



# Postgraduate NP and/or PA Training Programs Learning Collaborative

Session Two: Tuesday November 12<sup>th</sup>, 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 2 Agenda

- 1:00-1:05pm Introduction
- 1:05-1:30pm Overview of Program Structure & Key Program Staff and Responsibilities
- 1:30-2:20pm Value of Academic Clinical Partnerships
- 2:20-2:25pm Using the Progress Checklist
- 2:25-2:30pm Q/A, Wrap-Up, Evaluation

# Learning Collaborative Faculty

Margaret Flinter, APRN, PhD, FAAN

- Co-PI, NTTAP
- CHCI's Senior Vice President/Clinical Director
- Founder of America's first nurse practitioner residency program

Kerry Bamrick, MBA

- Executive Director, Consortium for Advanced Practice Providers
- Coach Mentor

Charise Corsino, MA

- Program Director, CHCI Postgraduate NP Residency Program
- Coach Mentor

Amanda Schiessl, MPP

- Chief of Staff, MWHS
- Co-PI & Project Director, NTTAP

Meaghan Angers

- Senior Program Manager, NTTAP

Bianca Flowers

- Program Manager, NTTAP



**MORE THAN  
WHAT WE DO.  
IT'S WHO WE  
DO IT FOR.**

We are a first-of-our-kind system of affiliates brought together by a common goal: To solve health inequity for the most underserved communities among us. Through primary care, education and policy, we've already bridged the gap for over 5 million people. And we're just getting started.



Learn More at [mwhs1.com](http://mwhs1.com)



## MOSES/WEITZMAN Health System

Always groundbreaking. Always grounded.

### Community Health Center, Inc.

A leading Federally Qualified Health Center based in Connecticut.

### ConferMED

A national eConsult platform improving patient access to specialty care.

### The Consortium for Advanced Practice Providers

A membership, education, advocacy, and accreditation organization for APP postgraduate training.

### National Institute for Medical Assistant Advancement

An accredited educational institution that trains medical assistants for a career in team-based care environments.

### The Weitzman Institute

A center for innovative research, education, and policy.

### Center for Key Populations

A health program with international reach, focused on the most vulnerable among us.

# Locations & Service Sites

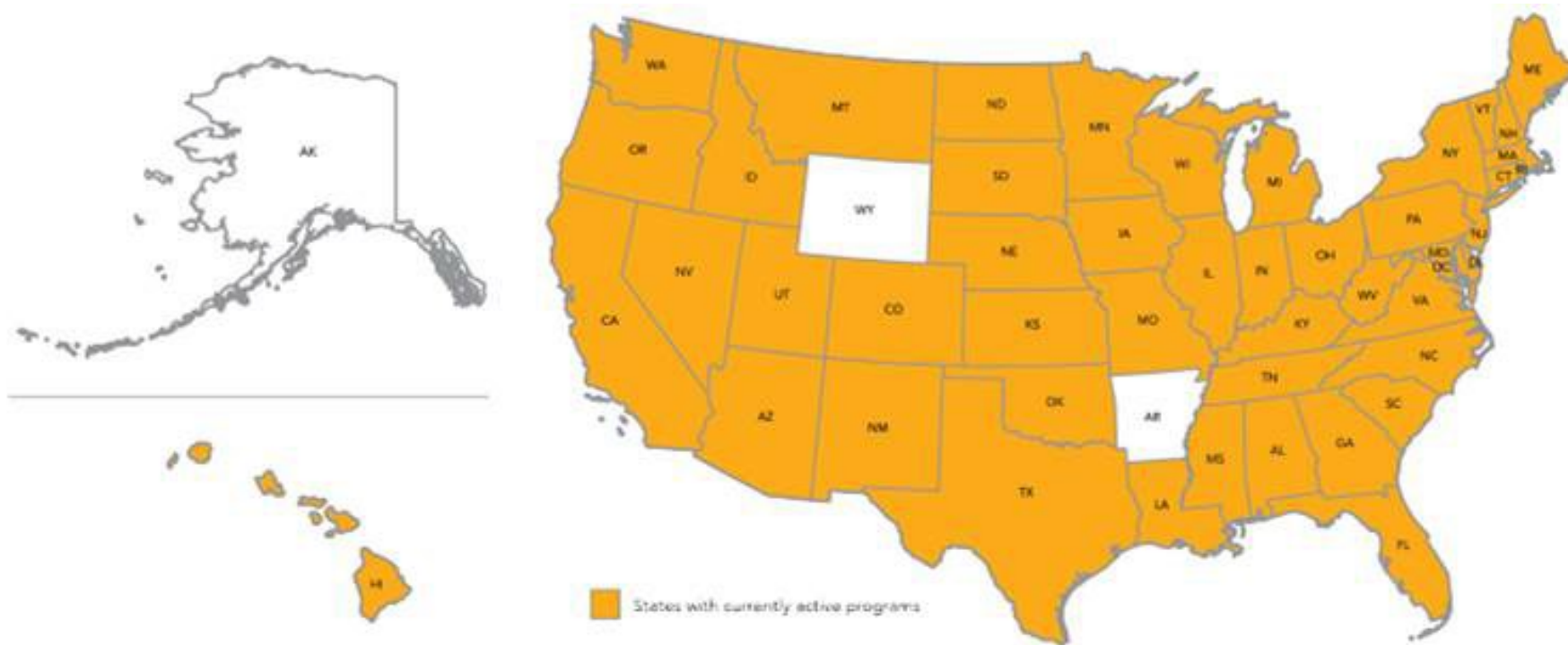


## Profile

- Founded: **May 1, 1972**
- Staff: **1,400**
- Active Patients: **150,000**
- Patients CY: **107,225**
- SBHCs across CT: **152**

Year	2021	2022	2023
Patients Seen	99,598	102,275	107,225

# Primary Care, Psychiatric/MH and Specialty Postgraduate Training Programs – Total: 548 Programs Nationally





# National Training and Technical Assistance Partners (NTTAP) 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 60-minute calls between coach mentors and team coach
- Internal team workgroup meetings
- Access resources via the [Weitzman Education Platform](#)
- Use [Google Drive](#) to share your work

Learning Session Dates	
Learning Session 1	Tuesday October 8 <sup>th</sup>
Learning Session 2	Tuesday November 12 <sup>th</sup>
Learning Session 3	Tuesday December 10 <sup>th</sup>
Learning Session 4	Tuesday January 14 <sup>th</sup>
Learning Session 5	Tuesday February 11 <sup>th</sup>
Learning Session 6	Tuesday March 11 <sup>th</sup>

## 2024-2025 Cohort

Alivio Medical Center	Chicago, Illinois
Arkansas Primary Care Association	North Little Rock, Arkansas
Blue Ridge Community Health Services, Inc.	Hendersonville, North Carolina
Brockton Neighborhood Health Center, Inc.	Brockton, Massachusetts
Children's Primary Care Medical Group	San Diego, California
Esperanza Health Center	Philadelphia, Pennsylvania
Family Health Centers of San Diego	San Diego, California
Greater Philadelphia Health Action, Inc.	Philadelphia, Pennsylvania
Indian Health Service Headquarters	Rockville, Maryland
Marin Community Clinic	Novato, California
ND Systems Inc.	Fairbanks, Alaska
Ozark TriCounty Healthcare Consortium dba ACCESS Family Care	Neosho, Missouri
Tennessee Primary Care Association	Nashville, Tennessee
Umpqua Community Health Center dba Aviva Health	Roseburg, Oregon

# Overview of Program Structure & Key Program Staff and Responsibilities

# Core Elements of Postgraduate NP/PA Residency Program

<p>12 Months Full-time Employment</p>	<p>Training to Clinical Complexity and High Performance Model of Care</p> <p>Team-based care Integrated care Inter-professional collaboration</p> <p>Data driven QI Expert use of technology Primary care innovations</p>	<p>Full Integration at Organization</p>
<p>Clinical Based Training Experiences (80% of time)</p>		<p>Education (20% of time)</p>
<ul style="list-style-type: none"> <li>• <b>Precepted Continuity Clinics</b> (40%); Develop and manage a panel of patients with the exclusive and dedicated attention of an expert preceptor.</li> <li>• <b>Specialty Rotations</b> (20%); Experience in core specialty areas most commonly encountered in primary care focused on building critical skills and knowledge for primary care practice.</li> <li>• <b>Mentored Clinics</b> (20%); Focused on diversity of chief complaints, efficiency, and acute care working within a variety of primary care teams.</li> </ul>		<ul style="list-style-type: none"> <li>• <b>Didactic Education</b> - High volume and burden topics most commonly seen in primary care.</li> <li>• <b>Project ECHO</b> – Case-based distance learning in high complexity issues like chronic pain, treating HIV, Hepatitis C, and MOUD</li> <li>• <b>Quality Improvement Training</b> - Training to a high performance QI model, including frontline process improvement, collecting and reviewing data, and leadership development</li> </ul>



# CHCI's Program Schedule - Week

	Monday	Tuesday	Wednesday	Thursday	Friday
	3	4	5	6	7
AM	Mentored Clinic	Specialty Rotation Dermatology	Precepted Clinic (Preceptor #1)	9-11 Evaluations 11-1 Pain ECHO	Precepted Clinic (Preceptor #3)
PM	Mentored Clinic	Dermatology	Precepted Clinic (Preceptor #2)	2-5 Didactic Pre-op Physical	Precepted Clinic (Preceptor #4)



# CHCI's Program Schedule - Month

October					
	Specialty/Mentored	Specialty/Mentored	Precepted Clinic	Didactic/Admin	Precepted Clinic
	Monday	Tuesday	Wednesday	Thursday	Friday
	3	4	5	6	7
AM	Mentored Clinic	Specialty Rotation Dermatology	Precepted Clinic (Preceptor #1)	9-11 Evaluations 11-1 Pain ECHO	Precepted Clinic (Preceptor #3)
PM	Mentored Clinic	Dermatology	Precepted Clinic (Preceptor #2)	2-5 Didactic Pre-op Physical	Precepted Clinic (Preceptor #4)
	10	11	12	13	14
AM	Mentored Clinic	Specialty Rotation Dermatology	Precepted Clinic (Preceptor #1)	9-11 Evaluations	Precepted Clinic (Preceptor #3)
PM	Mentored Clinic	Dermatology	Precepted Clinic (Preceptor #2)	12-1:30 QI Seminar 2-5 Didactic Ped Growth and Development	Precepted Clinic (Preceptor #4)
	17	18	19	20	21
AM	Mentored Clinic	Specialty Rotation Dermatology	Precepted Clinic (Preceptor #1)	9-10:30 Program Meeting 11-1 Pain ECHO	Precepted Clinic (Preceptor #3)
PM	Mentored Clinic	Dermatology	Precepted Clinic (Preceptor #2)	2-5 Didactic Suturing	Precepted Clinic (Preceptor #4)
	24	25	26	27	28
AM	Mentored Clinic	Specialty Rotation Dermatology	Precepted Clinic (Chief Preceptor)	9-11 Evaluations	Precepted Clinic (Preceptor #3)
PM	Mentored Clinic	Dermatology	Precepted Clinic (Chief Preceptor)	12-1:30 QI Seminar 2-5 Didactic Diabetes	Precepted Clinic (Preceptor #4)

# Key Program Staff and Responsibilities

## Administrative – Program Coordinator/Manager

### Responsibilities

Responsible for the oversight of the administration of the program. Manage day to day implementation and logistics of the program, as well as troubleshoot issues.

### Skills

Organized and detail oriented

Knows organization

Experience and/or training in program management

### Suggested Time Commitment

Dependent on size of the program – could be combined with other job role

Starting out –  
2 to 3 trainees-  
.4 to .5 FTE

# Key Program Staff and Responsibilities

## Clinical – Clinical Program Director or NP or PA Lead

### Responsibilities

Responsible for the clinical oversight of the program including curriculum development and delivery

### Skills

Trained in clinical discipline of the program

Commitment to training

Understanding of clinical delivery of care in area of training

### Suggested Time Commitment

Dependent on size of the program

On average: 2 to 3 trainees  
- .2 to .4 FTE



# Key Program Staff and Responsibilities

## Clinical – Preceptors

### Responsibilities

Responsible for  
direct training  
and supervision  
of trainees

### Skills

Expert provider  
in their discipline

Commitment to  
training

### Suggested Time Commitment

Postgraduate  
Training  
Program  
– 4 to 8 hours  
per week

# Specific Roles and Responsibilities (timing)

Early Months (September through January)  
(or at Stage of 1-2 patients per hour):

**The preceptor should see all patients with the postgraduate trainees initially, for the first few weeks (3-4 weeks)**

- After the first few weeks, the preceptor should see the patient at some point during the visit, observing and repeating physical exams and relevant history taking, as needed
- Provide guidance and instructions on all aspects of the patient visit, including charting, the verbal presentation and the written note
- Create an addendum in the patient's progress notes or co-sign the note after the postgraduate trainee has completed the note.

# Specific Roles and Responsibilities (timing)

## Later Months (February through August)

- Reassess the postgraduate trainees' comfort and mastery with clinical decision-making, physical exams, concise history taking and develop a precepting plan that meets the needs of the trainee
- Help with time management and efficient practice skills in an ongoing fashion
- Review all cases and repeat/observe history and physical exams, as needed
- Provide guidance and instruction on all aspects of the patient visit (review entire written note and provide feedback as indicated)
- Create an addendum or co-sign the patient's progress note after the postgraduate trainees have completed the note
- As the postgraduate trainees become more skilled, the preceptor should become more focused on guidance with time management, practice and panel management

# Questions?



# Value of Academic Clinical Partnerships

# Polling Question

*Do you have existing academic partners  
or an academic partner in mind?*

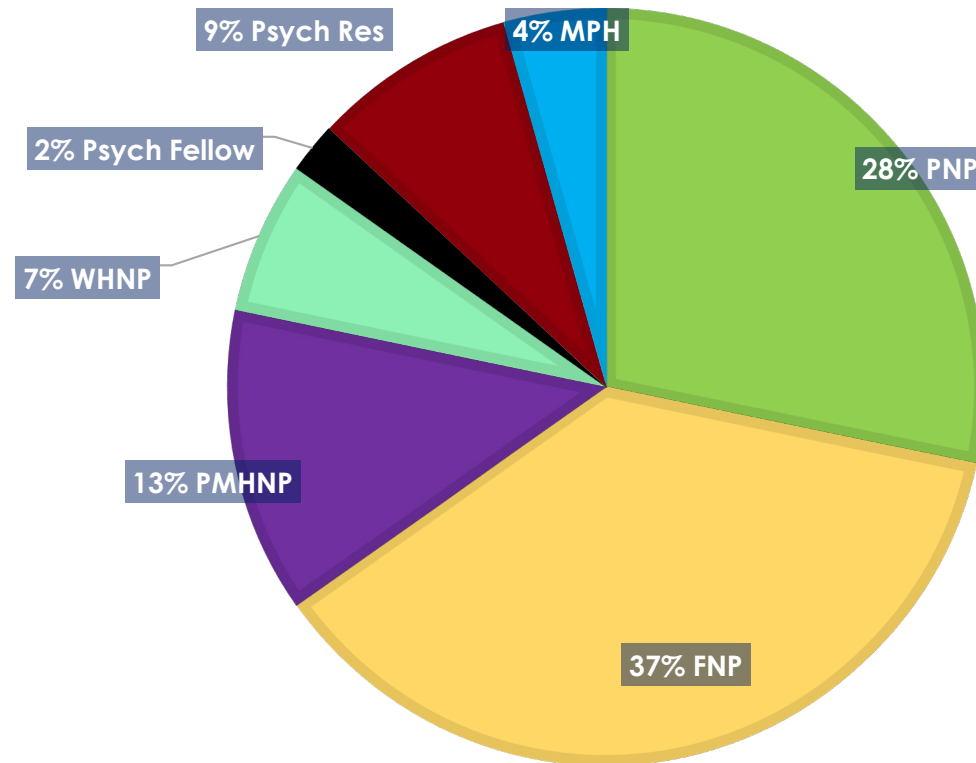
# History of Partnership

- Margaret Flinter, CHC's Sr. VP and Clinical Director and YSN trained FNP joined CHC in 1980 as CHC's first NP.
- She took her first YSN student in 1981 and CHC has had YSN students ever since
- Currently take placements for both RN and NP students – started with just NP students but have expanded to include all specialties
- Many CHC NP providers are YSN alumni and some hold faculty appointments
- About a third of CHC NP residents have historically come from YSN including the first cohort which included 3 of our 4 residents
- YSN has always served as a trusted partner for consultation and discussions around issues concerning trainees, students, and other timely topics related to clinical workforce.

# Yale University Student & Trainee Placements

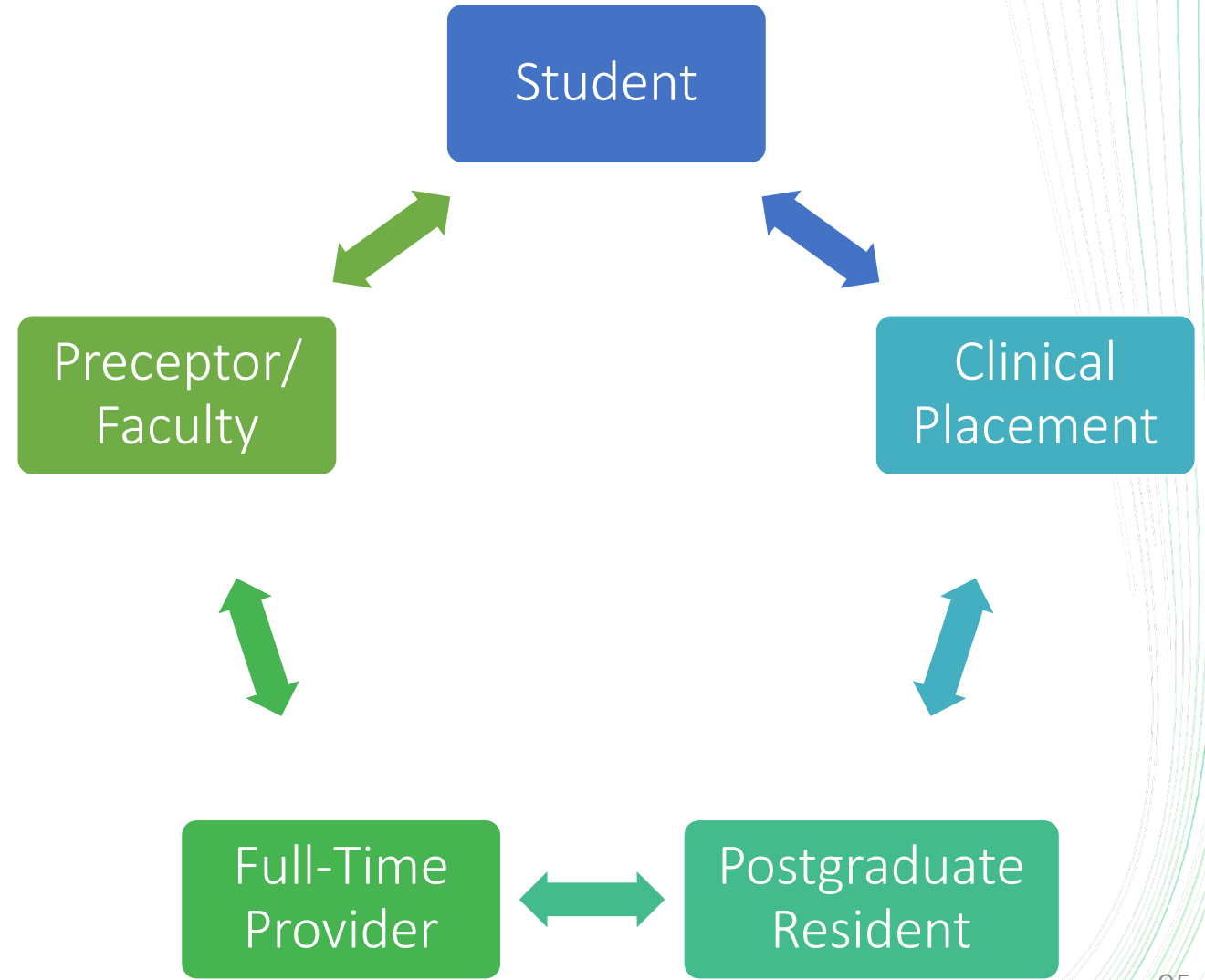
**Total Number of Students for 2023: 46**

- Opportunity to get clinical experiences and exposure to community health
- Pathway – rotation to residency
- 26% of trainees completed 2 or more clinical rotations at CHC



Trainee	Number
PNP	13
FNP	17
PMHNP	6
WHNP	3
Psychiatry Fellow	1
Psychiatry Resident	4
MPH Intern	2

# Developing a Clinical Workforce





# Developing a Formal Partnership

- **Funding Opportunities and Grant Partnership**
  - 2019 HRSA released the ANE-NPR grant-funding
    - Formal Clinical-Academic partnership required - CHC and YSN formally partnered
  - 2020 HRSA released second round of funding
    - ANE-NPRIP – CHC and YSN built upon their current partnership
  - 2023 HRSA ANE-NPRF funding released
    - CHC and YSN continued well-established partnership

# Process of the Partnership

- **Key Piece:** Need someone identified from the school that is the champion; and then 1-2 identified from the health center
- NP Program Director and Key Academic Clinical Partnership meet regularly to update on each “world” – academic and residency program
  - Collaboration of resources
  - Consistent Meetings
  - Identifying a champion
- Evolution over time / sustainability

# Updates on Trends in Graduate NP Education

- Updated National Task Force (NTF) standards requiring increases in all NP program clinical hours requirements to 750 hours.
- Focus in increasing diversity of NP workforce and faculty and strengthening DEIB content in curriculum
- Move toward competency based education for all specialties

## Collaboration: Simulation

- Needs Assessment through CHCI determined more geriatric focused training and we were also expanding our geriatric training
- Wanted to integrate for simulation based experiences into the residency program
- Yale helped facilitate for the first time, so CHCI trainers could be trained
- Yale was able share these resources and technical support with CHCI and implement a new model of training for their residents

# Collaboration: Developing New Programs

- Specialty rotations: Helpful to consult with academic program
- Used resources from the university for content and curriculum
- Example: Adult Gero Program
  - Yale shared resources with CHCI to help develop this program
  - Professor/faculty came to speak
- Example: Psych Program



# Value of the Academic Clinical Partnership

## For Residency Program:

- Having understanding of upcoming academic classes
  - Current trends in academic education and graduate needs
  - Insights to potential applicants

## For Academic Partnership:

- Knowledge in residency program to share with students
  - What residency curriculum looks like?
  - What they look for in students?
  - What does application and interview process look like?
  - What relevant experience does the student need (i.e. volunteer roles)?
  - Access to clinical resources

Creates seamless transition from student to graduate to resident

# Strengthening Postgraduate NP/PA Residency Programs through Academic, Clinical, & Community Partnerships Webinar

- [Slides](#) | [Video](#)
- Join us to explore the essential components of successful primary care nurse practitioner/physician associate (NP/PA) residency programs, including program structure and the value of academic, clinical, and community partnerships. Along with experts from CHC, this webinar will include a health center spotlight on successfully implementing a residency program with strong partnerships. By the end, participants will have a clear understanding of how to build effective, sustainable NP/PA residency programs and enhance clinical workforce development.

# ***The Academic Clinical Partnership for NP Residencies***

Jill M. Terrien PhD, ANP-BC



---

Tan Chingfen  
Graduate School  
of Nursing

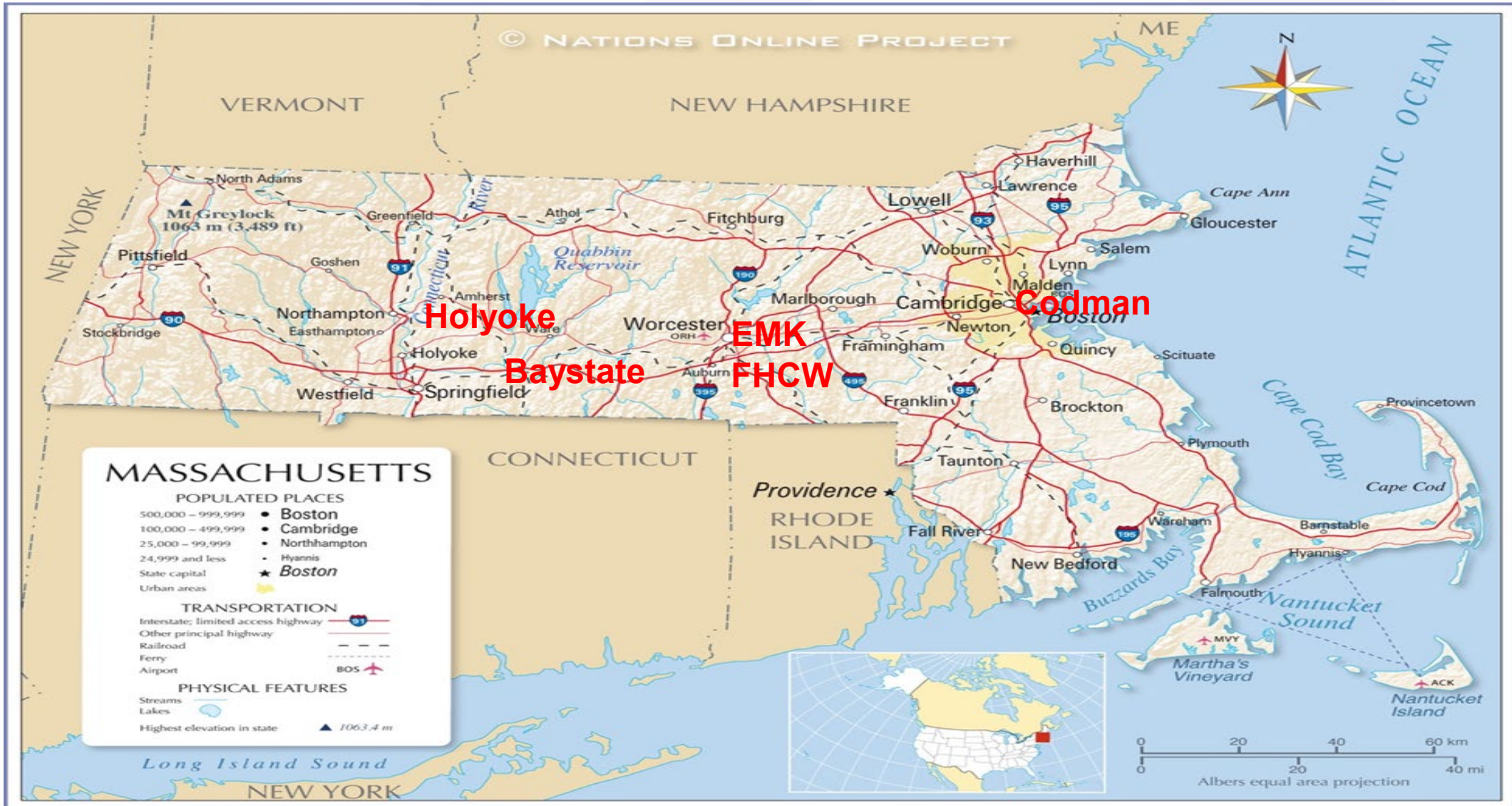
# Objectives

- Describe the academic partner role
- How to recruit an academic partner
- Contributions and value of the academic partner

# Massachusetts Community Health NP Residency – One Academic Partner model

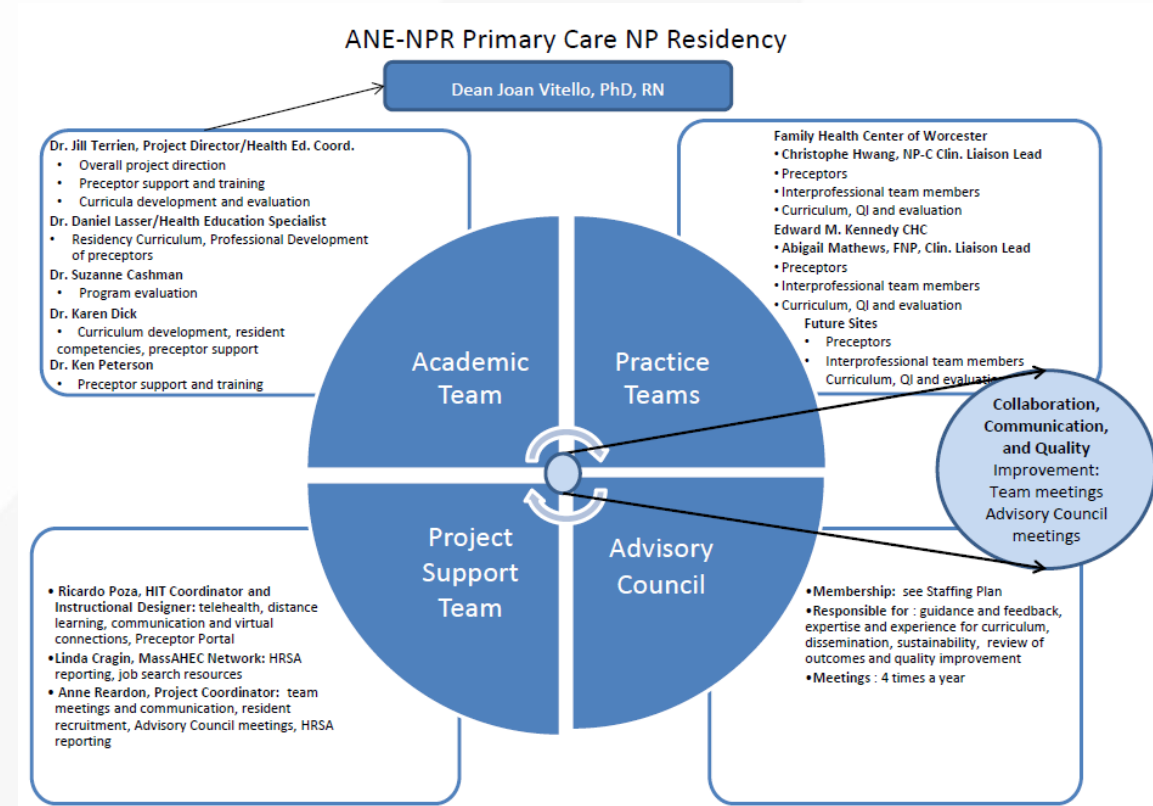
- Family Health Center (FQHC) had a FNP residency since 2009
  - approached GSN with another local FQHC to lead grant
  - 3 additional CHC partners identified
- What is in it for the GSN?
  - Continues public service mission through partnerships
  - Future preceptors for GSN students
  - Possible future students and educators
  - Collaboration and support





# Structure

- Shared leadership/equal partners
  - outlined in the grant application's org chart – no hierarchy, clear roles
  - productive, documented monthly team (Advisory Council) meetings
  - shared decision making/problem solving
  - Residency directors (Clinical Liaisons) have their own meetings, responsible for certain tasks (e.g., recruitment/hiring of NP residents)



# A Theme: Sustainability

- GSN is a partner, not the expert, not a crutch... continually ask, how is this sustained post grant funding?
- Centrally developed/site approved policies and procedures
- Shared commitment to didactics
  - Monthly case presentations by residency directors
    - Came from resident feedback sessions with the GSN-we learned along the way
    - Allows residency directors to get to know other residents
    - Primary Care 101 series development (2019-2023), continued 2023-2027
  - Each site contributes sessions (local expertise or outside organization like New England AIDS Education and Training Center, Mass DPH)
  - Commitment to wellness – Balint sessions and TEND (external/safe) sessions

# Resident relations

## Academic team gets to know residents

- Host didactic sessions, some procedural on-site education
- 4x a year resident feedback sessions to project manager and evaluator
- In-person hike beginning of residency
- Focus on Wellness

## Grant requirement – job hunting assistance

- But - we want them to stay! (employment post residency is a consideration)
- Annual session on:
  - CV development and grant citation for their CV
  - Some job search resources... more info on loan repayment



# Value of the Academic Partner & Identifying one

## Contributions

- Didactic sessions
- Ongoing evaluation
- Support/troubleshooting
- Simulation, Opioid Curriculum
- Advisory board-8 mtgs/yr

## Preceptor support

- Faculty appointments
- Preceptor CE
- Teaching of Tomorrow
- New England Precepting Academy (HRSA Grant)
- Access to medical library

## Affiliating w/an academic partner

- Are your NP's/PA's (employees) from a local university?
- Do NP/PA students precept with you?
- Who appeals to you?
- Establishing a pipeline



# 2023 Graduation



# Discussion and Questions

# Using the Progress Checklist



# Purpose of the Progress Checklist

- 1) To help you track your progress
- 2) To help us identify where you need more help
- 3) To help your coaches identify areas in which you need more encouragement and reminders

Team name:	Date:				
What is your team's progress on implementing the following?					
	Have not started	Started working on it	Working on it	Making progress	Completed
	1	2	3	4	5
GENERAL					
Define goals and develop a shared aim. Example: Improvement of workforce development.					
Define specific, measurable outcomes and objectives.					
Ensure that each team member is competent to perform their defined and delegated functions and tasks. Example: Provide education and support for staff providing involved in didactic, clinical, and supervision activities for residents.					



## What To Do

- ❖ Can be completed during a team meeting or the coach can complete it separately based on conversations with the team members
- ❖ Just check the box or color it in
- ❖ Complete this throughout the learning collaborative to help you understand remaining steps post-learning collaborative!

# Questions?

# Assignments

- ✓ Continue to develop a draft presentation for leadership/board and present if possible
- ✓ List core program elements
- ✓ Begin Progress Checklist

**Access the Google Drive to upload deliverables:**



## Next Steps

- **Coach Calls**
  - Tuesday November 19<sup>th</sup> 1:00pm Eastern / 10:00am Pacific
  - Tuesday December 3<sup>rd</sup> 1:00pm Eastern / 10:00am Pacific
- **Session 3:** Tuesday December 10<sup>th</sup> 1:00pm Eastern / 10:00am Pacific
  - Finances/Sustainability/ROI, Marketing/Recruitment/Applications, Contracts and Agreements, Program Policies and Procedures
- Register for the [Weitzman Education Platform](#) to receive CME, resources, and more!



# Wrap-Up



# 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](#)

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



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](mailto:NCA@chc1.com) for more information.

## Health Center Resource Clearinghouse



[HEALTH CENTER RESOURCE CLEARINGHOUSE](#) [ABOUT](#) [PARTNERS](#) [SEARCH](#) [LEARNING](#) [PRIORITY TOPICS](#) [PROMISING PRACTICES](#) [CONNECT](#)

Health Center 101 Learning Bundle: Learn More About the Health Center Model through Videos and Resources |  
 NTTAP National Health Center Training and Technical Assistance (TTA) Needs Assessment

Search the Clearinghouse: Enter Search Terms Here

SEARCH

There are 4 ways to search the Clearinghouse:

- [Simple Search](#)
- [Guided Search](#)
- [Advanced Search](#)

Quick Finds: Use the links below to find resources on key topics

- [Clinical Issues](#)
- [Operations](#)
- [Special & Vulnerable Populations](#)
- [Emerging Issues: COVID-19, More...](#)
- [Patient Materials](#)
- [Telehealth](#)

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

## Contact Us!

**Amanda Schiessl**

*Program Director/Co-PI*

[Amanda@mwhs1.com](mailto:Amanda@mwhs1.com)

**Meaghan Angers**

*Senior Program Manager*

[angersm@mwhs1.com](mailto:angersm@mwhs1.com)

**Bianca Flowers**

*Program Manager*

[flowerb@mwhs1.com](mailto:flowerb@mwhs1.com)

**REMINDER:** Complete evaluation in the poll!

Next Learning Session is **Tuesday December 10<sup>th</sup>**!