



# National Advisory Council on the National Health Service Corps (NHSC)

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Vision: Healthy Communities, Healthy People



### The U.S. Health Workforce



#### **Demand for health care occupations is growing:**

Health care jobs to increase by 14% from 2018 to 2028



#### **Shortages of health professionals currently exist**

- Over 20,500 current HPSA designations
- Majority in rural communities



#### The United States is projected to be short more than:

- 23,600 primary care physicians by 2025
- 15,600 dentists by 2025



#### The challenges:

- Aging population and health care workforce
- Not enough primary care clinicians to meet demand
- Mal-distribution of providers across states, including nursing





# **Bureau of Health Workforce (BHW)**

MISSION: Improve the health of underserved and vulnerable populations by strengthening the health workforce and connecting skilled professionals to communities in need.







# HRSA Workforce Programs Aim to Address:

## Access

 Increase access to health care for underserved and vulnerable populations

# Supply

 Promote equilibrium in the supply and address shortages of health professionals

# Distribution

 Improve workforce distribution so all parts of the U.S. have an adequate number of providers to meet the demand for care

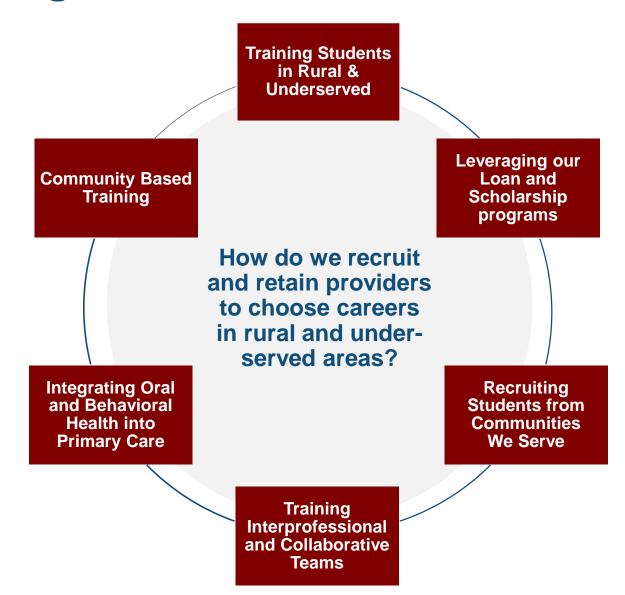
# Quality

 Develop a quality health workforce that is trained in and employs evidence-based techniques that reflect better patient care





# BHW Strategies for Success







# Stakeholder Engagement

Our work with partners enables us to make informed decisions on policy and program planning. Together, we are creating a strong workforce of diverse health professionals who provide quality care to communities in need.

We work with partners through:

**Health Professions Advisory Committees** - Provide national expertise and recommendations on existing programs and new program development.



ACTPCMD - January 2019

**National Health Workforce Centers** - Advance health workforce knowledge and assist decision-makers in understanding health workforce needs.

**State Primary Care Offices** - Conduct needs assessments, provide technical assistance to those seeking shortage designations, and submit shortage designation applications to HRSA.



# National Health Service Corps (NHSC)

Builds healthy communities by supporting qualified clinicians working in areas of the U.S. with limited access to care.

- √ 13,000 NHSC clinicians care for 13.7 million Americans
- ✓ About 60% NHSC clinicians serve in HRSA-funded health centers
- √ 1 in 3 NHSC clinicians provide care in rural communities











# Nurse Corps

# Addresses the critical shortage of nurses in high-need areas

- ✓ Over 1,900 Nurse Corps clinicians provide care to undeserved populations in the U.S.
- ✓ About 29% Nurse Corps providers serve at HRSA-funded community health centers











# HRSA's Approach to Addressing the Opioid Crisis



**Expanding access through health centers and other primary care settings** 



**Enhancing substance abuse prevention and treatment in rural communities** 



Expanding and training the workforce to better prevent and treat opioid addiction



Increasing the use of telehealth and medicine services to increase access to care



Connecting stakeholders to opioid-related resources and sharing best practices





# Workforce Supply & Distribution Challenges

#### Mental Health Shortage Designation

- In collaboration with state Primary Care Offices, BHW analyzes the supply and distribution of the behavioral health workforce, and designates Health Professional Shortage Areas (HPSAs).
- Currently, there are over 6,000 designated mental health HPSAs.

#### National Center for Health Workforce Analysis Data – Behavioral Health

- The Center <u>analyzes</u> and anticipates provider supply and demand.
- The 2016 National Behavioral Health Practitioner Projections Report estimated significant shortages of psychologists, social workers, school counselors and marriage and family therapists.





# Behavioral Health Workforce Development Programs

- ✓ Growing the behavioral health workforce
- ✓ Increasing its capacity
- ✓ Improving the distribution of providers
- ✓ Promoting integration of service delivery

#### Impact:

- Projected to eliminate over 40% of the projected shortfall of behavioral health providers by 2025
- Over 10,000 students graduated and entered the behavioral health workforce between 2014 and 2018
- ➤ 3,293 new paraprofessionals are working as community health workers, peer educators, and substance use/addiction workers







#### **BHW Medicine**

- Support educational programs for primary care physicians and physician assistants while in school and after graduation.
- Promote long-term training in rural and underserved communities.

#### **Pre-Professional Training**

#### **Primary Care Training** and Enhancement **Program**

- Supports training for future primary care clinicians and teachers
- Promotes primary care practice in rural and underserved areas

#### **Medical Student Education Program\***

- Supports medical students at public institutions
- Targets states with a projected primary care provider shortage in the top quintile in 2025

#### **Residency and Post-Graduate Training**

#### **Teaching Health Centers Graduate Medical Education** Program

 Moves residency training out of hospitals and into communitybased centers

#### Children's Hospitals **Graduate Medical Education Program**

 Supports residency training for physicians to provide high quality health care to children

#### **Rural Residency Planning and Development Program\***

- Develops new physician residency programs in rural areas
- Collaboration with the Federal Office of Rural **Health Policy**





# **BHW Nursing**

Interprofessional training and practice

Academic and clinical partnerships

Long-term clinical practice in community settings

Residency training



#### Our Work in Action...

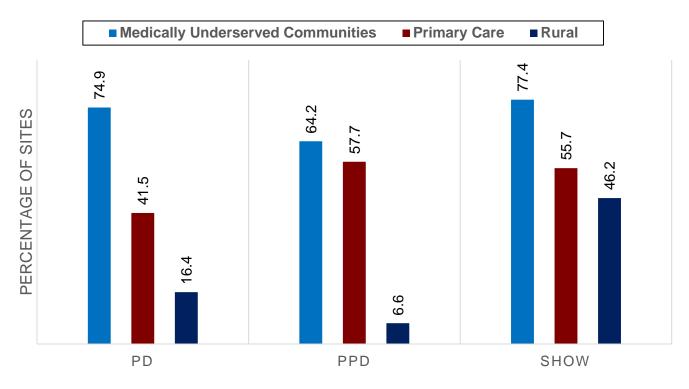
- BHW nurse training programs require new and innovative academic-clinical partnerships to ensure trainees are receiving long-term clinical practice opportunities
- In FY 2019, BHW awarded \$17.7 million to 36
   Nurse Practitioner residency programs to prepare new NPs to serve in rural and underserved communities
- Advanced Nursing Education Workforce—funded students received training in primary care settings (87%), MUCs (72%), and/or rural areas (52%)
- Over 50% of Advanced Nursing Education clinical training sites provided interprofessional education.





#### **BHW Oral Health**

#### **Oral Health Programs Clinical Training Settings**



#### BHW's oral health programs:

- Support the development of innovative training models and workforce improvement programs for oral health professions.
- Opportunities during school and post-graduate to train in rural and underserved areas.

**PD** – Pre-doctoral Training in General, Pediatric, and Public Health Dentistry and Dental Hygiene Program **PDD** – Postdoctoral Training in General, Pediatric, and Public Health Dentistry Program **SOHWP** – Grants to States to Support Oral Health Workforce Activities Program



# **Funding Opportunities**

- ► Primary Care Training and Enhancement: Residency Training in Primary Care (PCTE-RTPC) Program closes 1/24/20
  - \$10 million in funding to enhance accredited residency training programs in family medicine, general internal medicine, general pediatrics or combined internal medicine and pediatrics (med-peds) in rural and/or underserved areas.
    - Up to 20 grant awards
- ► Nurse Faculty Loan Program (NFLP) closes 2/3/20
  - \$28.5 million in funding to support accredited schools of nursing who recruit and train faculty, thereby increasing the number of qualified nursing faculty and the nurse workforce.
    - 90 eligible institutions



For updates and details visit grants.gov.



# Funding Opportunities Continued. . .

- ► Postdoctoral Training in General, Pediatric, and Public Health Dentistry closes 2/12/20
  - \$13 million in funding to improve access to, and the delivery of, oral health care services for all individuals, particularly vulnerable populations and individuals located in rural and/or underserved areas.
    - Funding up to 28 recipients
    - Up to \$450,000/year application that includes accredited residency programs in one of the following disciplines: general dentistry, pediatric dentistry, or dental public health.
    - Up to \$650,000 per year (inclusive of direct and indirect costs) for a collaborative, multi-discipline application in at least two of the following disciplines: general dentistry, pediatric dentistry, or dental public health.





For updates and details visit grants.gov.



# Funding Opportunities Continued. . .

- Nurse Education, Practice, Quality and Retention (NEPQR) Interprofessional Collaborative Practice Program (IPCP): Behavioral Health Integration (BHI) closes 2/19/20
  - \$8.5 million in funding to increase the access to and quality of behavioral health services through team-based care models in interprofessional nurse-led primary care teams in rural or underserved areas.
    - Approximately 17 cooperative agreements
    - Award amount: Up to \$500,000 per year
- ► Addiction Medicine Fellowship (AMF) closes 2/25/20
  - \$20 million in funding to expand the number of fellows at accredited AMF and Addiction Psychiatry Fellowship (APF) programs trained as addiction medicine specialists who work in underserved, community-based settings that integrate primary care with mental health disorder and substance use disorder (SUD) prevention and treatment services.
    - Estimated 25 eligible grantees



For updates and details visit grants.gov.

# Fiscal Year 2020 Enacted Budget

Program	FY 2020 Request
National Health Service Corps	\$430 million
Teaching Health Center Graduate Medical Education	\$126.5 million
Behavioral Health Workforce Development	\$138.9 million
Nurse Corps	\$88.6 million
National Center for Health Workforce Analysis	\$5.7 million





# BHW Career Pathways

Area Health
Education Program
Distribution, Supply

- 60% of clinical training sites in primary care settings
- 66% in medically underserved communities and 45% in rural areas

Scholarships for Disadvantaged Students Program

Access, Recruiting students from communities we serve

 70% of clinical training sites in medically underserved communities and 31% in primary care settings

HCOP Health Careers
Opportunity Program

Distribution, Community-based trainings

 Majority of graduates intended to seek employment or further education in medically underserved communities (68%) and/or primary care settings (52%)

# Creating a pipeline of diverse new clinicians





# National Center for Health Workforce Analysis

NCHWA's research informs program planning, development, and policy-making by examining a broad range of issues that impact the U.S. health workforce.

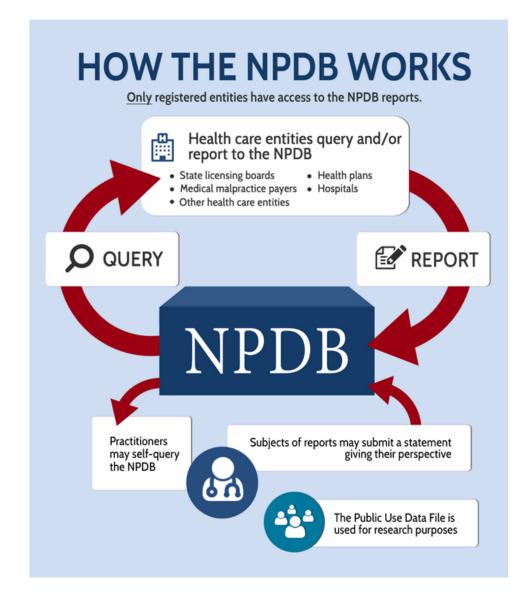
- > Research:
  - Sufficiency;
  - Geographic distribution;
  - > and Education of the U.S. health workforce
- Public use data:
  - Area Health Resources Files
  - ➤ National Sample Survey of Registered Nurses
- ➤ Nine Health Workforce Research Centers
- ➤ Health workforce data designee for the U.S. government to the WHO







#### National Practitioner Data Bank



- Web-based repository of information on medical malpractice payments and certain adverse actions related to health care practitioners, providers, and suppliers
- By sharing this information with health care entities, the NPDB:
  - > Improves health care quality
  - > Protects the public
  - Reduces health care fraud and abuse

https://www.npdb.hrsa.gov/





# BHW Data Management and Initiatives

**Past: Fragmented** 

**Present: Inflection Point** 

**Future: Optimized** 

- Minimal data sharing across BHW components
- Paper files
- Data for documentation and reporting purposes
- Limited ability to visualize trends
- No links between grants and service data

- Enhanced collaboration across BHW
- Data marts lay foundation for advanced analytics
- BHW Dashboards
  - Performance Data
  - Clinician Tracker
- New paradigms for information capture
- Data externalized

- Enhanced collaboration across HRSA and other entities
- Data drives decision-making
- Enhanced analytics:
  - Geocoded data
  - Predictive modeling
- Consistency in reporting
- BHW data shows outputs and outcomes internally and externally





# Health Professions Training Programs Dashboard

Access to BHW education and training program data for academic year 2012–2013 to present.



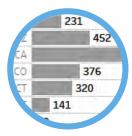


data.HRSA.gov



#### Health Workforce Distribution Dashboard

An innovative tool to measure and map the retention of BHW-funded clinicians and trainees.



1

#### Retention Rates

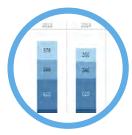
 Calculates retention rates for over 16,500 NHSC and Nurse Corps alumni that completed service between 2012 and 2018



2

#### **Alumni Insight**

 Provides insight into where alumni are practicing following their service obligation



3

# **Grant Programs**

 In August 2019, added the capability to bring in clinicians that have been funded by BHW workforce programs, specifically over 7,100 participants in the CHGME and THCGME programs



4

# High Need Areas

Will know if the more than 25,000 clinicians that received BHW program support are still practicing, and if so, whether they work in Health Professional Shortage Areas, Medically Underserved Communities, or rural communities



# Linking Providers to Communities

#### Health Workforce Connector



Where Health Care Professionals
Connect with Sites

Currently over **24,000** NHSC- and Nurse Corps-approved sites with **6,000+** job vacancies

#### Virtual Job Fairs

Live, fully interactive, and free online events that occur online throughout the year



Connect job-seeking primary care providers who are interested in serving high-need communities with NHSC and Nurse Corps healthcare facilities



<u>connector.hrsa.gov/connector/</u> <u>bhw.hrsa.gov/provider-recruitment/virtual-job-fairs</u>



#### Future of the BHW Health Workforce

BHW will continue to strengthen the health workforce and support clinicians working in rural and underserved areas by making strategic investments in our programs.

#### Education

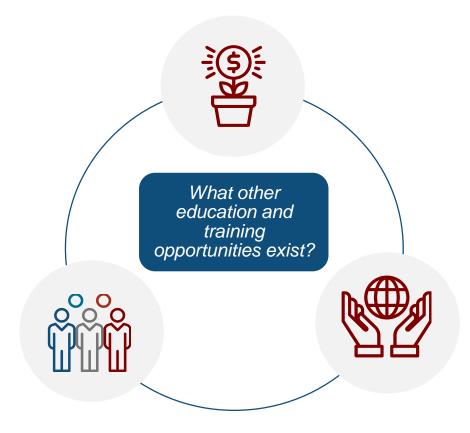
Building a diverse and well trained workforce committed to improve the health of the underserved

#### Training

Incorporating education and training as an essential component of quality improvement and workforce retention

#### Service

Connecting a quality health workforce to our underserved communities





# Questions







#### Contact Us

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