

Legislative Commission on the Interdisciplinary Primary Care Workforce

September 22, 2022 2:00-4:00pm – NH Hospital Association, 125 Airport Road, Concord 03301 – Conference Room 1

Zoom and Call in information:

Join Zoom Meeting

<https://nh-dhhs.zoom.us/j/83018404809?pwd=dXpMV1dtRjBjRkt0bXkySk5jbnJ6dz09>

Meeting ID: 830 1840 4809

Passcode: 182154

Find your local number: <https://nh-dhhs.zoom.us/u/kuLsuUUjq>

Dial *6 to mute or unmute if you connect by phone

Agenda

- 2:00 - 2:10 **Attendance & Introductions**
- 2:10 - 2:20 **Baseline Assessment on Epilepsy Care Survey** - Marcy Doyle & Dr. Elaine Kiriakopoulos
- 2:20 – 2:40 **Member Round Robin Updates** - All
- 2:40 - 2:55 **Annual State Loan Repayment Program Report** – Alisa Druzba
- 2:55 – 3:15 **Commission Positions & Members** – Mary Bidgood-Wilson
- 3:15 – 3:50 **Overview of the LNA Workforce** – Roxie Severance & Lynn Carpenter
- 3:50 - 4:00 **Legislative Updates**– Group discussion
- 4:00 **Adjourn**

Next meeting: Thursday October 27, 2022 2:00-4:00pm - NH Hospital Association, 125 Airport Road, Concord 03301 – Conference Room 1

State of New Hampshire
COMMISSION ON THE INTERDISCIPLINARY PRIMARY CARE WORKFORCE

DATE: September 22, 2022 TIME: 2:00 – 4:00pm

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

Meeting Notes

TO: Members of the Commission and Guests

FROM: Amara Hartshorn

MEETING DATE: September 22, 2022

Members of the Commission:

Mark Warden, NH House of Representatives

Mary Bidgood-Wilson – Chair

Alisa Druzba, Administrator, Rural Health and Primary Care Section – Vice-Chair

Stephanie Pagliuca, Director, Bi-State Primary Care Association

Mike Auerbach, Executive Director, New Hampshire Dental Society

Kim Mohan, Executive Director, NH Nurse Practitioner Association

Kristina Fjeld-Sparks, Director, NH Area Health Education Center

Jeanne Ryer, NH Citizens Health Initiative

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

Jason Aziz, NH Insurance Department

Pamela DiNapoli, Executive Director, NH Nurses Association

Dianne Castrucci, NH Alcohol & Drug Abuse Counselors Association

Laurie Harding, Upper Valley Community Nursing Project

Trini Tellez, Healthcare Consultant

Guests:

Danielle Hernandez, Program Manager, Health Professions Data Center

Don Kollisch, White River Junction

Kris van Bergen-Buteau, NNH AHEC

Paula Minnehan, NH Hospital Association

Christine Keenan, Portsmouth Regional Hospital

Geoff Vercauteren, Director of Workforce Development, Catholic Medical Center

Katherine Shamel, Bi-State Primary Care

Eve Klotz, Clinical Director, Northern Human Services (Retired)

Rebecca Marden, Elliot Hospital

Peter Mason, Headrest

Marcy Doyle, UNH IHPP

Carla Smith, Assistant Professor, Mass. College of Pharmacy and Health Sciences

Siobhan Benham, APRN, Hearthside Family Health

William Gunn, Psychologist

Meeting Discussion:

2:00 – 2:10 **Attendance & Introductions**

2:10 – 2:20 **Baseline Assessment on Epilepsy Care Survey** – Drs. Marcy Doyle & Elaine Kiriakopoulos

Refer to the attached presentation, “A Path to Equitable Care in Epilepsy” and the attachment, “Dartmouth Health; Hobscoatch Institute.”

- Asking for help with survey implementation
 - This commission will assist with survey distribution where each member can send the information on to their own professional networks
 - May be sent to PCP practice sites, colleges, high schools, hospital associations, colleagues, community providers, peer navigators, community health educators, etc.
- Links
 - [Regional Survey - Community Care Providers \(Hitchcock.org\)](#)
 - [Regional Survey - Clinical Care Providers \(Hitchcock.org\)](#)

2:20 – 2:40 **Member Round Robin Updates** – All

- Paula Minnehan; NH Hospital Association
 - [Legislative Service Requests, \(LSRs\)](#) of interest
 - Representative Mark Edwards to be replaced on Commission; not re-elected
 - [HB 602-FN](#) – reimbursement for telemedicine
 - Restricts reimbursement and covered services
- Stephanie Pagliuca; Bi-State Primary Care Association
 - New two-year contract with DHHS
 - Includes additional funding for marketing campaigns
 - Marketing contractor will:
 - Share information with other agencies around the state
 - Convene an advisory committee with clinicians who will be in focus group
 - NH Dental Residency
 - [Advanced Education in General Dentistry \(AEGD\) Program Rural Track](#)
 - Collaboration with Harvard School of Dental Medicine
 - Has drawn in three residents in two years
- Geoff Vercauteren; [Network-4-Health](#)
 - Recruiting for a direct care worker council
 - Inform policy and advocacy
 - Advise on training and mentoring
 - Serve to elevate the value and respect of the position

- Healthcare Career Pathways
 - Catholic Medical Center (CMC), Elliot Hospital, Community College System of NH, and [ApprenticeshipNH](#) collaboration
 - Apprenticeship program for nursing, tech, and support roles at Elliott and CMC
 - “Earn while you learn”
 - If language is a barrier, English as a Second Language (ESL) course is offered on-site
 - New position at Manchester Community College for two-year period, to coach these apprentices at the hospitals

- Alisa Druzba; Rural Health & Primary Care
 - [American Rescue Plan Act \(ARPA\)](#)
 - Provided additional funding to the State Loan Repayment Program ([SLRP](#))
 - Allows for a flexible policy
 - Recruitment Center contractor
 - Creating a communications advisory committee
 - Will be evaluating the SLRP based on qualitative measures

- Diane Castrucci; NH Alcohol & Drug Abuse Counselors Association
 - [American Rescue Plan Act \(ARPA\)](#) funding used for licensing supervisor
 - Assist those seeking their MLADC license
 - Position’s main directive is to help with new licensing
 - Support Filling out applications
 - Working on funding for a well-being network in NH

- Kristina Fields-Sparks; NH Area Health Education Center
 - Received a new five year grant
 - 25 years of grant-funded services

- Kim Mohen; NH Nurse Practitioner Association
 - APRN stakeholder group
 - Collaboration with the Health Professions Data Center (HPDC) to revise the NH APRN license applications
 - In an effort to collect the right data for use in a workforce planning and assessment

- Danielle Hernandez; [Health Professions Data Center \(HPDC\)](#)
 - Collaborative efforts for improved data collection
 - Nursing stakeholder group working closely with the [Office of Professional Licensure and Certification \(OPLC\)](#) to update the initial and renewal APRN applications

- The HPDC is working with OPLC to improve survey implementation and enforcement
 - Aiming to conduct survey compliance follow up in 3 waves:
 - An email blast by the HPDC, an email blast by OPLC, and finally, complaints issued by OPLC's Enforcement Office
 - Applicants can complete the survey or opt-out form to meet the requirement
- Jeanne Ryder; NH Citizens Health Initiative
 - [UNH Project ECHO Hub](#)
 - A program of [NH Citizens Health Initiative](#)
 - Current Project ECHO Communities:
 - NH Mental Health Care Access in Pediatrics
 - Supporting Children of the Opioid Epidemic ECHO
 - Preceptor ECHO to Enhance Rotations
 - Project ECHO: Aging, Community, and Equity
 - Substance Use Disorder ECHO
- Trini Tellez; Healthcare Consultant
 - Building the Equity Toolbox: "A Culturally Effective Organizations Training Series 2022"

Refer to the attachment, "Building the Equity Toolbox"

2:40 – 2:55 **Annual State Loan Repayment Program Report-** Alisa Druzba

Refer to the attachment, "2022 SLRP Annual Report"

- Continual yearly growth
- 2022 was another big year for behavioral health with 61 providers serving a large need in their communities
- Participants get a three year contract with the possibility of a two year extension
 - With five years in the same area, we hope to retain these providers
- No wait list for two years

2:55 – 3:15 **Commission Positions and Members** – Mary Bidgood-Wilson – Chair

[Commission Member List](#)

- Vice-Chair- this can be any member
 - Alisa Druzba is stepping down
- A commissioner of the department of labor, or designee

- Three representatives from the state’s rural and underserved health care facilities, including two practitioners and one administrator appointed by the Governor
- A representative of the New Hampshire Society of Physician Assistants Association, appointed by the Board of Pharmacy
- Intend to hold in-person Commission meetings once a quarter
- Not in July or snowy months

3:15 – 3:50 **Overview of the LNA Workforce** – Roxie Severance & Lynn Carpenter

Refer to the attached presentation, “New Hampshire Healthcare Workforce Partnerships”

- LNA pipeline-training high school students
 - Barriers with school administrations concerned about student time
 - Aim is to have part-time LNA’s assist during after school hours

3:50 – 4:00 **Legislative Updates-** Group Discussion

- NH Office of Professional Licensure and Certification- [Senate Bill 330](#)
 - Established committee / Selected members
 - Held first meeting September 30th, 2022

4:00 **Adjourn**



A Path to Equitable Care in Epilepsy

Elaine T. Kiriakopoulos, MD, MSc
Assistant Professor of Neurology, Geisel School of Medicine at Dartmouth
Director, HOBSCOTCH Institute for Cognitive Health & Well-Being
Director, Community Epilepsy & Self-Management Training Center
Dartmouth Hitchcock Epilepsy Center, Dartmouth Health



The Goal: Health Equity for People Impacted by Epilepsy

Reimagining care pathways and partnerships

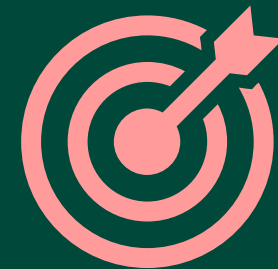
Ensuring a competent workforce

Mobilizing community partners

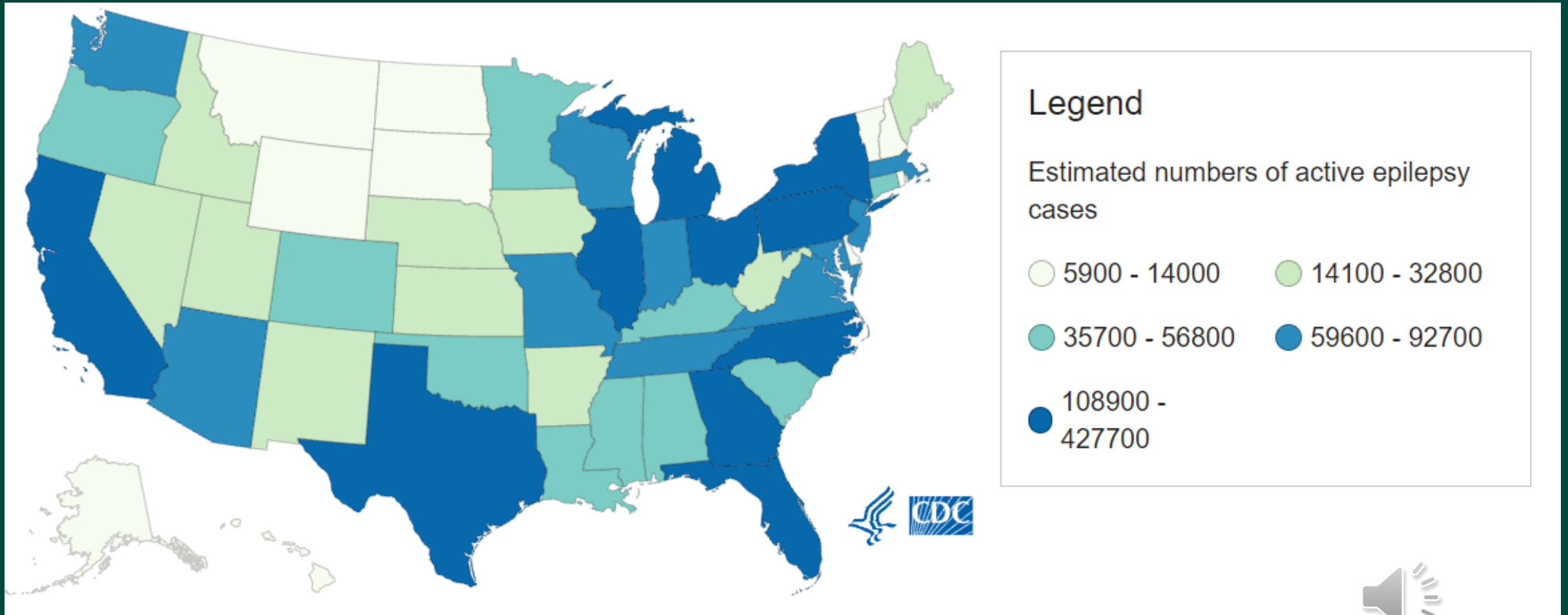
Reaching the most vulnerable populations

Empowering people with epilepsy

Community Epilepsy Training
CHW Integration into Epilepsy Care
Telehealth Supported Epilepsy Self-Management



CDC: Epilepsy Disease Burden



Medical Challenges

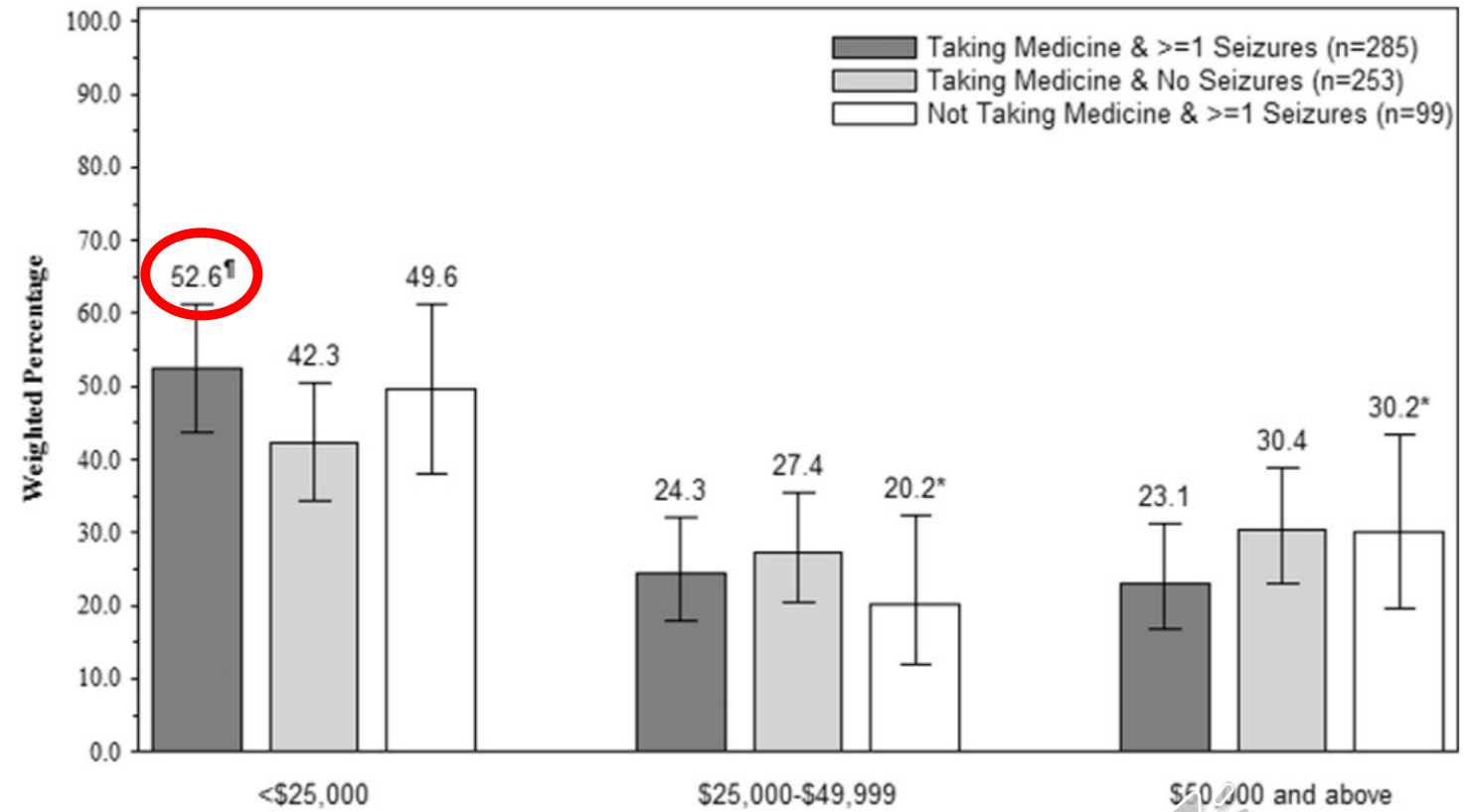
- Delayed diagnosis/misdiagnosis
- >30 seizure types; for many, more than 1 type
- Complex treatment regimens
- 30%-50% uncontrolled seizures
- Medication side-effects
- Psychological and physical comorbidity
- Hidden disability/disclosure
- Challenging for patients to self-manage
- Injury and death



Social Challenges

- ↑ unemployment
- ↑ disability
- ↓ educational attainment
- ↑ low household income
- ↑ social isolation, stigma
- ↑ transportation restrictions
- ↑ inability to afford different types of care

ABOUT ½ of ADULTS WITH ACTIVE EPILEPSY and SEIZURES HAVE ANNUAL FAMILY INCOMES < THAN \$25,000 (NHIS 2103,2015)



Study Sample (n = 1284)
422 family practitioners
432 internists
233 pediatricians
197 nurse practitioners

**at least 1% practice patients with epilepsy*



Contents lists available at [ScienceDirect](#)

Epilepsy & Behavior

journal homepage: www.elsevier.com/locate/yebeh



From the US Centers for Disease Control and Prevention

When and why US primary care providers do and do not refer their patients with new-onset seizures or existing epilepsy or seizure disorders to neurologists—2018 DocStyles



Rosemarie Kobau ^{a,*}, Matthew M. Zack ^a, Sanjeeb Sapkota ^b, Martha Sajatovic ^c, Elaine Kiriakopoulos ^d

^a Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Division of Population Health, 4770 Buford Highway NE, MS 107-6, Atlanta, GA 30341, USA

^b ASRT Inc., Epilepsy Program, Division of Population Health, National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control and Prevention (CDC), Mail Stop 107-6, 4770 Buford Hwy, 30341 GA, USA

^c University Hospital Cleveland Medical Center, 10524 Euclid Ave, Cleveland, OH 44106, USA

^d Dartmouth Geisel School of Medicine, 1 Rope Ferry Road, Hanover, NH 03755-1404, USA

- PCPs refer patients with *new-onset seizures*
- 40% of PCPs did not refer if patient unresponsive to treatment
- less than one third of all practitioners consulted seizure treatment guidelines

** prompt appointments, communication with PCP, patient's insurance, referral back to PCP may facilitate referrals*

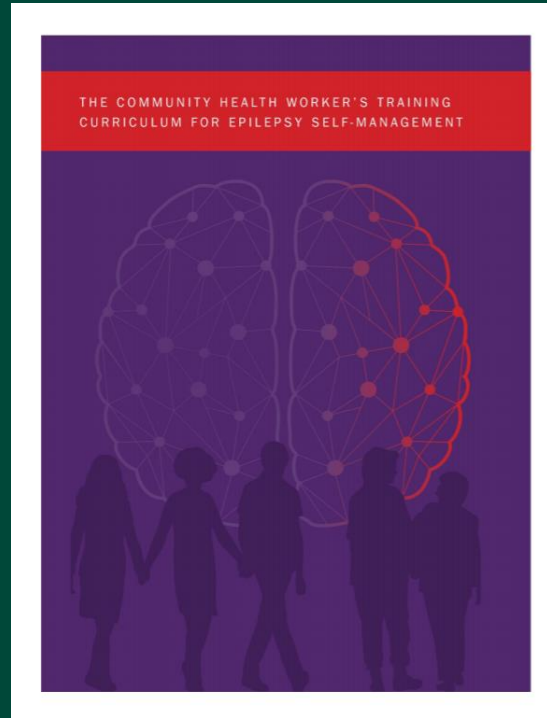


Community Epilepsy Training

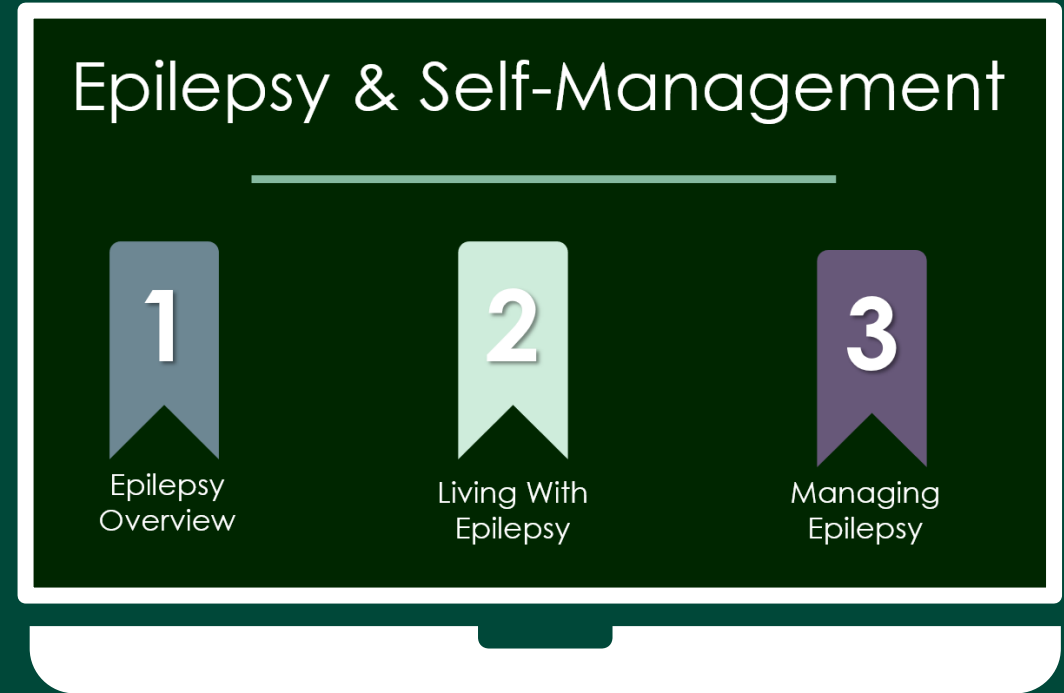
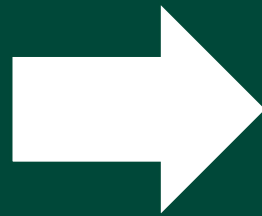
- Community Health Workers
- Primary Care Multi-Level Providers
- Behavioral Health Providers



Community Training



Centers for Disease Control and Prevention, 2017, *The Community Health Worker's Training Curriculum for Epilepsy Self-Management*, Managing Epilepsy Well Network, (managingepilepsywell.org)




2020 PILOT VIRTUAL TRAINING



Post Training Feedback: Key Takeaways

Combined data from participants who completed a training session and post training evaluation indicated

- 100% felt (*strongly agreed or agreed*)
 - the presentation of training materials was effective
 - the information in the training was important
 - the objectives of the session were achieved
- 98% of participants felt (*strongly agreed or agreed*) their knowledge on epilepsy and self-management had increased
- 100% of participants responded they would recommend this training to others
- Post training evaluation comments indicated interest in ongoing epilepsy training 

What we are learning...next steps...

- broad spectrum of trainees (n=204) with varied educational backgrounds
- workplace settings desiring online accessible epilepsy education
- early results indicate high user satisfaction with educational content and the ability to reach CHWs serving vulnerable populations
- virtual trainings are a cost-effective way to provide education for CHWs, multilevel primary and behavioral care providers to aid in improving outcomes for people with epilepsy
- additional implementation and evaluation studies ongoing





The HOBSCOTCH Institute for Cognitive Health and Well-Being was founded at the Dartmouth Hitchcock Medical Center in June, 2020. The mission of the Institute is to provide leadership in advancing care and improving quality of life for people with chronic neurologic disease (epilepsy, traumatic brain injury, multiple sclerosis) who are impacted by cognitive health and well-being challenges.

The Institute team is comprised of dedicated and skilled multidisciplinary health care professionals (neurologists, psychologists, nurses, advanced practice providers, social workers, community health workers, public health researchers, data scientists) who work together to carry out the mission of the Institute. The vision of the Institute includes improving systems, access, and delivery of health care resources; empowering people to manage their neurologic disease; educating professionals; creating models for the delivery of self-management and wellness programs; and conducting rigorous research that produces and translates knowledge to improve health outcomes and quality of life.

The Institute has three foundational pillars that guide its work: *Education, Research, and Self-Management Program Access and Growth*. The Institute engages diverse collaborators in academia, health care, industry, government and the community to maximize its impact on cognitive health outcomes and ensure a sustainable support for all people and families impacted by cognitive health challenges. Paramount to all efforts, the Institute is committed to engaging in collaborative processes that systematically advance health equity, by working towards eliminating health disparities and achieving optimal health for all people impacted by cognitive challenges and by epilepsy.

Housed within the Institute is The Community Epilepsy & Self-Management Training Center which shares education and training opportunities for multilevel community-based primary and behavioral care providers, community health workers and resource and referral specialists serving patients with epilepsy. Education delivered through the Center targets addressing population specific concerns in epilepsy, including reducing disparities, addressing social determinants of health, timely patient referral and access to the highest levels of epilepsy care and evidence-based self-management programs. The Center does so by engaging regional and national partners, including Area Health Education Centers, community clinics, state government agencies, and epilepsy serving as well as community health worker non-profit organizations. These strategic partnerships assist in ensuring that we are able to extend our reach and impact diverse, rural and underserved populations.

The HOBSCOTCH Institute leadership team is fortunate to work collaboratively with Epilepsy leadership at the Centers for Disease Control and Prevention, allowing for us to maintain a public health lens that is well coordinated with regional and national objectives. Catalyzed by the ongoing pandemic, the Institute has demonstrated agility and leadership in the implementation of innovative telehealth delivery of evidence-based interventions, accredited virtual training for clinicians and non-traditional health care providers, and online education for patient communities.

Contact: Elaine T. Kiriakopoulos, MD, MSc

Email: elaine.t.kiriakopoulos@dartmouth.edu

Phone: 603-306-1538

**BUILDING THE EQUITY TOOLBOX:
A Culturally Effective Organizations
Training Series
2022**



***The Roadmap to High
Quality Services for All***

We want to ensure that everyone has equal opportunity to thrive. The Culturally Effective Organizations Framework offers an effective approach to turn our goals into broader success. This ongoing series offers an opportunity for deeper exploration of dimensions of each of the Framework elements.

**BUILDING THE EQUITY TOOLBOX:
A Culturally Effective Organizations
Training Series**

Offered at no charge

Learning Objectives:

By participating in this series participants will be able to:

- Implement elements of the Culturally Effective Organizations Framework
- Identify and make use of resources for deeper understanding and action
- Advance equity within their own organizations

Learning Outcome:

- 80% of participants will identify an action they will take as a result of this training

We encourage participation in the whole series; registration for individual sessions is available.

See below for Continuing Education

[Click here to
REGISTER](#)



September 28, 1-3 pm

**Tools for Growing
Institutional Equity:
The Equity Impact Review**

Learn this best practice for structured assessment of policies, programs, proposals, and procedures; identify available EIR/EIA resources.

October 13, 1-4 pm

**Data Collection for Equity:
Applied Practice**

Part 2 of the Data for Equity Series
Interactive opportunity for applied practice of the essential concepts and best practices for collecting high quality data, correctly and consistently, as introduced in Part 1.

October 25, 1-3 pm

**Building Equity through Data
Part 3 of the Data for Equity Series**

Explore historical and cultural concepts of data and its use, and explore new ways to actively decolonize data to further equity. We will consider important questions about the nature of data and more.

November 16, 1-3 pm

**Operationalizing Equity:
The Culturally Effective
Organizations Framework**

Learn the roadmap for providing high quality services for all, foundational on the path to equity.



**New Hampshire
Equity Collective**

VISIT the [Culturally Effective Organizations Work Group](#) webpage to learn more!
For questions, please contact Brianna Ferraro, bferraro@snhahec.org

BUILDING THE EQUITY TOOLBOX: A Culturally Effective Organizations Training Series

Continuing Education

- Nurses

Southern New Hampshire Area Health Education Center is an approved provider with distinction of nursing continuing professional development by the Northeast Multistate Division Education Unit, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation.

Up to 9.0 contact hours,. Activity Number: 1481

- Physicians

The Southern NH Area Health Education Center, accredited by the NH Medical Society, designates this live activity for a maximum of 9.0 AMA PRA Category 1 Credit(s). Physicians should claim only the credit commensurate with the extent of their participation in the activity.

- Social Workers

Up to 9.0 CEUs pending approval from NASW NH.

- For all other health professionals: 9.0 hours

- For all other participants

A certificate of attendance for up to 9.0 hours will be available to serve your professional development needs.



**STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**New Hampshire State Loan Repayment Program (SLRP)
2022 Annual Report**

Program Summary

The Division of Public Health Services (DPHS), Rural Health & Primary Care Section (RHPC) administers the New Hampshire State Loan Repayment Program (SLRP). The program provides funds for educational loan repayment to health care professionals working in areas of the state designated as medically underserved. Medically underserved areas include Health Professional Shortage Areas (HPSAs), Mental Health Professional Shortage Areas (MHPSAs), Dental Health Professional Shortage Areas (DHPSAs), Medically Underserved Areas/Populations (MUA/Ps), and Governor's Exceptional Medically Underserved Populations (E-MUP). These designations indicate that a shortage of primary health care providers exists, posing a barrier to access primary health care services for the residents of these areas.

Organizations/Facilities funded by programs in the Department of Health and Human Services are also considered eligible sites. Health care providers participating in the SLRP agree to provide medical services to all patients regardless of their ability to pay. The health care provider and the practice site must offer a sliding-fee schedule based on current federal poverty guidelines, accept Medicaid, Medicare, and provide free care when medically necessary. The SLRP requests non-State matching funds for the loan repayment contract but does not require them. When there is adequate funding, SLRP participants are offered the opportunity to continue their service for loan repayment.

More information on repayment amounts, eligibility and provider types can be found on the [State Loan Repayment Program webpage](#).

Provider Licensure Acronyms:

MD/DO – Physician; Medical Doctor, Doctor of Osteopathy

DMD/DDS – Dentist; Doctor of Dental Medicine, Doctor of Dental Surgery

PA – Physician Assistant

NP – Nurse Practitioner

Psych NP - Psychiatric Nurse Practitioner

PsyD – Doctor of Psychology

LCMHC – Licensed Clinical Mental Health Counselor

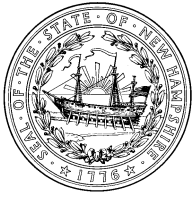
LICSW – Licensed Independent Clinical Social Worker

MFT – Licensed Marriage & Family Therapist

MLADC/LADC – Licensed Alcohol & Drug Counselor (Masters and Bachelors level)

RDH – Registered Dental Hygienist

BHUS – Behavioral Health professional Under Supervision for licensure



**STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**New Hampshire State Loan Repayment Program (SLRP)
2022 Annual Report**

Program Participation (July 1, 2021 through June 30, 2022)

Providers currently serving under the SLRP - 89

New contracts – 75

Continuation contracts - 14

Provider Types:

Primary Medical Care - 24

MD/DO – 7

APRN – 12

PA – 3

RN - 2

Behavioral Health - 61

Psych NP – 11

Psychologist – 1

LICSW – 9

LCMHC – 19

MFT – 2

MLADC – 5

LADC – 2

Dual Licensure LICSW/MLADC – 3

Behavioral Health under Supervision for licensure (BHUS) - 9

Oral Health - 4

DMD – 1

RDH - 2

PPD-DMD - 1

Locations:

Ammonoosuc Community Health Services – 1 Psych NP

Amoskeag Health Center – 1 DO, 1 MLADC

Associates in Medicine (Valley Regional Hospital) – 1 APRN

Center for New Beginnings – 1 LCMHC

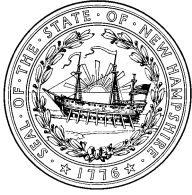
Concord Hospital Internal Medicine - Laconia – 1 APRN

Concord Hospital Primary Care - Belmont – 1 APRN

Concord Hospital Primary Care - Franklin – 1 PA

Conway Family Dental Care – 1 PPD-DMD

Coos County Family Health Services – 1 MD, 1 RDH, 1 RN



**STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**New Hampshire State Loan Repayment Program (SLRP)
2022 Annual Report**

Dental Health Works of Cheshire County – 1 RDH
Doorway at Concord Hospital - Franklin – 1 MLADC
Doorway at Wentworth-Douglass – 1 LICSW/MLADC
Families in Transition – 2 LADC, 1 LICSW/MLADC
Greater Nashua Mental Health Center – 1 LCMHC, 1 LICSW, 1 BHUS
Greater Seacoast Community Health – 1 LICSW/MLADC
Headrest – 1 MLADC
HealthFirst Family Care Center – 1 LICSW, 1 RN, 1 APRN
Jaffrey Family Medicine (Monadnock Community Hospital) – 1 APRN
Lakes Region Mental Health Center – 4 Psych NPs, 1 LICSW, 3 BHUS
Lamprey Healthcare – 1 MD, 3 APRN
Mental Health Center of Greater Manchester – 3 Psych NP, 4 LCMHC, 1 LICSW, 1 MLADC, 3 BHUS
Mid-State Health Center – 1 DMD
Monadnock Family Services – 1 LICSW, 1 LCMHC, 1 MLADC
Moultonborough Family Medicine (Huggins Hospital) – 1 APRN
Newport Health Center – 1 LICSW
North Country Primary Care (Littleton Regional Hospital) – 1 DO, 1 APRN
Northern Human Services – 1 LICSW, 2 LCHMC
Plymouth Pediatric and Adolescent Medicine (Spere Memorial Hospital) – 2 DO, 1 APRN
Riverbend Community Mental Health Center – 1 Psychologist, 2 Psych NP, 1 MFT, 1 LICSW, 8 LCMHC
Saco River Medical Group – 1 APRN, 1 PA
Seacoast Mental Health Center – 1 Psych NP, 1 MFT, 1 LCMHC, 2 BHUS
Tamworth and Ossipee Family Medicine (Huggins Hospital) – 1 PA
West Central Behavioral Health – 1 LCMHC, 2 LICSW
Wolfeboro Family Medicine (Huggins Hospital) – 1 DO

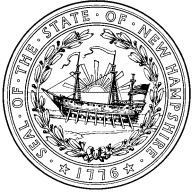
Rural Status:

Rural – 46

Non-Rural – 43

Program Modifications

On July 1, 2021, the SLRP added primary care Registered Nurses (RNs) at eligible sites and Behavioral Health under Supervision professionals to acquire their license at eligible sites, as eligible provider types. The SLRP-PPD was converted from a pilot cycle to permanent program and it now has a rolling application period. With additional SLRP funding from the American Rescue Plan Act, provided in August 2021, the SLRP added hospitalists at Critical Access Hospitals as another eligible provide type in September 2021.



**STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**New Hampshire State Loan Repayment Program (SLRP)
2022 Annual Report**

Update Statement

Effective July 1, 2022, the SLRP implemented a moratorium on to limit the number of applications per employer. This will be in effect until the American Rescue Plan Act funding has been exhausted. Effective August 1, 2022, the SLRP removed the requirement that Behavioral Health under Supervision professionals have at least 12 months of supervision before applying to the SLRP.

Short-Term Recommendation(s)

None at this time.

New Hampshire Healthcare Workforce Partnerships:

Three programs that make a difference in NH

NH *needs*
Caregivers!



NH *needs*
HIGH SCHOOL
Caregivers!
Healthcare Heroes in the Making

AH *Southern
New Hampshire*
EC **Area Health
Education Center**

Presented by:

**Lynn Carpenter, NH Needs Caregivers and
Roxie Severance, Sector Partnerships Initiative**



The Sector Partnership Initiative or SPI is **an industry-driven effort** for NH businesses to convene and collaborate on solutions to **upskill current workers, better prepare new worker and recruit new workers to health care**. SPI is a proven approach to impact the current health care workforce shortages by developing **Regional Health Care Collaboratives** where **employers, education, elected officials, and others work together regionally to create solutions to the health care workforce crisis**. Goals are set, ideas shared, and programs developed. It is about growing workers, upskilling, and retaining talent. Employers can only be successful when work together and form partnerships with education and community organizations.

Evolution of Funding SPI:

- February 4, 2022- Office of Workforce Opportunity funds/contract ends with NH Healthcare Association
- December 2021- Southern NH AHEC receives CDC Health Equity Grant Funds for continuation of SPI work. Funding through June 2023.

SPI Data Project

2021 Strategic planning: Regional Groups

- Identified need for workforce data to quantify job vacancies
- Establish measures to determine effectiveness of efforts to grow and sustain the workforce
- **Data collection through electronic survey for 6 SPI regions**
 - Concord/ Upper Valley
 - Lakes
 - Monadnock
 - North Country
 - Seacoast
 - Southern

Goals of the project:

- SPI will have the ability to plan future activities and strategy based on informed decision making
- Provide baseline measurable data regarding vacancy rates and numbers of open position for 13 key jobs/ positions



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Process



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- **Defined regions** (counties, cities, and towns)
- **Developed distribution list** for each area utilizing the Department of Health and Human Services (DHHS) NH Health Facilities Licensed Under RSA 151.

<https://www.dhhs.nh.gov/oos/bhfa/documents/licensedfacilities.pdf>

Facility/ organization types included in project:

- **Assisted Living/ Residential Care Facility** (HeP-804)
- **Home Health Agency Hospice** (HeP-823)
- **Home Care Service Provider** (HeP-822)
- **Home Health Care Provider** (HeP-809)
- **Hospital** (HeP-802)
- **Nursing Home** (HeP-803)
- **Supported Residential Care Facility** (HeP-805)



Response rate= 46%
 2 FQHC*, 5
 Hospitals, 1
 HHA/Hospice, 1
 Nursing Home

**Workforce
Data
Collection**

**North
Country**

	# Positions Filled	# Positions Open/ Vacant	Total # Positions	Vacancy %
Advanced Practice Registered Nurse (APRN)	37	9	46	20%
Emergency Medical Technician (EMT)	6	1	7	14%
Environmental Services Supervisor	8	1	9	11%
Environmental Services Worker (Entry Level)	56	10	66	15%
Food Service Supervisor/ Chefs/ Cooks	21	3	24	13%
Food Service Worker (Entry Level)	42	8	50	16%
Home Health Aide/ Personal Care Attendant	N/A	N/A	N/A	N/A
Licensed Nursing Assistant (LNA)	97	55	152	36%
Licensed Practical Nurse (LPN)	29	12	41	29%
Medical Assistant (MA)	90	19	109	17%
Medication Nursing Assistant (MNA)	15	0	15	0%
Phlebotomy Technician	10	4	14	29%
Registered Nurse (RN)	273	77	350	22%



Response rate= 29%
 4 AL, 5 Home Care Svc Provider, 1 Home Health Care Provider, 1 Hospital, 4 Nursing Homes, 1 Supported Res Care

Workforce Data Collection
Concord/Upper Valley Region

Job	# Positions Filled	# Open Positions	# Total Positions	Vacancy %
Advanced Practice Registered Nurse (APRN)	327	96	423	23%
Emergency Medical Technician (EMT)	9	0	9	0%
Environmental Services Supervisor	17	7	24	29%
Environmental Services Worker (Entry Level)	144	44	188	23%
Food Service Supervisor	34	4	38	11%
Food Service Worker (Entry Level)	149	66	215	31%
Home Health Aide (HHA)/ Personal Care Attendant (PCA)	411	74	485	15%
Licensed Nursing Assistant (LNA)	416	260	676	39%
Licensed Practical Nurse (LPN)	174	81	255	32%
Medical Assistant (MA)	278	123	401	31%
Medication Nursing Assistant (MNA)	16	0	16	0%
Phlebotomy Technician	52	26	78	33%
Registered Nurse (RN)	1671	737	2408	31%

Response rate= 30%

1 Home Care Service Provider, 2 Home Health Provider with Hospice Agency, 1 Home Health Care Provider, 1 Hospital, 3 Nursing Homes, 3 Supported Res Care



Workforce Data Collection

Lakes Region

Job	Positions Filled	Open Positions	Total Positions	Vacancy %
Advanced Practice Registered Nurse (APRN)	9	3	12	25%
Emergency Medical Technician (EMT)	N/A	N/A	N/A	N/A
Environmental Services Supervisor	8	0	8	0%
Environmental Services Worker (Entry Level)	43	8	51	16%
Food Service Supervisor	17	0	17	0%
Food Service Worker (Entry Level)	28	12	40	30%
Home Health Aide (HHA)/ Personal Care Attendant (PCA)	133	45	178	25%
Licensed Nursing Assistant (LNA)	157	23	180	13%
Licensed Practical Nurse (LPN)	30	11	41	27%
Medical Assistant (MA)	23	2	25	8%
Medication Nursing Assistant (MNA)	8	2	10	20%
Phlebotomy Technician	3	1	4	25%
Registered Nurse (RN)	124	36	160	23%



Response rate= 36%
 1 Assisted Living, 2 Home Health Care Provider, 1 Hospital, 1 Home Health Agency Hospice, 3 Nursing Home, 1 Supported Res Care, 1 ICF/IID

**Workforce Data Collection
 Monadnock**

	# Positions Filled	# Positions Open/ Vacant	Total # Positions	Vacancy %
Advanced Practice Registered Nurse (APRN)	2	2	4	50%
Emergency Medical Technician (EMT)	N/A	N/A	N/A	N/A
Environmental Services Supervisor	12	2	14	14%
Environmental Services Worker (Entry level)	17	16	33	49%
Food Service Supervisor/ Chef/ Cook	16	4	20	20%
Food Service Worker (Entry level)	25	16	41	39%
Home Health Aide (HHA)/ Personal Care Attendant (PCA)	40	11	51	22%
Licensed Nursing Assistant (LNA)	190	84	274	31%
Licensed Practical Nurse (LPN)	53	15	68	22%
Medical Assistant (MA)	27	7	34	21%
Medication Nursing Assistant (MNA)	16	6	22	27%
Phlebotomy Technician	4.7	1	5.7	18%
Registered Nurse (RN)	89	26	115	23%

Response rate= 31%
 2 Assisted Living, 1 Home Care Service
 Provider, 1 Home Health Care
 Provider, 1 Hospital, 7 Nursing Home,
 8 Supported Res Care



**Workforce
 Data
 Collection
 Seacoast**

Job	# Positions Filled	# Open Positions	Total # Positions	Vacancy Rate
Advanced Practice Registered Nurse (APRN)	6	0	6	0%
Emergency Medical Technician (EMT)	NA	NA	NA	NA
Environmental Services Supervisor	18	0	18	0%
Environmental Services Worker (Entry Level)	126	45	171	26%
Food Service Supervisor/ Chef/ Cook	40	8	48	17%
Food Service Worker (Entry Level)	132	35	167	21%
Home Health Aide (HHA)/ Personal Care Attendant (PCA)	107	27	134	20%
Licensed Nursing Assistant (LNA)	423	231	654	35%
Licensed Practical Nurse (LPN)	105	54	159	34%
Medical Assistant (MA)	0	0	0	0%
Medication Nursing Assistant (MNA)	51	20	71	28%
Phlebotomy Technician	10	3	13	23%
Registered Nurse (RN)	498	102	600	17%



NH *needs*
Caregi♥ers!

NH Needs Caregivers 2021-2023

- **Recruit and train 525 licensed nursing assistants (LNAs)** to work in health care facilities/ organizations in NH by May 31, 2023
 - Marketing efforts to recruit new caregivers to the field
 - Funded by CDC Equity Grant
 - Fiscal Agent to Lamprey Health Care and the Southern NH Area Health Education Center (SNHAHEC)
 - Participating facilities and organizations from any healthcare sector
 - Commit to communicating with Program Director and to paying \$500 retention bonus after 6 months of full or part-time employment
- ## Benefits of Participation
- Listed on NH Needs Caregivers Website
 - LNA candidates/ referrals
 - NHNC Program Director support and collaboration
 - Marketing/ PR

Process/ What We Do



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- Marketing and Promotion of a Career in Healthcare (Google analytics, Social Media and PR campaigns) in collaboration with Marketing Partner
- Interest in Program via Website
 - Email generated to Program Director immediately
 - Personalized Response within 24-48 Hours
- Training Availability, Explanation of Program, Next Steps
 - Program Application and Agreement
 - Register for Training
- Funding/ Financial Assistance for LNA course
- Data Collection, Analysis, and Reporting in collaboration with Academic Partner
- Support participant in securing employment with a participating healthcare facility/ organization

Program Update

- **338 individuals*** have expressed interest in becoming a licensed nursing assistant (LNA)
- 140/338 (**41%**) have taken the next step and **completed the Program Agreement**
 - Agree to register for a course within 30 days
 - 6 months employment in a participating facility
- **28 have obtained LNA license**
- **14 are enrolled in a current or future class**
- **Funding for tuition is the biggest barrier to participation**
 - Attempt to connect with participating employer who will pay for the course with employment commitment
 - WIOA
 - WorkNow

**12/8/21-9/8/22*

NH Needs Caregivers: Healthcare Heroes in the Making

In Partnership with NH Extended Learning Opportunity (ELO) Coordinators

- **Discussions at SPI Meetings with ELO Coordinators**

- Need for Licensed Nursing Assistants (LNAs)
- Ideas re: opportunities for high school students who are unable to participate in CTE programs to complete LNA course

- Received American Rescue Plan Act State Fiscal Recovery Funds (Federal Funds)
- Agreement with Lamprey Healthcare/ Southern NH Area Health Education Center (SNAHEC) through December 31, 2022



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NH Needs Caregivers: Healthcare Heroes in the Making

In Partnership with NH Extended Learning Opportunity (ELO) Coordinators

PURPOSE

- To **grow a pipeline of caregivers** by piloting a program to recruit and train 300+ High Schools Students to become LNAs
- **Reduce barriers** that keep students from entering the healthcare field while in high school
- **Provide high school students with education, skills, and licensure** and match them with a healthcare employer to ensure their success
- **Provide** each student with **experience** to advance their **healthcare careers**
- Provide information about **LNA employment opportunities** in a variety of settings, according to student interests and location
- Provide **means to earn a livable wage** to save for secondary education encourage those who had not considered a career in healthcare prior.
- **Provide a pipeline of caregivers** to work in a variety of healthcare settings across the state

NH Needs Caregivers: Healthcare Heroes in the Making

Provide paid LNA training (including licensing, uniforms) to **300 high school students** in NH

Marketing and Promotion of Program/
Opportunity

Minimum eight (8) week employment commitment in a healthcare setting for those participating in the program and obtaining LNA license

Pilot Program on Seacoast (February 2022)

March 2022: available to all high school students through ELO Coordinators



NH *needs*
HIGH SCHOOL
Caregi♥**ers!**

Healthcare Heroes in the Making



The Details

How does the program benefit high school students?

- **Paid LNA training** (program covers cost of the course, uniform, and licensing)
- **Assistance finding employment** in a healthcare setting
- **A great start to a career** and/ or gain experience in the healthcare field!



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What is required of high school students?

- Must be at least 16 years of age
- COVID Vaccination
- Enroll in an LNA course within 60 days of acceptance to program
- Commit to working a minimum of 8 weeks in a healthcare setting
- Complete survey(s) as requested
- Communicate with Program Director regarding employment location

Program Update

Key Performance Indicators	Aug-22	Jul-22	Jun-22	May-22	Apr-22	Mar-22	Feb-22
Number of Inquiries/ Requests for Additional Information	1	2	13	42	30	13	29
Total Since Inception of Program (Cumulative)	130	129	127	114	72	42	29
Number of participants who withdrew from program*	20	16	14				
Number of Active Participants	110	113	113				
# Participants Starting LNA Course	12	14	17	3	1	0	21
# Participants Completing LNA Course	15	14	3	20	0	0	0
# Participants Passed Test	23	6	8	15	0	0	0
# Participants Licensed during Month	8	4	16	0	0	0	0
# Participants licensed since inception of NHNC-Healthcare Heroes in the Making Program (cumulative)	29	20	16	0	0	0	0
Number of students starting/ not successfully completing the program	4	3	1	1			
# Participants enrolled in a Future Course	24	30	40	27	15		

- 52 students/ participants have completed the LNA course
- 29 have become licensed LNAs
- 24 are enrolled in a future course
- 76 of 110 'active' participants have completed or are enrolled in a course
- 24 not enrolled but 'active' in the program (have not withdrawn)

For more information, please contact:

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thank you!

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