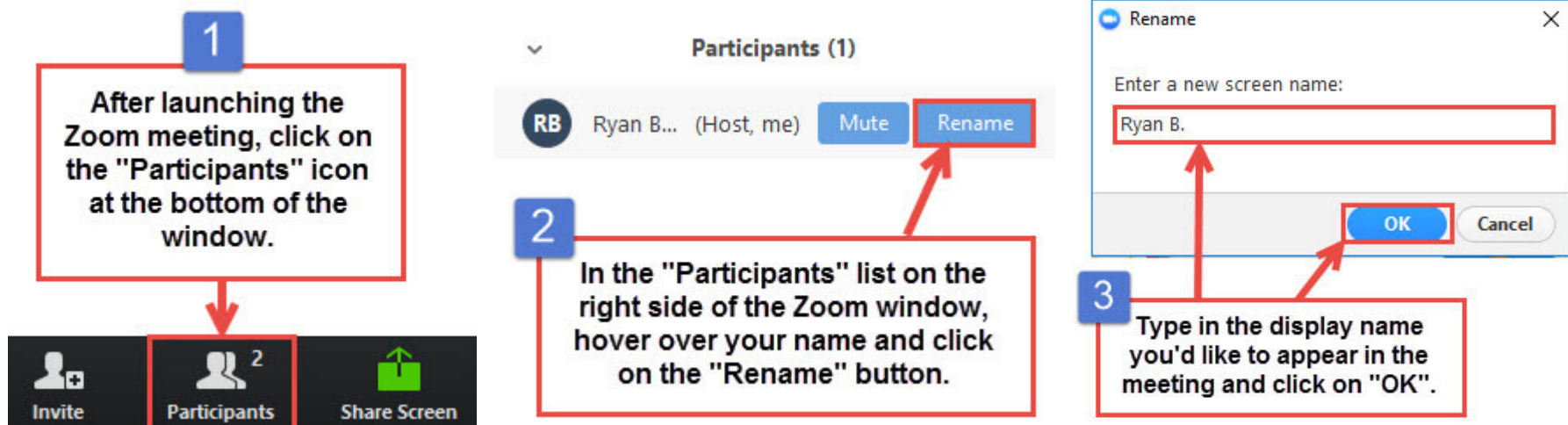


Health Profession Student Training Learning Collaborative

Session Four: Tuesday April 16th, 2024

Get the Most Out of Your Zoom Experience

- Please keep yourself on MUTE to avoid background/distracting sounds
- Use the CHAT function or UNMUTE to ask questions or make comments
- Please change your participant name to your full name and organization
 - “Meaghan Angers CHCI”



1

After launching the Zoom meeting, click on the "Participants" icon at the bottom of the window.

2

In the "Participants" list on the right side of the Zoom window, hover over your name and click on the "Rename" button.

3

Type in the display name you'd like to appear in the meeting and click on "OK".

Session 4 Agenda

3:00 – 3:05	Welcome & Introduction
3:05 – 3:40	Behavioral Health: Students, Externs, and Residents
3:40 – 4:00	Administrative Fellowship
4:00 – 4:20	Quality Improvement Refresh: Standardization and Spread, Playbooks
4:20 – 4:30	Wrap-Up

Learning Collaborative Faculty

Margaret Flinter, APRN, PhD, FAAN

- Co-PI, NTTAP
- CHCI's Senior Vice President/Clinical Director

Amanda Schiessl, MPP

- Co-PI & Project Director, NTTAP

Victoria Malvey

- Interprofessional Student Specialist

Bianca Flowers

- Project Manager, NTTAP

Meaghan Angers

- Project Manager, NTTAP

National Training and Technical Assistance Partners Clinical Workforce Development

Provides free training and technical assistance to health centers across the nation through national webinars, learning collaboratives, activity sessions, trainings, research, publications, etc.

Team-Based Care



- Fundamentals of Comprehensive Care
- Advancing Team-Based Care

Training the Next Generation



- Postgraduate Residency and Fellowship Training
- Health Professions Training

Emerging Issue



- HIV Prevention

Advancing Health Equity



Preparedness for Emergencies and Environmental Impacts on Health



Learning Collaborative Structure

- Six 90-minute Learning Collaborative video conference sessions
- Bi-weekly calls between coach mentors and practice coach
- Bi-weekly team workgroup meetings
- Use the Weitzman Education Platform to access resources and receive CME credit

Learning Session Dates	
Learning Session 1	Tuesday February 6 th
Learning Session 2	Tuesday March 5 th
Learning Session 3	Tuesday March 26 th
Learning Session 4	Tuesday April 16 th
Learning Session 5	Tuesday May 14 th
Learning Session 6	Tuesday June 11 th

2024 Cohort

Five Rivers Health Centers	Ohio
Jessie Trice Community Health Center	Florida
Northshore Health Centers	Indiana
Primary Health Care, Inc.	Iowa
Sun Life Health	Arizona
SWLA Center for Health Services	Louisiana
Tepeyac Community Health Center	Colorado
Thundermist Health Center	Rhode Island
Upper Great Lakes Family Health	Michigan
Wellspace Health	California



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Behavioral Health: Students, Externs, and Residents

Dr. Tim Kearney, Chief Behavioral Health Officer



Polling Question

- Do you have a behavioral health training program at your organization?
 - Yes
 - No
 - Unsure
- Have you thought about starting a behavioral health training program at your organization?
 - Yes
 - No
 - Unsure



Overview of BH Landscape

Clinical Providers:

- **Therapists**
 - Social worker, marriage and family therapist, counselor, psychologist, drug and alcohol counselor
- **Medication providers:**
 - Psychiatrist, psychiatric nurse practitioner, prescribing psychologists
- **Level of licensure**
 - Licensed Independent Practitioners (LIP)
 - Licensed to Practice Under Supervision
 - Student or Resident Under supervision of appropriately credentialed LIP



Behavioral Health Student Training Levels:

Externship

- Still in training program prior to receiving degree
- In placement as part of their training
- Each discipline has a different variation

Internship

- Completed all training with the exception of dissertation
- Nationally competitive program
- APA Accredited internship

Postdoctoral Residency

- Completed training and received PhD, but in order to get licensed, you need a year under supervision before exams
- APPIC
- APA Accredited Postdoc Residency program



Considerations in Selecting Training Students vs. Post Graduates

Students

- ✓ Student program builds a relationship with local programs and community partnerships.
- ✓ Promotes relationships for engagement in residency programs or being hired on as staff.
- ✓ Typically no salary.
- ✓ Follows academic year.

Post Graduate Trainees

- ✓ Less intensive supervision.
- ✓ Resident can carry larger case load, take on a wider range of responsibilities.
- ✓ Hired as employees.
- ✓ 12 month program.



Considerations in Program Design Students vs. Post Graduates

Students

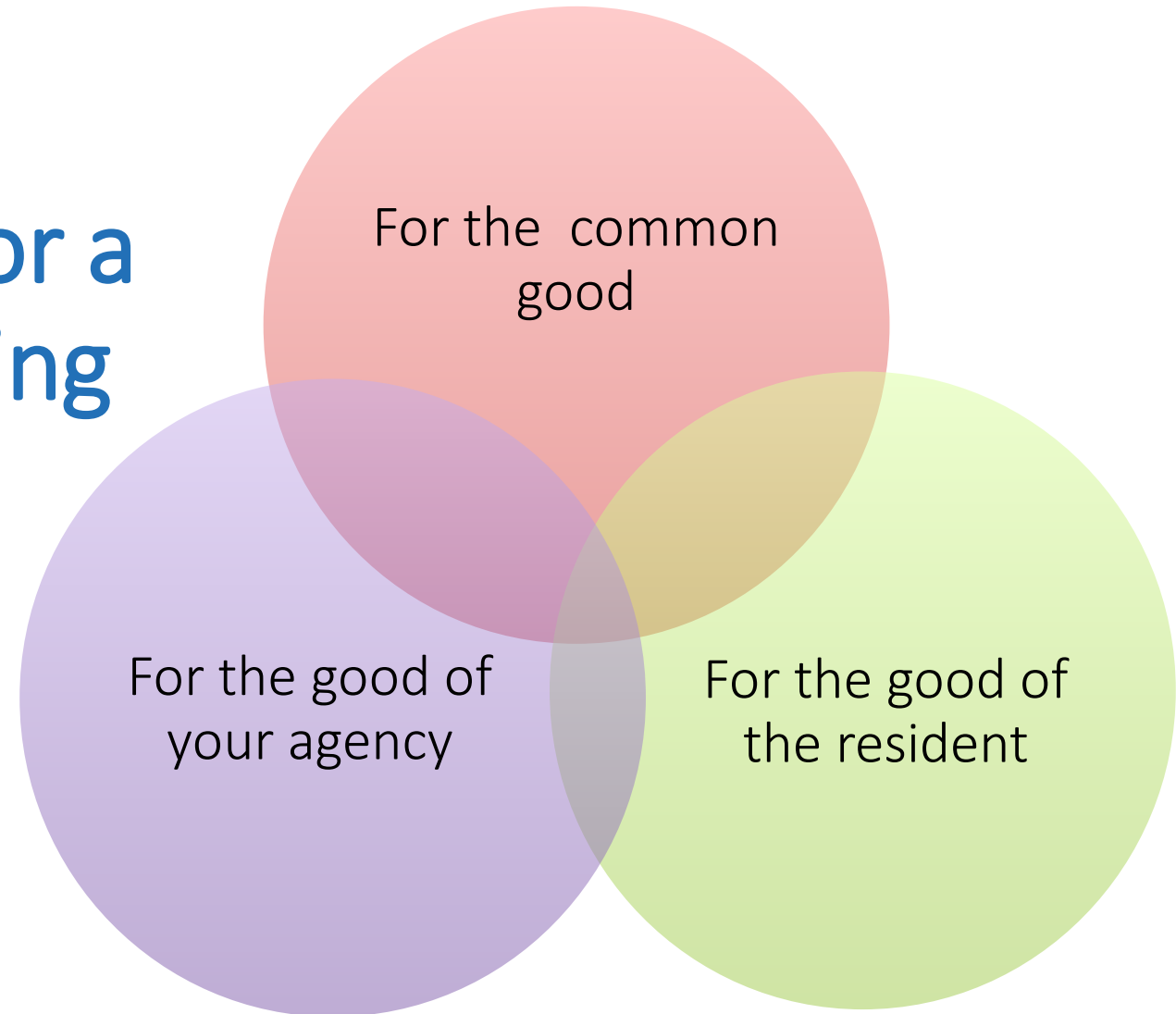
- ✓ Fewer hours.
- ✓ Prioritization of face-to-face time.
- ✓ Selective didactic programming.
- ✓ School requirements

Post Graduate Trainees

- ✓ Tailoring training to specific training goals.
- ✓ Promoting leadership opportunities.
- ✓ Increased breadth of training experiences.
- ✓ External accreditation and licensing standards



What are your drivers for a behavioral health training program?





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For the Common Good

To develop staff to address behavioral health needs of our clients, particularly using those trained to an integrated model of primary care and behavioral health





For the Good of Your Health Centers

- Influx of new energy and enthusiasm with the most recent evidence based knowledge
- Increased staff satisfaction
 - Professional development:
 - Learning to supervise
 - Increasing skill of clinical teaching
 - Recognition of skill
 - Passing on knowledge
 - Improved retention
- Increased access for clients
- Opportunity to build a strong talent pool from which to hire through training pipeline
- May generate income based on billing





For the Good of the Student

- Prepares trainees to work with vulnerable populations in an FQHC setting
- Builds confidence within a clinical setting to become an independent clinician with enhanced treatment abilities and leadership skills
- Learn by doing and introject a picture of the role of a behavioral health provider in an integrated care setting that informs professional self image at the start of a career
- Prepares the student for the next steps in professional development
- Increases competitiveness in the job market for those who do not remain at their training site by providing a broad clinical exposure





The Road to Developing a Student Training Program

- Answer the question: What are your drivers for a behavioral health training program?
- Identify requirements of training: discipline/level
- Assess your own resources (physical, human, financial)
- Secure board, leadership, and clinical buy-in
- Develop financial and strategic plan including potential partners
- Costs and benefits:
 - Direct and indirect costs
 - Return on Investment: immediate and longer term
 - Benefits beyond the financial return





Elements of Training Program

Didactic Series

Group and
individual
supervision

Leadership
training
opportunities

Additional
training
opportunities

Clinical exposure
and scaffolding



What we have Learned

1. The importance of collecting data
2. Trainees improve processes and systems by providing feedback to staff about workflow issues
3. Supervision training is needed
4. One day per week for didactics, supervision, and cohort activity is invaluable
5. Be very clear about expectations and what you can and cannot offer

NTTAP Resources

Implement Behavioral Health Training Programs to Address a Crucial National Shortage in Community Health Care Settings Webinars

[Slides](#) | [Video](#)

Developing a Postdoctoral Residency Program in Community Health

[Slides](#) | [Video](#)



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Questions?

Administrative Fellowships

Manjari Mishra, Administrative Fellow
Wildaline Figaro, Administrative Fellow



Polling Question

- Do you have an administrative fellowship program at your organization?
 - Yes
 - No
 - Unsure
- Have you thought about starting an administrative fellowship program at your organization?
 - Yes
 - No
 - Unsure



What is an Administrative Fellowship?

- A program typically administered by healthcare organizations to train master's-level, post-graduate students on the management and delivery of healthcare services.
- Program lengths vary between six months and two years, with most programs offering of a one year curriculum.
- While postgraduate fellowships are not required, a majority of healthcare focused graduates pursue fellowship opportunities.





Why should I consider establishing an Administrative Fellowship?

1. Succession planning
2. Diverse backgrounds, skillsets, and perspectives
3. Training the next generation





What should I consider before establishing an Administrative Fellowship?

- How much access is my agency willing to grant the fellow?
(leadership, sensitive info)
- General fellowship or specialized fellowship? How many?
- What experiences do I want to ensure my fellow is exposed to?
- How long will it take for fellow to gain this experience?



What should I consider before establishing an Administrative Fellowship?

- Who will serve as fellowship director?
- Who will serve as rotational or project leads?
- Will my fellow rotate departments or work on an all-encompassing strategic projects?
- Will my agency support fellows in their search for full-time opportunities or create positions for them post fellowship?



CHC's Experience

- Fellow perspective
 - Why did you choose a fellowship? Why a fellowship at an FQHC specifically?
 - How was your overall fellowship experience?
 - What was your visibility and access to leadership?
 - What are the hours and stress level of a fellowship?
 - What advice would you give to future fellowship preceptors?



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Establishing an Administrative Fellowship Program: A Practical Toolkit to Support and Develop Future Community Health Center Leaders

[https://conferences.nachc.org/nachc/
articles/5187/view](https://conferences.nachc.org/nachc/articles/5187/view)



Establishing an Administrative
Fellowship Program:

*A Practical Toolkit to Support and
Develop Future Community Health
Center Leaders*

IN PARTNERSHIP WITH:





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Questions?



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Quality Improvement Refresh: HPS Training Playbook Guide and Standardization & Spread

Deb Ward, Consultant, CHC



Testing Changes (PDSAs) to
Standardizing (SDSAs) to....
Testing by Another POD Before a
Broader Spread



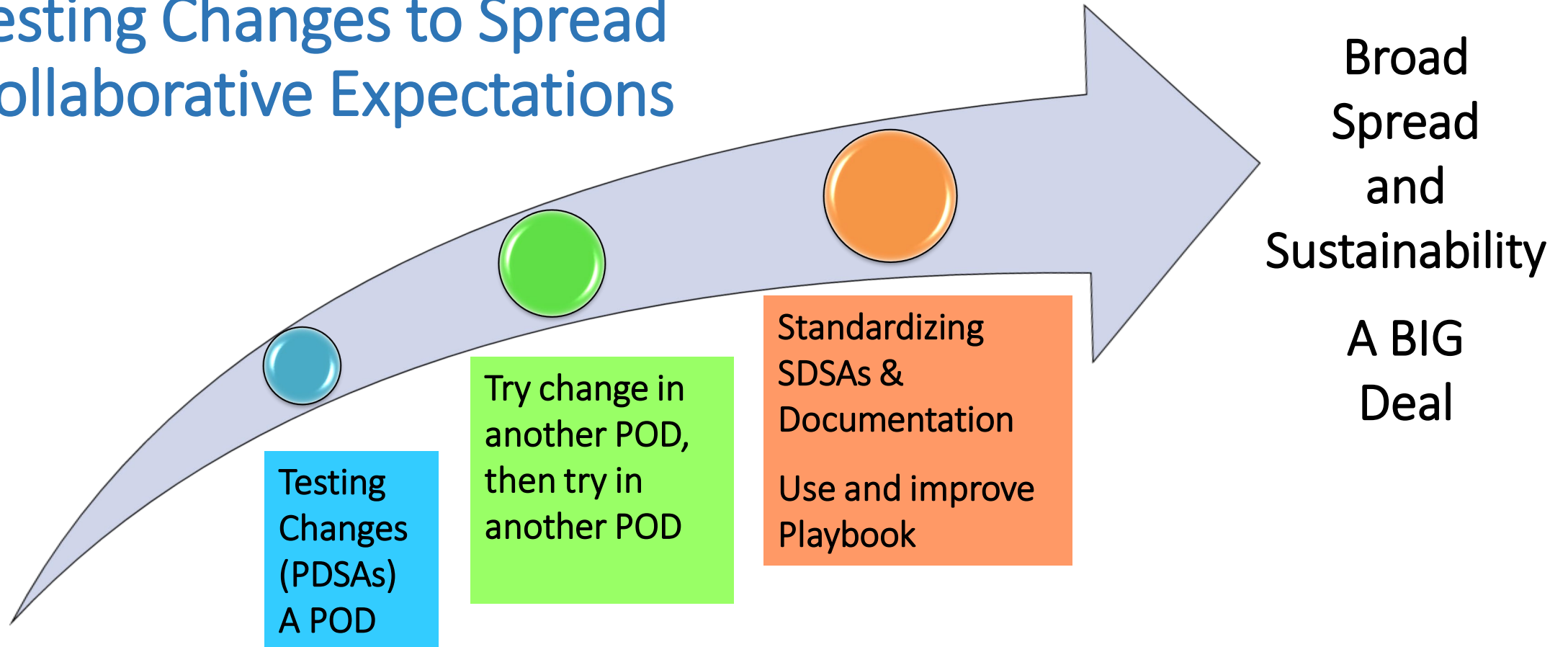


What is Spread?

- Spread is the process of taking a successful implementation process from a pilot, and replicating that change or package of changes (playbook) in other teams within a practice or other practices.
- During implementation, teams learn valuable lessons necessary for successful spread including key resource issues, best sequence of tasks, and how to help team members adopt and adapt a change.
- **Spread efforts benefit from the use of the PDSA cycle.** Teams adopting the change have the skills to test the standard and work toward achieving the results of other teams.



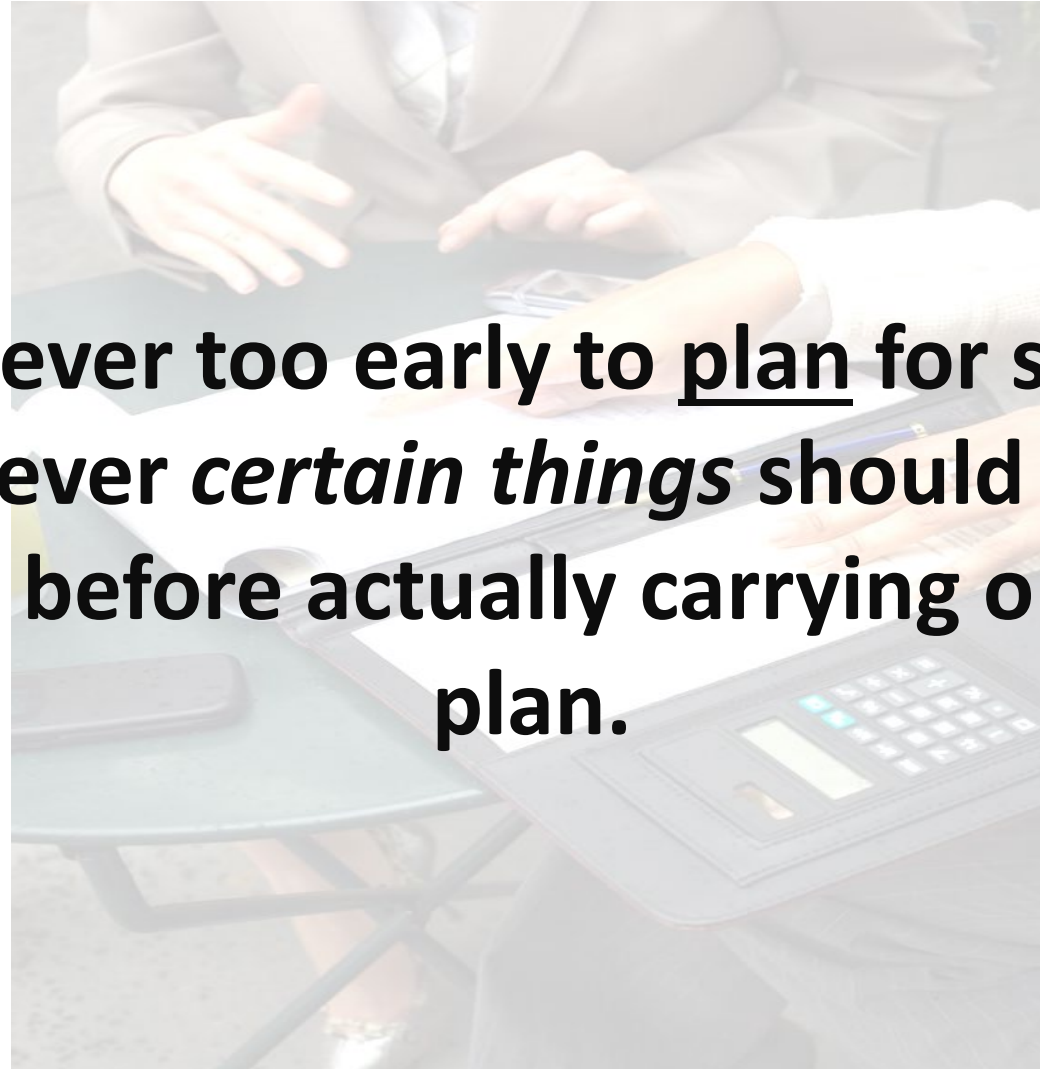
Testing Changes to Spread Collaborative Expectations





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**It is never too early to plan for spread
however *certain things* should be in
place before actually carrying out the
plan.**





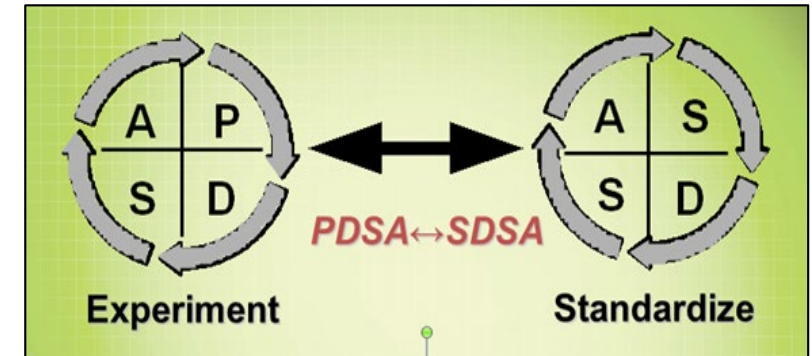
- You can spread a successful PDSA process to another POD
- You can create a playbook describing the new standardized steps and process
- You can create sustainable change that positively impacts patients





Is the Process Standardized?

1. *Is the process failure free over time?*
 - Can your team count on it not to fail when everyone is following the process?
 - If one person overlooks it, will another catch it?
 - Are there clear specifications and communication?
 - Is the process supported by technology to reduce failure (EHR)?
 - A process recognizable by your team as “the way we do things” here
2. *Is there an expectation that that the evidence based process will be followed?*
3. *Is the process LEAN with minimal steps in the process?*





How Will You Know?

- A process recognizable by all in the workplace as **“the way we do things” here**
- **Five staff members** can regularly articulate the process steps when asked individually to describe
- A “miss” (defect) in the process flow can be **immediately identified** so that it can be corrected
 - There is a process in place to identify a failed step in process
 - There is a communication plan to support correcting a process defect to all areas
- **Measures** clearly indicate that the process is working



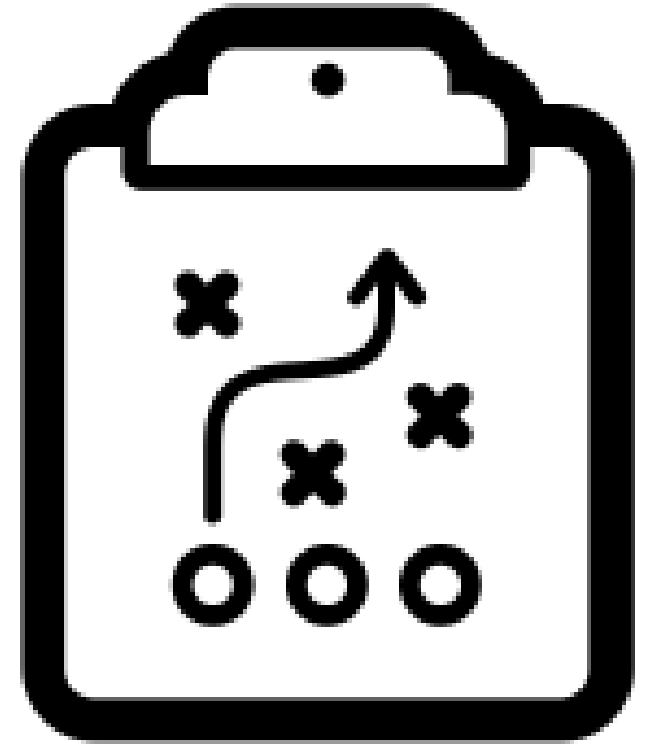
Communicating Spread

- ✓ Does leadership have all of the information they need to confidently speak with staff about the standardization?
- ✓ Have you gotten the approval of any committee or group internally that is required for standardization?
- ✓ Do you have a strategy to train the necessary staff on the standardization before it is implemented?
- ✓ Do you have (at the very least) the framework for a playbook that agency staff can use as a reference?
- ✓ Have you developed a plan for evaluation with timelines and individuals responsible for measurement?



What is a Playbook?

- **Collection of processes and tools** that have been tested using improvement science and resulted in a ‘way we want process done’.
- Playbook serve as **repository for standard processes** (SDSAs), ensuring improvement does not ‘slip’.
- The purpose is to provide a common and **easy to access** place to post and search all standardized processes and tools – using technology.





What is a playbook & Why is it important?

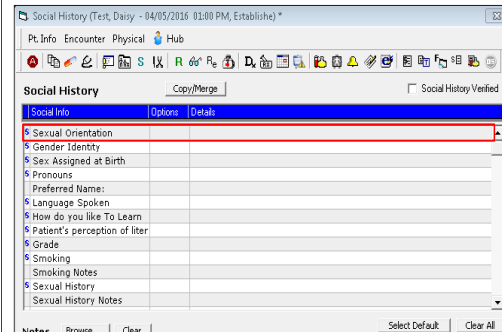
Sexual Orientation and Gender Identity (SOGI) Playbook

Playbook Table of Contents

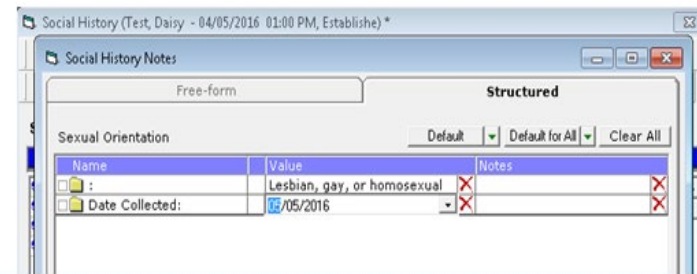
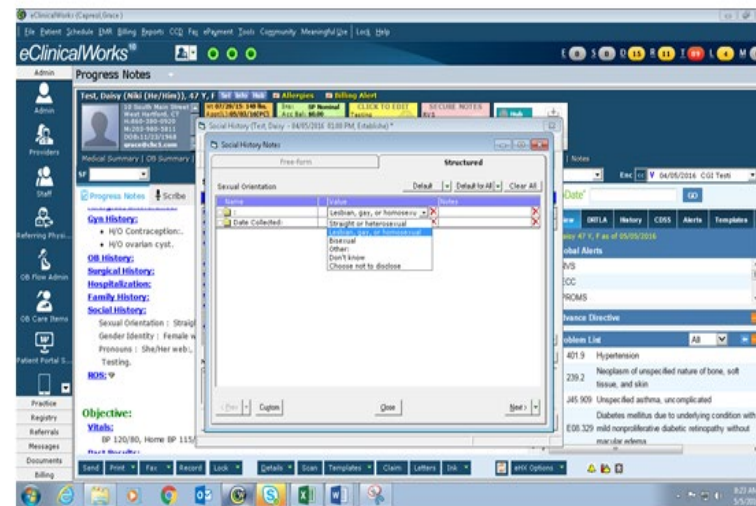
- #1. SOGI Questionnaire
 - #1a. Administering the SOGI Questionnaire in a Medical Provider Visit
 - #1b. Administering the SOGI Questionnaire in a Nursing Visit
 - #1c. Administering the SOGI Questionnaire in a Behavioral Health Visit
- #2. Documenting patient responses in eCW
 - #2a. Documentation for Transgender Patients
- #3. Patients with complete SOGI Profiles
- #4. Reporting SOGI Data

Key Steps

1. In the Progress Note, navigate to the Social History Section
2. Click in the **Details** section next to Sexual Orientation
 - a. From the structured drop-down, choose the patient response
 - b. In the Date Collected field, click the Notes section to populate a calendar date
3. Click **Next** at the bottom of that screen to move on to Gender Identity
4. Complete these steps until you reach the Preferred Name field



Sexual Orientation and Gender Identity (SOGI) Playbook



Key Steps:

Cube Report available from the CHC Analytics server

1. Sexual Orientation
2. Gender Identity
3. Pronouns
4. Sex Assigned at Birth

	A	B	C	D	E	F	G	H
1	Sexual Orientation					Gender Identity		
2	Calendar Date	Last 12 Months				Calendar Date	Last 12 Months	
3	Age	(Multiple Item)				Age	(Multiple Item)	
4	Provider	(Multiple Item)				Provider	(Multiple Item)	
5								
6	Row Labels	Patients	Patients with Office Visit			Row Labels	Patients	Patients with Office Visit
7	Bisexual	8	0.03%			Additional gender category/Other, please specify:	1	0.02%
8	Choose not to disclose	5	0.12%			Female	104	3.02%
9	Don't know	2	0.05%			Male	117	2.78%
10	Lesbian, gay, or homosexual	12	0.26%			Transgender Female/Trans Woman/Male to Female (M)	4	0.09%
11	Other	4	0.09%			Transgender Male/Trans Man/Female to Male (FTM)	2	0.05%
12	Straight or heterosexual	202	5.54%			Unreported	4693	93.74%
13	Unreported	4693	93.74%			Grand Total	4956	100.00%
14	Grand Total	4956	100.00%			Grand Total	4956	100.00%
15								
16								
17	Pronoun					Sex Assigned at Birth		
18	Calendar Date	Last 12 Months				Calendar Date	Last 12 Months	
19	Age	(Multiple Item)				Age	(Multiple Item)	
20	Provider	(Multiple Item)				Provider	(Multiple Item)	
21								
22	Row Labels	Patients	Patients with Office Visit			Row Labels	Patients	Patients with Office Visit
23	He/Him	116	2.70%			Choose not to disclose	2	0.05%
24	She/Her	124	2.51%			Female	105	3.24%
25	They/Them	1	0.02%			Male	126	3.00%
26	Unreported	4715	94.26%			Unreported	4693	93.74%
27	Grand Total	4956	100.00%			Grand Total	4956	100.00%



Health Professions Student Training Playbook Overview

Play 1: Partnership Approval and Communications with Schools

Play 2: Affiliation Agreement Management

Play 3: Student Capacity

Play 4: Initiating the Onboarding of a Student

Play 5: Communication with Student

Play 6: Student is Trained

Play 7: Student Arrives

Play 8: Student Documentation and Reporting

Play 9: Off-boarding



Playbook Example

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PLAY 1: INTRODUCTION AND BACKGROUND	4
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B: STUDENT PACKET	



Lessons Learned

- Standardization is on-going and the process requires continuous attention.
- Prioritize a true change in agency culture not just process.
- Facilitate collaborations with internal departments early in the process (i.e.: data, business intelligence)
- Be prepared for the “hoops” you need to jump through to get to an agency wide initiative – committee presentations, BOD approval
- Patient feedback can invigorate enthusiasm in staff
- Training to all levels of staff is arduous but necessary in standardization – remember to include administration, IT, billing, finance.
- Communication to the correct individuals is a key to success.
- Recognition for key staff (especially those with increased work load) is essential
- Leadership buy-in can make or break an initiative.
- Assign a key point of contact for questions, concerns and suggestions.
- Highlight successes often!



Questions?

Next Steps

Agenda items for your meetings during this action period

- Meet with key stakeholders and present play 3
- Review play 4-7 in the HPS Training Playbook Guide
- Draft process map for play 4-7

Assignments

- Submit rough draft of plays 4-7
- Google Drive Link:
https://drive.google.com/drive/folders/1l8mFwbFw2-2Z_QgmndDL_a1Dcsmr08HX

CME and Resource Page
Access Code: HPS2024



[https://education.weitzmaninstitute.org/
content/nttap-health-professions-
student-training-learning-collaborative-
2024](https://education.weitzmaninstitute.org/content/nttap-health-professions-student-training-learning-collaborative-2024)



Showcase Overview

- Due Date: Wednesday May 29th
- Showcase Date: Tuesday June 11th
- Team coaches will be sent a template, including:
 - Innovations*
 - ‘Aha’ Moments*
 - Recommendations to others*
 - Aim Statement
 - Measures/Impacts
 - Key Partners
 - Quote from leadership
 - Quote from team member
 - Process Map or other visuals (i.e. photos, graphs)

*Required

POSTGRADUATE NURSE PRACTITIONER RESIDENCY HealthPoint
 2021-2022 NTTAP Learning Collaborative

<p>HEALTH CENTER DESCRIPTION</p> <p>HealthPoint is a community-based, community-supported, and community-governed network of non-profit health centers dedicated to providing expert, high-quality care to all who need it, regardless of circumstances. Our mission is to strengthen communities and improve people's health by delivering quality health care services, breaking down barriers, and providing access to all.</p>	<p>MISSION STATEMENT</p> <p>Our mission is to train new nurse practitioners dedicated to working with diverse, underserved populations to a high-quality model of care tailored to our complex community health center setting, creating nurse practitioners that are confident, skilled primary care providers who will successfully transition to sustainable and independent practice in community health.</p>	<p>'AHA' MOMENT</p> <p>Build on what has already been done! We can learn from experienced and expert programs, collaborate with regional programs, and connect with our own internal learner programs. We are starting with a wealth of resources.</p>
<p>RECOMMENDATIONS</p> <ol style="list-style-type: none"> 1) Join the NTTAP learning collaborative. 2) Ensure you have leadership support. 3) Set up regular standing meetings with talent management, your clinical site's leadership, your advisory committee, operations, and executive leadership. It will help you get ahead of the things you did not know you needed to know. 	<p>INNOVATIONS</p> <ul style="list-style-type: none"> ⇒ Hired a Nurse Practitioner Residency Director and created an Academic Education Department ⇒ Created a vision and mission statement, identified our program drivers ⇒ Completed marketing and outreach, including creation of a website, tier, and developing relationships with regional academic institutions ⇒ Created an application process and completed our first application cycle ⇒ Interviewed, selected, and finalized our first residency class ⇒ Created a job description, employment contract, and compensation and benefits package ⇒ Recruiting preceptors and developing curriculum 	<p>KEY PARTNERS</p> <p>Internal: Renton staff, residents, residency program faculty, residency advisory committee, academic education department, executive leadership team</p> <p>External: Renton community, our patients, our regional FNP academic programs, NW Cape</p>
<p>VOICE OF THE TEAM</p> <p>"The NP Residency Program plays a significant role in our workforce pipeline. We believe residency programs help new practitioners become confident providers that gain the skills to work in community health. NPs provide invaluable health care services to our communities, and I believe the residency program helps our overall mission to provide high-quality care to all who need it." - Crystal Berry, Operations Director of Academic Education Programs</p>	<p>VOICE OF LEADERSHIP</p> <p>"The Nurse Practitioner residency is an exciting addition to our educational programs at HealthPoint. The Nurse Practitioner Residents will share educational time with our other clinical learners, creating a remarkable interdisciplinary experience that includes our medical students, medical residents, behavioral health interns, and practicum students. We are thrilled to welcome this new program and these new graduates into our HealthPoint Family." - Ruth Michaelis, Clinical Director of Academic Education</p>	<p>PROGRAM DRIVERS</p> <ul style="list-style-type: none"> ⇒ Support recruitment ⇒ Support onboarding ⇒ Support retention ⇒ Provide opportunity for professional growth for current staff ⇒ Advance provider training ⇒ Advance the CHC movement ⇒ Help our patients
<p>MEASURES</p> <p>Findings of Effects of Completing a Postgraduate Residency or Fellowship Program on Primary Care Nurse Practitioners' Transition to Practice by Park J, Faraz Covelli A, & Pittman P. Journal of the American Association of Nurse Practitioners. 2021:</p> <ul style="list-style-type: none"> ⇒ NPs who completed a residency program were more likely to come from a minority background and more likely to see underserved populations ⇒ Residency graduates are more likely to report greater confidence in independent roles, greater practice autonomy, improved team collaboration, increased job satisfaction, and decreased intent to leave 	<p>CORE PROGRAM ELEMENTS</p> <p>Our program and curriculum are designed to support recent graduates in successfully transitioning to sustainable, independent practice in community health settings.</p> <p>Our program consists of:</p> <ul style="list-style-type: none"> ⇒ Continuity clinic ⇒ Mentored clinic ⇒ Specialty rotations ⇒ Didactics ⇒ Sustainability focus ⇒ Project ECHO ⇒ Independent project 	

NTTAP Contact Information

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REMINDER: Complete evaluation in the poll!

Upcoming Coach Calls: Tuesday April 23rd & May 7th

Next Learning Session is **Tuesday May 14th!**

Explore more resources!

National Learning Library: Resources for Clinical Workforce Development

National Learning Library



CHC has curated a series of resources, including webinars to support your health center through education, assistance and training.

[Learn More](#)



CLINICAL WORKFORCE DEVELOPMENT

Transforming Teams, Training the Next Generation

The National Training and Technical Assistance Cooperative Agreements (NCAs) provide free training and technical assistance that is data driven, cutting edge and focused on quality and operational improvement to support health centers and look-alikes. Community Health Center, Inc. (CHC, Inc.) and its Weitzman Institute specialize in providing education and training to interested health centers in Transforming Teams and Training the Next Generation through:

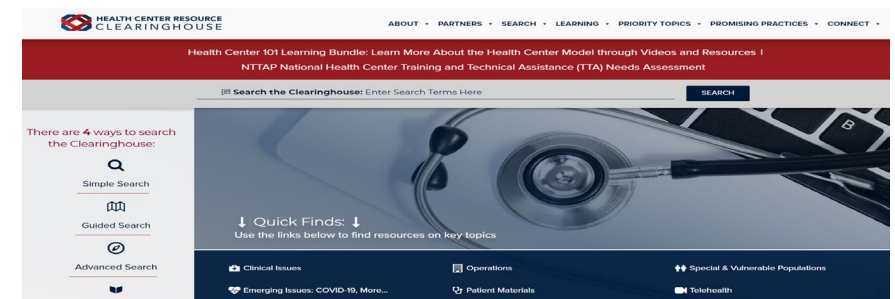
National Webinars on advancing team based care, implementing post-graduate residency training programs, and health professions student training in FQHCs.

Invited participation in Learning Collaboratives to advance team based care or implement a post-graduate residency training program at your health center.

Please keep watching this space for information on future sessions. To request technical assistance from our NCA, please email NCA@chc1.com for more information.

<https://www.weitzmaninstitute.org/ncaresources>

Health Center Resource Clearinghouse



<https://www.healthcenterinfo.org/>