



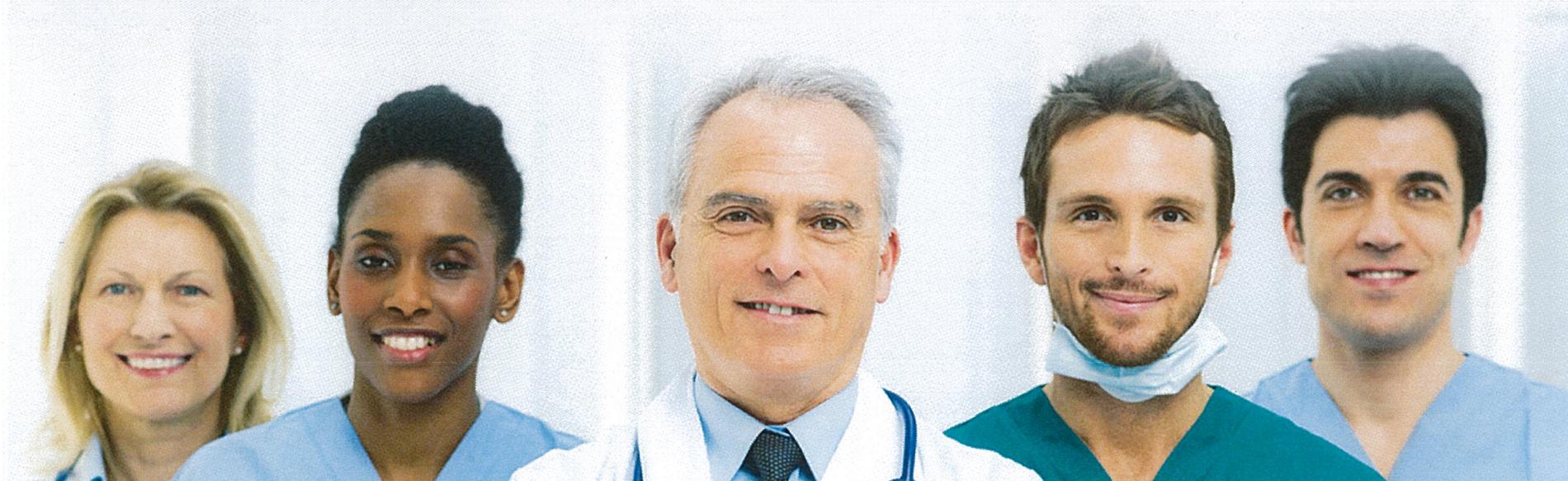
UNM HEALTH SCIENCES CENTER

STATE
WORKFORCE
COMMITTEE REPORT

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Executive Vice Chancellor
Vice Chancellor for Research

October 2, 2013

Legislative Health & Human
Services Committee



HOUSE BILL 19

- Requires UNM HSC Chancellor to appoint statewide committee with broad representation
- Requires UNM HSC to produce a report on health professional practices annually
- Committee is required to:
 - Devise an electronic survey for boards to provide to applicants for licensure and license renewal
 - Analyze and make recommendations regarding incentives to attract qualified individuals to pursue health care education and practice
 - Develop short-term and five-year plans to improve health care access



PROGRESS

- Instituted surveys with Nursing and Medical boards
- Analyzed practice characteristics on the basis of 6 required items
- Report to State on October 1st



CAVEATS

- Best estimates based on national averages
- Challenges remain
 - Federal workers, IHS
 - Out-of-state practicing in NM
 - Only 1 or 2 of 3 years of data





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NURSING



NURSING PIPELINE

LPN

State Supported
Accredited Programs

Central NM CC
Clovis CC
Luna CC
NM Junior College
Northern NM CC
NMSU - Carlsbad

ADN

State Supported
Accredited Programs

Central NM CC
Clovis CC
Luna CC
NM Junior College
Northern NM CC
NMSU – Carlsbad
San Juan College
Santa Fe CC
NMSU – Alamogordo
Eastern NM Univ. Roswell
UNM – Taos
Western NM Univ.

RN-BSN

State Supported
Accredited Programs

UNM
NMSU
Western NM Univ.
NM Highlands Univ.
Northern NM CC

BSN, MSN, DNP,

CNP and PhD
State Supported
Accredited
Programs

UNM
NMSU



NURSING DEFICIT

- 2,306 additional RNs are needed
 - 1,840 need to be BSN prepared
- The state graduates on average 1,030 BSN and ADN combined. 28% of our total average graduates are BSN prepared. In order to reach the IOM 80% BSN prepared workforce by 2020
- Need to graduate an additional 263 BSNs per year in NM over the next 7 years
- Nearly one-half of NM RNs practice in Bernalillo County. Five counties (Doña Ana, Santa Fe, San Juan, Chaves, and McKinley) comprise the next 25% of the overall RN workforce



NURSING DEFICIT

- Approximately 284 additional APRNs are needed
- APRNs/CNPs play key role in primary care and education
- Nurses and nurse faculty are rapidly approaching retirement age. Average age of employed RNs in 43 years. In NM, 42% of all licensed nurses are age 50 or older



NURSING KEY FINDINGS

- Presently, there is a substantial shortage of LPNs, RNs, and APRNs in New Mexico. Shortages create barriers to health care access. They also cause the current workforce to be more prone to stress, fatigue, errors, and burnout
- A substantial difference between practice data and survey data exists. A large part of this difference is due to nurses working in fields other than nursing or working in states outside of New Mexico
- Key predictors of where graduate nurses practice will be analyzed in coming years
- To understand the overlap of licensed versus practicing RNs and APRNs employed by federal government entities in New Mexico



RECOMMENDATIONS

- Expand nursing training programs (BSN and APRN)
- Education nursing programs should be encouraged to become accredited by the National League for Nursing Accrediting Commission or Commission of Collegiate Nursing Education
- Collaboration with nursing schools and nursing partners should be maintained and expanded
- Incentives for hospitals and clinics should be developed to increase the number of clinical preceptors

THE COMMITTEE WILL WORK TO UNDERSTAND AND MAKE RECOMMENDATIONS ON

- Challenges of collecting more accurate data on APRNs
- Challenges to nursing recruitment and retention including challenges to enhancing underrepresented minority participation in the nursing workforce





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PRIMARY CARE PHYSICIANS



PRIMARY CARE DEFICIT

- 1,429 practicing Primary Care Physician (PCPs) in NM
- PCP Deficit today = 219
- PCP need increasing from PCP retirement, Population Growth, Aging Population, Affordable Care Act
- PCP Deficit tomorrow: Est. between 400-600



PRIMARY CARE NEED VARIES BY COUNTY

- 30 of 33 Counties are full or partial Health Professions Shortage Areas or HPSAs (ex. PCP/population <1:3,500)
- Only 6 Counties have a PCP/population ratio higher than the national average (Bernalillo, Los Alamos, Santa Fe, Taos, Grant and Quay)



PRIMARY CARE SUPPLY

- 51% of primary care physicians indicate that their practices are full or nearly full
- Only 75% of the primary care physicians licensed in NM practice in the state
- 21% practice part-time (≤ 30 hours per week)
- 12% indicates that they intend to make a practice change that reduces the availability of primary care in the state



PRIMARY CARE SUPPLY

NM Primary Care Physician Workforce by Ethnicity, 2012

Race	Count	Percent
Hispanic or Latino	285	19.9%
Not Hispanic or Latino	1,036	72.5%
Not Applicable/Not Answered	108	7.6%
Total	1,429	100%

NM Primary Care Physician Workforce by Race, 2012

Race	Count	Percent
American Indian or Alaska Native	22	1.5%
Asian	138	9.7%
Black or African American	42	2.9%
Native Hawaiian or Pacific Islander	3	0.2%
White or Caucasian	896	62.7%
Other	291	20.4%
Two or More	28	2.0%
Not Answered	9	0.6%
Total	1,429	100%



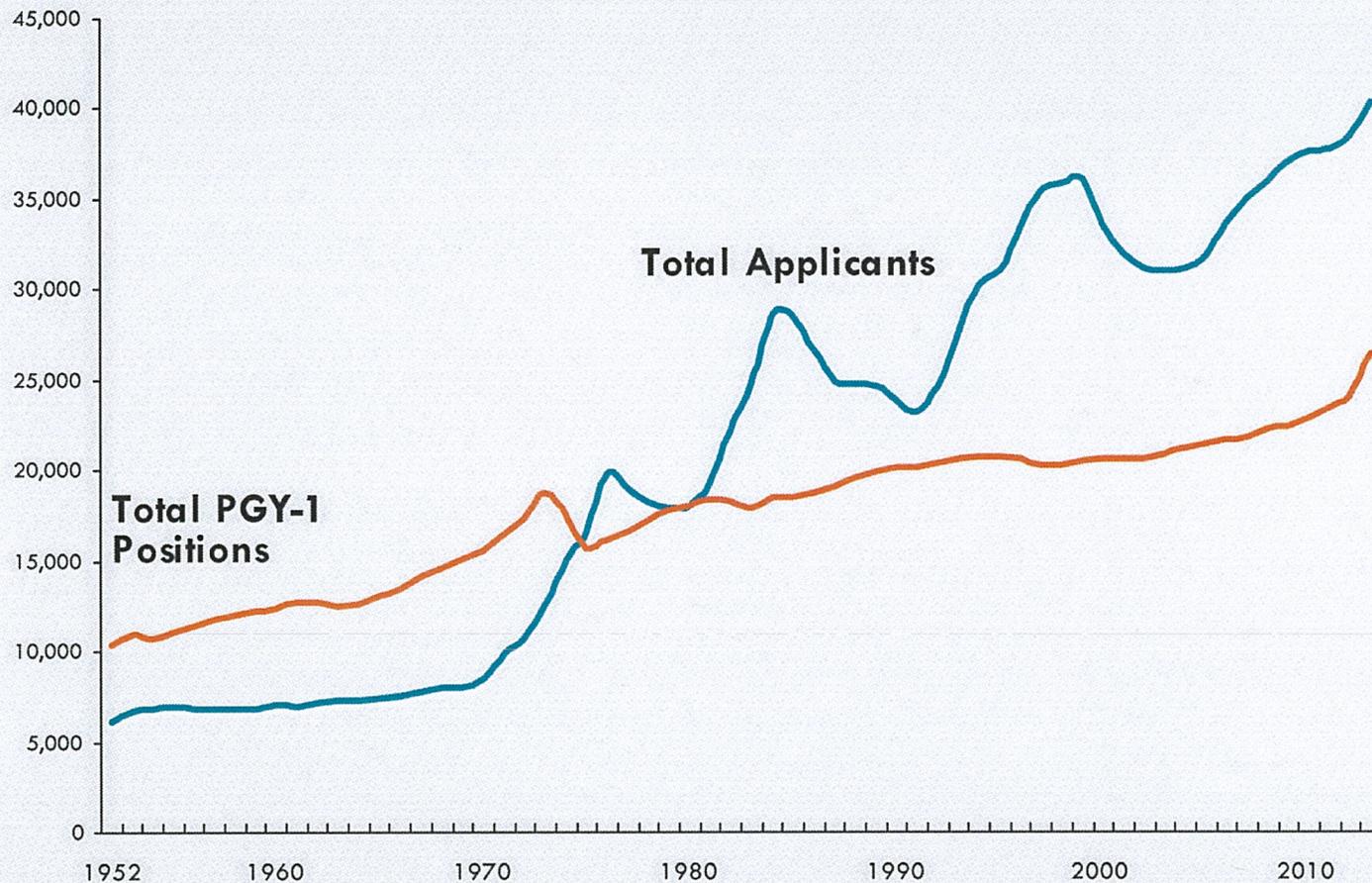
ENHANCING SUPPLY

- GME Positions
- Recruitment
- Retention activities



FIRST YEAR POSITIONS IN THE MATCH

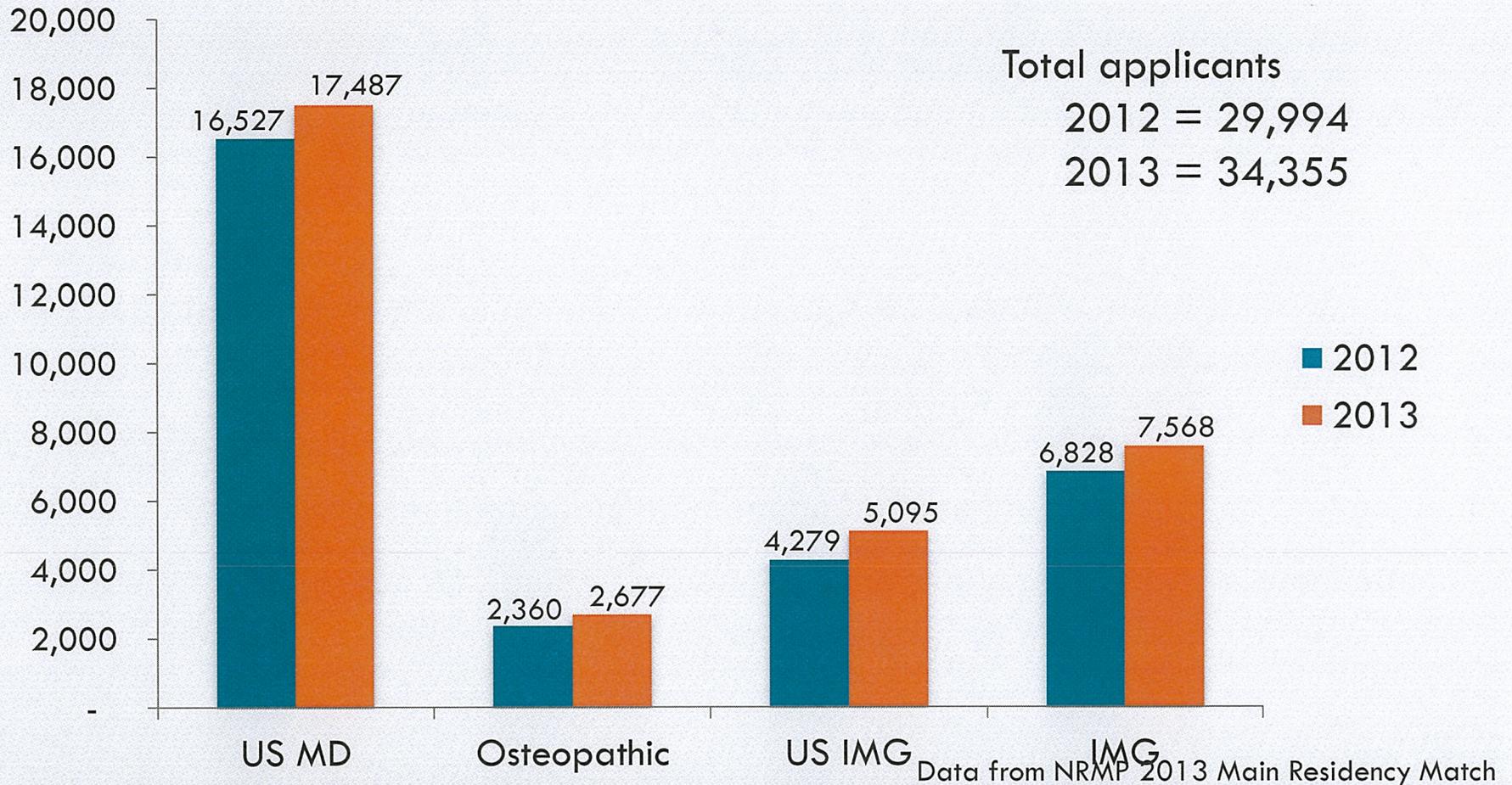
Applicants and 1st Year Positions in The Match, 1952-2013



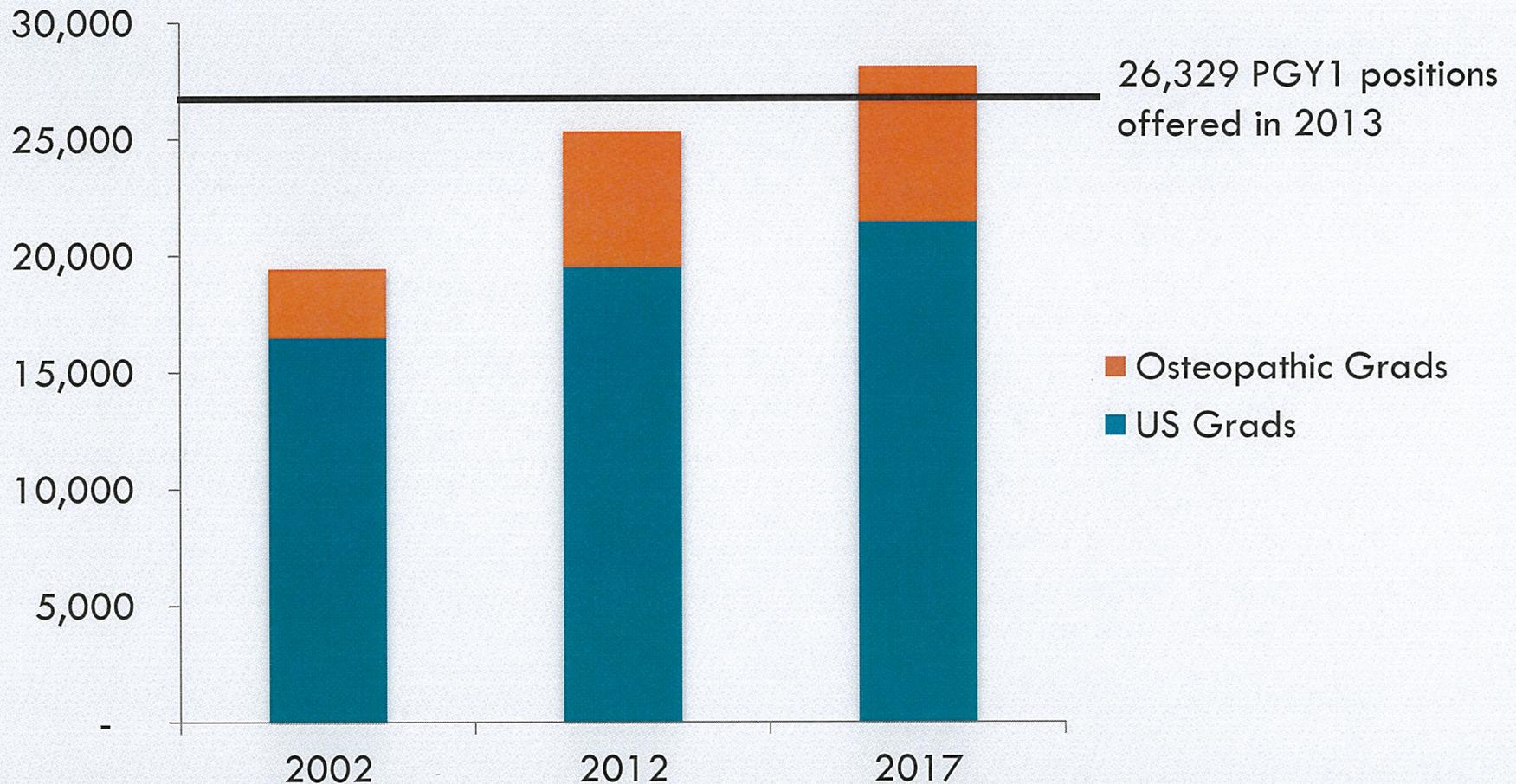
Data from NRMP 2013 Main Residency Match



MORE APPLICANTS IN THE MATCH



INCREASING NUMBER OF STUDENTS



AAMC 2012 Medical School Enrollment Survey



RECOMMENDATIONS

- A multifaceted approach to addressing the significant physician shortage should be undertaken
- Loan repayment and other financial assistance programs should be considered in encouraging work in underserved areas and in primary care
- Increasing state funded PCP resident slots should be considered
- Funding of “physician extender” programs such as ProjectECHO will assist in addressing shortage

FUTURE WORK OF THE COMMITTEE WILL FOCUS ON

- Studying how to enhance recruitment and retention of PCPs to rural areas in NM





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PSYCHIATRY



PSYCHIATRY DEFICIT

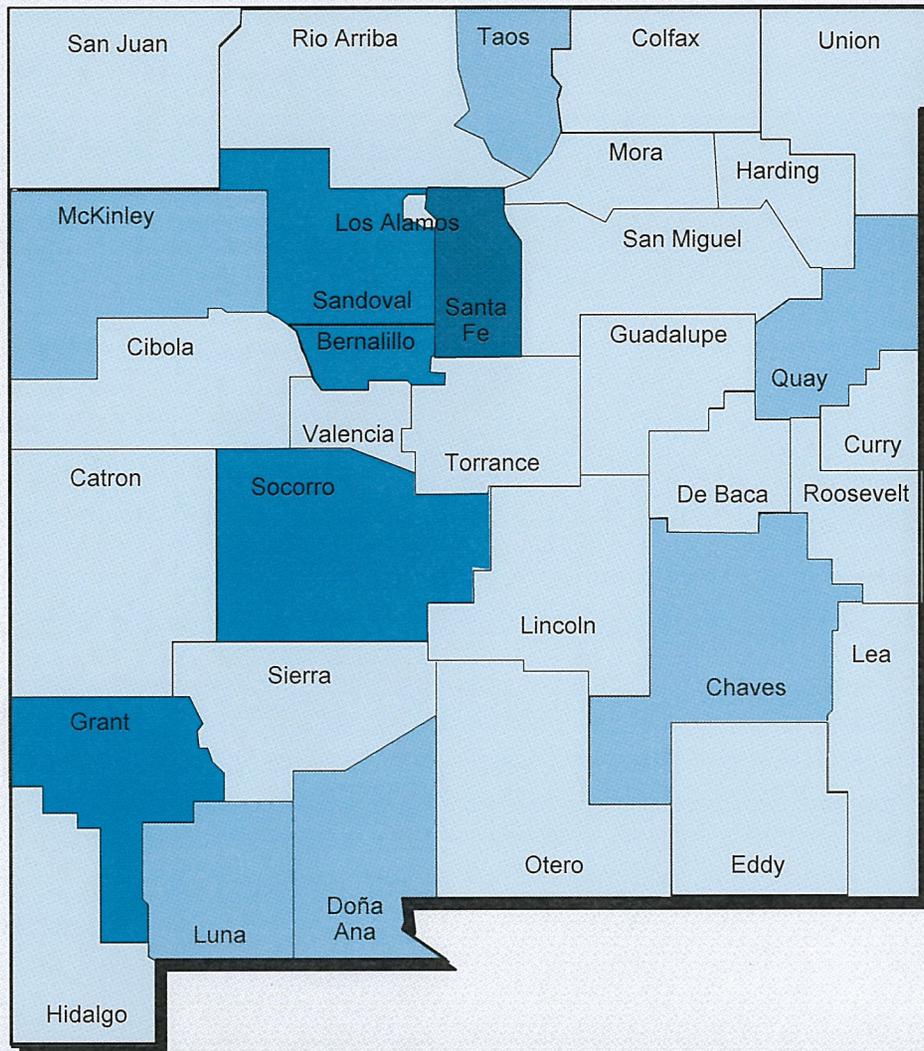
“PRONOUNCED SHORTAGE OF CLINICALLY TRAINED BEHAVIORAL HEALTH PROFESSIONS” NM Legislative Finance Committee, 2013

- No national benchmark for the optimal number of psychiatrists per capita
- In rural New Mexico, ratio is 1 : 21,276
- In urban New Mexico, ratio is 1: 2,970

Psychiatrists are 7.16 times more accessible in urban NM compared to rural NM



PSYCHIATRY NEED VARIES BY COUNTY



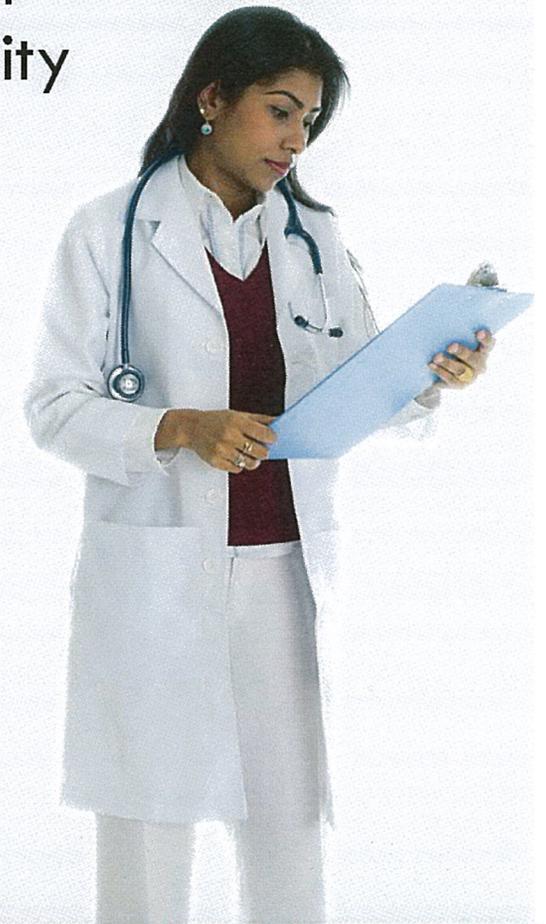
- 258 total psychiatrists in New Mexico
- 12 counties have no access to psychiatry

Psychiatrists per 1,000 population



PSYCHIATRY SUPPLY

- 66% of psychiatrists indicated that their practice was **full or nearly full** limiting their availability to accept new patients
- 29% of psychiatrists indicated that they work 30 or fewer hours per week
- 14% of current psychiatrists indicated plans to **move, retire, or decrease** their practice size within the next 12 months



PSYCHIATRY SUPPLY

Racial/ ethnic make-up of current psychiatric workforce

Ethnicity	NM population	NM psychiatrists
Hispanic/ Latino	47%	14%
Not Hispanic/Latino	53%	80%

Race	NM population	NM psychiatrists
American Indian	10.2%	1.6%
Asian	1.6%	5.8%
Black or African American	2.4%	1.9%
White/ Caucasian	83%	73%



PSYCHIATRY SUPPLY

NM Psychiatric Workforce by Ethnicity, 2012

Race	NM Psychiatrists	NM Population
Hispanic or Latino	14%	47%
Not Hispanic or Latino	53%	80%

NM Psychiatric Workforce by Race, 2012

Race	NM Psychiatrists	NM Population
American Indian	1.6%	10.2%
Asian	5.8%	1.6%
Black or African American	1.9%	2.4%
White/Caucasian	73%	83%



RECOMMENDATIONS

- The number of resident positions should be increased, possibly through state funding
- Use of technology (i.e. ProjectECHO) should be explored

FUTURE WORK OF THE COMMITTEE WILL INCLUDE

- Future assessments will include not only psychiatrists but also other mental health care providers
- Examine and assess mechanisms to enhance recruitment and retention in rural communities as well as mechanisms to increase the number of Native American and Hispanic psychiatrists





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DENTISTRY



DENTISTRY DEFICIT

- Kaiser Family Foundation reports New Mexico has 1,071 professionally active dentists
- No standard for optimal number of dentist per capita, but an estimated number of dentists needed in New Mexico (at 2,000 patients per dentist) = 1,042
- Issues are of rural/urban distribution and economics
- Complex workforce challenges with regard to recruitment, retention and economics of all oral health workforce providers in rural areas



RECOMMENDATIONS

- Increase the number of WICHE slots to support all New Mexico students who wish to become dentists
 - **Western Interstate Commission for Higher Education (WICHE)**- provides grants to out of state dental schools who have contractually agreed to educate NM students. “Clawback”- 92% of those students return to “repay” these grant obligations. Currently 12 WICHE slots for students
- Establish a **BA/DDS** program to recruit and support New Mexico’s pre-dental and dental students, particularly those from rural and minority communities



RECOMMENDATIONS

- Initiate or expand existing loan repayment or scholarship programs for dentists in exchange for practice in highly underserved areas
- Establish CDHC training programs in conjunction with at least one accredited dental assisting and one dental hygiene program
 - **Community Dental Health Coordinator (CDHC)**- A culturally-competent facilitator of care for those with access barriers, providing some limited care, education, patient navigation, transportation and other community services. Legislature approved model in 2011

