



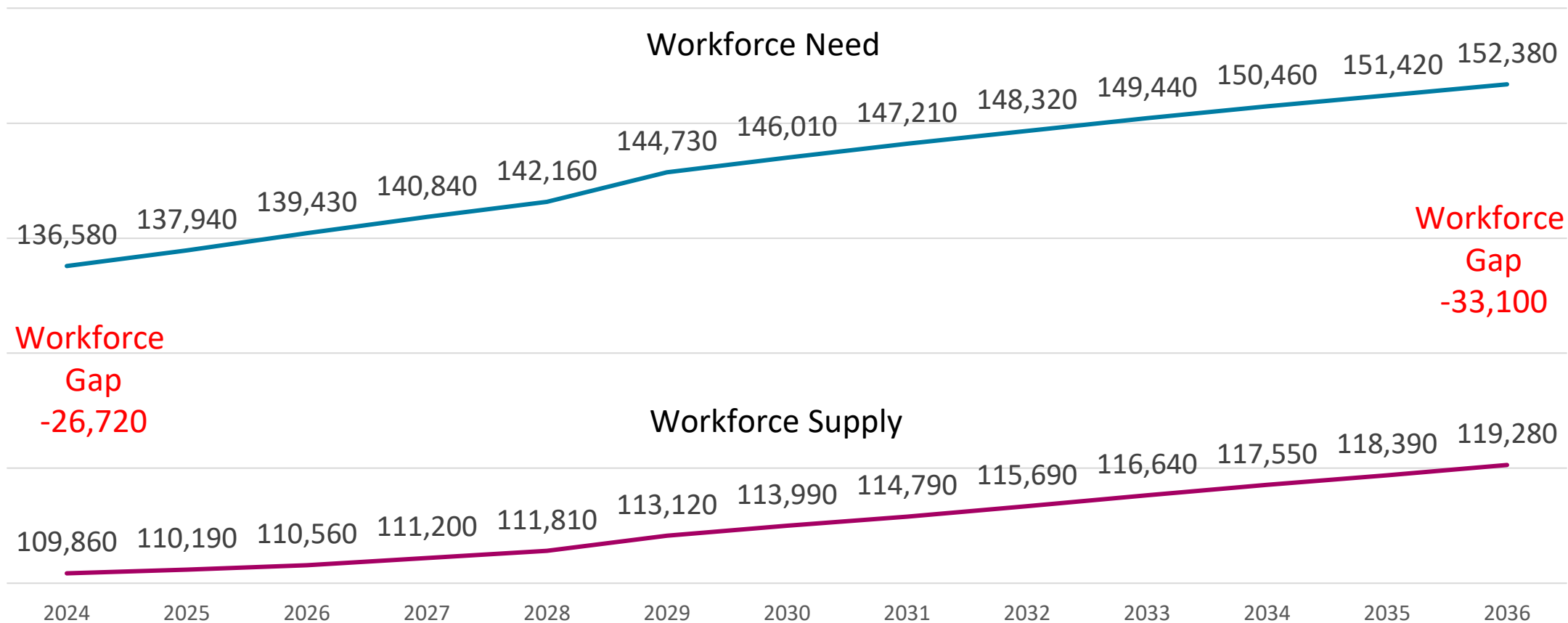
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2024 National Academies Standing Committee on Primary Care



Workforce Challenge and Opportunity

SUPPLY \neq DEMAND



Source: HRSA, Health Workforce Projections. Available at <https://bhw.hrsa.gov/data-research/review-health-workforce-research>

Community Based Training Models

Overall percentage of training within health centers increased from 5% to 12% from 2018-2023

Nurse Practitioner Residency and Fellowship Training Program

- Community Health Center, Inc. (CT)
- HealthPoint (WA)

Physician Assistants

- Central Coast Physician Assistant Program – (CA)
- Partnership with A.T. Still University

Dental Assistants

- Michigan PCA- “Federally Registered Apprenticeships for Health Center Dental Assistant Training” Program
- HealthLinc -DAprogram leveraging the state’s Employer Training Grant (IN)

Medical Assistants

- California PCA- Medical Assistant+ Program
- La Clinica de La Raza (CA)
- Sea Mar CHC, Inc. (WA)

Clinical Pharmacists

- Sun Life Health, (AZ)

Teaching Health Center GME

Currently AY24-25

- Training programs in 29 States supporting 1,212 resident FTEs
- 10 new awards issued to community-based organizations this month that grow the program by 37 FTE
- 83 more Planning & Development awardee organizations are in the pipeline at various stages of readiness

During AY2018-2023:

- THCGME residents treated nearly 3.9 million patients through 6.1 million patient encounters. They also provided nearly 4.7 million hours of care in medically underserved communities and over 1.1 million hours of care in rural areas.
- Follow-up of graduates from the past five years showed that the majority of THCGME graduates (85%) are currently working in a medically underserved community and 13% are working in a rural area.
- Graduates with rural backgrounds were significantly more likely to work in rural areas compared with those who were not from rural backgrounds (31% vs. 15%). Graduates from disadvantaged backgrounds were significantly more likely to work in a medically underserved community and/or rural area compared with those who were not disadvantaged (65% vs. 53%).

Since inception in 2011,

- 2,237 new physicians and 131 new dentists entered the workforce.

During the span of the program:

- THCGME reduced primary care provider shortages by an estimated 2% nationally. Pediatrics and family medicine specialties saw larger estimated shortage reductions (9% and 4%, respectively).

Nurse Practitioner Residency and Fellowship Program

HRSA awarded a total of \$30,008,851 in FY 2023 to 45 grantees to increase the number of trained advanced practice nurses in primary care.

- Congressional appropriations preference for FQHCs
- Community based training focus
- Linkages to NHSC (NP Residency and THCGME program)

AY 2022-2023 Graduates

- 71% employed or practicing in a Medically Underserved Area
- 73% employed or practicing in a Primary Care Setting
- 32% employed at NHSC-approved site
- 54% employed at an FQHC or Look-Alike

Health Center-Driven Workforce Development

Identify gaps in training models

Demonstrate successes of HCDWD models:

- Improved access of care
- Improved quality of care
- Increased retention and recruitment



Science



Education

Tailor T/TA based on assessment findings

- ROI and the financing needed to assure sustainability
- Development of clinical preceptor curriculums

Assess the costs of teaching learners in health centers

C-Suite targeted trainings focused on roadmap to HCDWD, including ROI

Incorporation of AI tools into clinical workflows



Practice



Policy

Incorporate VBC delivery as key training component

Support policy agenda that address enhance HCDWD expansion

- Continue advocacy for the Bipartisan Health Care Workforce Innovation Act
- Develop legislative agenda to advocate for state and federal HCDWD efforts, including Title 3, 7 and 8 programs
- Dr. Lorna Breen Act

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