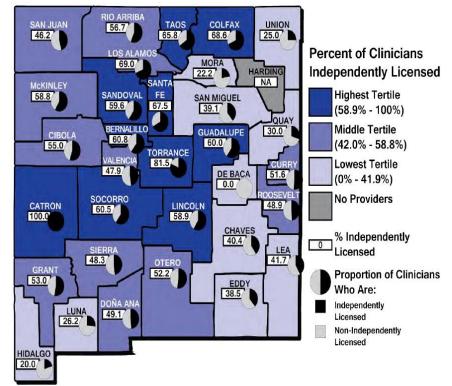
ED

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Advanced

Practical Nurse

	Nurses Aide \$8-\$13.50/hr.	Medical Assistant s9_\$15.50 /hr. • Completes initial intake • Schedule rehab therapy	Licensed Practical Nurse stassing States stassing States stassing States stablishes individualized patient	Registered Nurse Associates 319-533/hr. • Provides medical interventions • Administers medications including shots • Identifies medical symptoms and communicates to treatment team	Registereu Nurse Bachelors 25- <sup>\$</sup> 35/hr. • Analyzes health data • Develops goals for the identified health problem • Supervises staff • Reviews and revises plan of care • Preforms nursing medical interventions	<ul> <li>Develops individualized interventions</li> <li>Diagnosis medical conditions</li> <li>Delemines timelines within the care plan</li> <li>Delegates care responsibilities to staff</li> <li>Shift to shift communication</li> <li>Communicates and documents interventions and patient response</li> <li>Collaborates with physicians in rounds and examination of patients</li> </ul>
Skills	<ul> <li>Provide direct care</li> <li>Assist in daily living skills</li> <li>Assist with dressing, bathing, and oral care,</li> <li>Transport individual in wheel chairs</li> <li>Documents services in treatment plan</li> <li>Provide comfort and emotional support</li> </ul>	and transport patients Documents vital signs and weight Assists with treatments and procedures Care planning and implements plan	<ul> <li>goals</li> <li>Administers medications and performs treatments</li> <li>Assists in the developing interventions</li> <li>Implements the plan of care</li> </ul>	<ul> <li>Documents services provided</li> <li>Collects vital health data</li> <li>Develops Discharge plan</li> <li>Provides patient and family education</li> <li>Collects, validates, synthesizes and records</li> <li>Evaluates patient outcomes to treatment</li> </ul>	<ul> <li>Verifies that medical orders are accurately transcribed</li> <li>Administers medications and performs treatments</li> <li>Assists with new hired nursing staff</li> </ul>	<ul> <li>Uses Point Click Care(PCC) according to the Business Processes</li> <li>Actively participates in Meetings to facilitate appropriate discharge planning</li> <li>Communicates team's recommendation for discharge</li> </ul>
Education	High School diploma or GED and three to six weeks post high school training	High School diploma GED and six months to one year post high school training	Graduate of an approved school for practical or vocational nursing, one to two years training	Graduate of an approved school of nursing, one to two years training	Graduate of an approved school of nursing/ BSN/ one to two years training	Graduate of an approved school of nursing/ MSN/ one to two years training
Certification/ Licensing	CERTIFICA State Tested Nurse Aide	CERTIFICA Medical Assistant	UCENSED by the State Board of Nursing	UICENSED by the State Board of Nursing	UCENSED by the State Board of Nursing	LICENSED by the State Board of Nursing
WorkKey Scores	Reading for Info	Reading for Info4 Applied Math4 Locating Info4	Reading for Info4 Applied Math4 Locating Info4	Reading for Info5 Applied Math4 Locating Info5	Reading for Info5 Applied Math5 Locating Info5	Reading for Info5 Applied Math5 Locating Info5



#### Percent of Clinicians with Independent Licensure, 2018

## Expand Clinical Tele-supervision

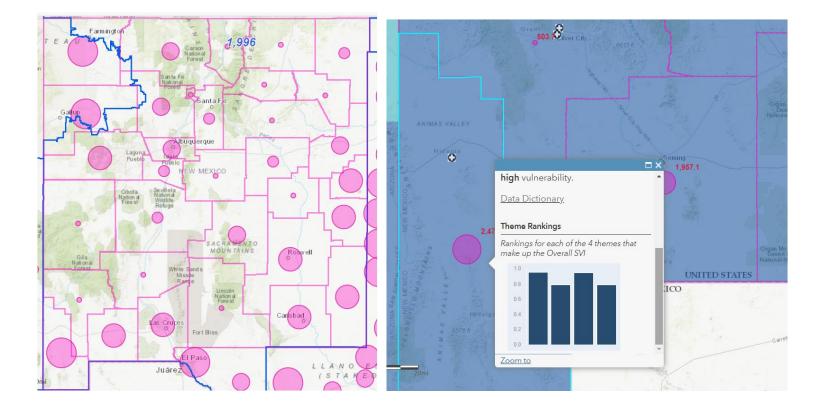
- HB539 (2019) amended the Social Work Practice Act to allow 100% of required supervision to be available via telehealth. It is the only behavioral health profession that allows this.
- Access to Clinical Supervision (ACTS NM) provides free tele-supervision since 2014 across 10 NM Counties. 10 now have an LCSW, 10 have PLCSW. Nearly 2,500 travel miles saved.
- Behavioral health professions typically require between 100 and 200 hours of supervision for licensure (e.g. 8-16 hrs. per month over 1 year).
- Over 1/3 of New Mexico rural counties have especially high proportions of nonindependently licensed clinicians, which reflects the relative scarcity of independently licensed BH clinicians

# Collaboration & Leveraging Resources

- \$200,000 1-year Human Resources Services Administration (HRSA) RCORP Planning grant
- \$1,000,000 3-year HRSA RCORP Implementation grant.
- Working with HSD Behavioral Health Service Division - \$2.4 million CDC Planning Grant (leading to 3-year demonstration grant)
- Leveraging NM Workforce Solutions Healthcare Apprenticeship Grant (\$815,000)
- Applying for U.S. Dept of Labor Rural Healthcare Grant Program, up to \$2.5 million for 4 years.



# NMCDC: Community Engagement for Data-Driven Planning





- Support public access to data for planning and evaluation. \$150,000 recurring funding for community data support activities related to public health (DOH)
- Continued support of DOH recurring funding for Area Health Education Centers in the amount of \$192,500 per year.
- Continued support of Primary Care Training Consortium Funding and support of efforts to obtain federal matching funds.
- Expand tele-clinical supervision for all behavioral health licensures.

THANKYOU!

CONTACTS:

- Charlie Alfero <u>calfero@chi-phi.org</u> 575-538-1618
- Dr. John Andazola john.andazola@lpnt.net 575-520-9911
- Nicole Mandall <u>nmandall@chi-phi.org</u> 706-879-1696
- Susan Wilger <u>swilger@chi-phi.org</u> 575-597-0039