REPORT OF THE VIRGINIA DEPARTMENT OF HEALTH

STATUS OF RECRUITMENT AND RETENTION ACTIVITIES IN THE COMMONWEALTH FOR 1994

TO THE GOVERNOR AND THE GENERAL ASSEMBLY OF VIRGINIA



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George Allen Governor Office of the Governor

Kay Coles James Secretary of Health and Human Resources

May 31, 1995

TO: The Honorable George Allen

and

The General Assembly of Virginia

The report contained herein is pursuant to Senate Joint Resolution 113, agreed to by the 1994 General Assembly.

This report constitutes the response of the Virginia Department of Health to establish an Office of Health Professions Recruitment and Retention and to report annually on the status of recruitment and retention activities in the Commonwealth.

Respectfully Submitted,

Kay Coles James

Secretary of Health and Human Resources

STATUS OF RECRUITMENT AND RETENTION ACTIVITIES IN THE COMMONWEALTH FOR 1994 In Response to Senate Joint Resolution 113

The Governor and the General Assembly have recognized that there are shortages of primary care providers, as well as provider maldistribution problems, that hinder access to primary health care in many areas of Virginia. Many initiatives have been undertaken to address the causes of shortages and maldistribution in an effort to improve access to health care.

The 1994 General Assembly passed Senate Joint Resolution 113 which requested the Commissioner of Health to establish an Office of Health Professions Recruitment and Retention and to report annually on the status of recruitment and retention activities in the Commonwealth. In response to the Resolution, the following is a report on recruitment and retention activities that are occurring in the state.

☐ Primary Care Cooperative Agreement

The Commonwealth has entered into a Cooperative Agreement with the federal government to address primary health care planning and manpower services issues. The Agreement provides funding for the Commonwealth to focus activities on improving access to health care and improving the quality of health care for medically underserved people. One activity area centers around recruitment and retention of primary care providers. In relation to this, the Virginia Department of Health Office of Primary Care Development administers the Virginia Medical Scholarship and National Health Service Corps-Virginia Loan Repayment Programs. In addition, the Office ensures that local health departments, hospitals, community/migrant health centers, and private health care providers are informed of potential providers and activities related to practice assistance.

□ Virginia Medical Scholarship Program

The Virginia Department of Health (VDH) administers the Virginia Medical Scholarship Program which awards scholarships to medical students and first-year residents who choose primary care as their practice specialty. Scholarship recipients agree to practice in medically underserved areas in Virginia one year for each year they receive an award. Since VDH assumed the responsibility of administering the program in Fiscal Year (FY) 1990-1991, scholarships have been awarded to 64 recipients. Recipients received one or more \$10,000 scholarships between 1990 and 1995. The awards amount to 147 years of medical practice in Virginia's medically underserved areas. Two recipients are currently practicing in underserved areas and five will begin practicing in 1995. In addition to these recipients, there are many others who were awarded scholarships prior to FY 90-91, several of which are currently fulfilling their practice obligation in the Commonwealth.

☐ Virginia Nurse Practitioner/Nurse Midwife Scholarship Program

The Mary Marshall Nurse Practitioner/Nurse Midwife Scholarship Program was established by the General Assembly in 1993. Five \$5,000 scholarships have been available each year since the program began. The program has been in place for two years and ten scholarships have been awarded to nine recipients; one recipient received scholarships both years. Recipients agree to practice in a Virginia medically underserved area one year for each year an award is received. To date, the awards amount to ten years of practice obligation in underserved areas.

□ National Health Service Corps-Virginia Loan Repayment Program

The National Health Service Corps-Virginia Loan Repayment Program is administered by the Virginia Department of Health. The grant requires that the state match the award. For Fiscal Year 1993-94, the program received a total of \$100,000 from federal and state funds. Two physicians are currently participating in the program. It is anticipated that the number of participants will increase as a result of program marketing.

☐ Physician Loan Repayment Program

The 1994 Virginia General Assembly established its own physician loan repayment program through Senate Bill 409. The program is aimed at graduates of medical schools who specialize in the primary care areas of family medicine, general internal medicine, general pediatrics and obstetrics/gynecology. The recipient must agree to practice in a Virginia medically underserved area. Funds have not been appropriated for the implementation of the program.

☐ Virginia Practice Sights Initiative

Subsequent to the 1994 General Assembly Session, the Commonwealth received a three-year grant from the Robert Wood Johnson Foundation for implementation of a Practice Sights Initiative. The Virginia Department of Health and the Joint Commission on Health Care are the lead organizations for the Initiative. A major aspect of the Initiative is the creation of a Center for Health Professions Recruitment and Retention within the Department of Health. This is consistent with the recommendation of Senate Joint Resolution 113.

Establishment of the new Center has begun with selection of a director. Activities of the Practice Sights Initiative dovetail with many activities of the VDH Health Policy Group. Some of these activities include rural health, minority health, planning, primary health care and recruitment and retention of health care providers. The Center will serve as a coordinating body or focus for recruitment and retention of health care providers for communities with inadequate primary health care providers and services. Other public and private organizations will contribute to helping the Center implement the strategies that are focused on accomplishing the goal of the Practice Sights Initiative -- to enhance Virginia's ability to

recruit and retain primary care providers for Virginia's medically underserved areas -- by serving as members of work groups and as an advisory consortium for the work of the Center.

Current activities of the Center and Initiative include the development of a statewide management information system and provider data base, development of a community profile data base, and evaluating how existing state, federal, and private incentives can be leveraged to encourage primary care providers to practice in underserved areas. Future activities will focus on the establishment of a toll-free number for recruitment and retention purposes, evaluating certain provider collaboration and/or integrated delivery system models in targeted underserved areas and the development and implementation of public policy and strategies which will attract primary care providers to underserved areas.

☐ Virginia Generalist Initiative

The Virginia Generalist Initiative is a collaborative partnership of Virginia's three medical schools (Medical College of Virginia of Virginia Commonwealth University, University of Virginia Health Sciences Center, and the Eastern Virginia Medical School of Medical College of Hampton Roads), the State Council of Higher Education, the Area Health Education Centers, the Joint Commission of Health Care, and the Secretary of Education for the Commonwealth of Virginia. Its purpose is to increase the quality and number of generalist physicians serving the Commonwealth, particularly in rural and underserved areas.

This unique statewide collaboration, funded in part by the Robert Wood Johnson Foundation, has been underway since 1993 when the state received an 18-month planning grant for the Initiative. The six-year goal is to produce an output of 50 percent of medical students and residents in the areas of general internal medicine, family medicine and general pediatrics. The plan is being implemented in collaboration between the state legislature, a statewide executive committee, university leadership and community leaders at all levels.

The Initiative works in close cooperation with the Statewide Area Health Education Centers Program and the Virginia Practice Sights Initiative. These initiatives and programs are targeting innovative approaches for the recruitment of minority and disadvantaged students from rural and underserved communities, revamping the traditional curriculum to provide student and graduate educational experiences in community-based ambulatory settings and providing professional linkage and support to physicians in practice in underserved and rural areas throughout the state.

The Initiative calls for systematic reforms within the recruitment, education, residency training, and placement processes for persons entering careers in generalist medicine. Activities to date include the following:

The refocusing of medical admission and recruitment processes to increase the pool of potential generalists at the medical schools by targeting those under represented in primary care and those from disadvantaged and underserved backgrounds.

- ☆ Curriculum and training restructuring to expose the student to a complete perspective on the applications of clinical principles in a community-based health care setting, outside the traditional acute care setting.
- The development of an expansive network of community-based settings to provide the hands-on training necessary to expose students to state-of-the-art generalist practices.

Although implementation has only begun within the past year, some preliminary studies present the following findings:

- More than 60 percent of the Virginia family practice resident graduates from the last three years are currently practicing in Virginia.
- Of the 60 percent currently practicing in Virginia, 32 percent are practicing in medially underserved areas of the Commonwealth.

☐ Virginia Statewide Area Health Education Centers Program

The Virginia Statewide Area Health Education Centers (AHEC) Program optimizes access to quality health care through community-academic educational partnerships that emphasize primary health care in medically underserved areas. In addition to the statewide program, six community AHECs are established in different regions of the state, each associated with a medical school.

A major component of the program is to provide community-based training for health professions students. Community-based training enhances the probability that those students who participate will likely practice in rural communities and settings upon completion of their education. During 1993-94, 131 undergraduate medical students participated in community-based rotations that were supported by the community AHECs and the medical schools. The most frequent settings for this training was in private practice offices and community health centers in medically underserved and health professional shortage areas of the state. Also during 1993-94, 23 nurse practitioner students participated in community-based training; 18 of these rotations were in medically underserved and health professional shortage areas.

☐ Virginia Health Care Foundation

The Virginia Health Care Foundation encourages local health care initiatives involving publicprivate partnerships that provide access to primary care for underserved Virginians. In direct relationship to the Practice Sights Initiative's objective of developing private sector financial and programmatic incentives to encourage and support recruitment and retention efforts, the Virginia Health Care Foundation submitted a grant application to the Robert Wood Johnson Foundation to establish a Program-Related Investment Loan Fund.

If funded, the revolving loan fund will be used, in part, to 1) improve the long-term viability of community-based primary care practices in Virginia's health professional shortage areas; 2) to increase the number of primary care access points and providers; and 3) to encourage and support recruitment and retention efforts of primary care providers, including nurse practitioners and physician assistants.

☐ Virginia Primary Care Association, Inc.

The Virginia Primary Care Association is a not-for-profit membership organization serving community and migrant health centers, and similar organizations providing primary health care services to underserved populations.

Community and migrant health centers are not-for-profit, private corporations that provide comprehensive primary health care to anyone seeking care. They are established through federal Public Health Service 330 and 329 programs designed to address primary health care access needs and are located in federally designated medically underserved areas. In addition to providing primary health care services, the centers provide preventive and educational services to improve the health status of the communities served. They provide primary health care services to persons without regard to their ability to pay and include a sliding fee scale. There are 38 community health center sites in the state.

The Primary Care Association has been providing recruitment and retention assistance to community/migrant health centers for more than 14 years and has recruited more than 450 medical providers. The Association has addressed many needs of retention through the establishment of a network of ten retired/semi-retired physicians to provide locum tenens coverage for community/migrant health centers. This arrangement allows physicians to take vacations and participate in continuing medical education activities, without impacting the provision of medical services to the community. Current discussions are focusing on nurse practitioners for similar coverage arrangements.

☐ Virginia Academy of Family Physicians

The Virginia Academy of Family Physicians is a 2,100 member statewide association consisting of family physicians, family practice residents and medical students. Through the Virginia Academy of Family Physicians Foundation, the Academy has recently initiated the "Virginia First" program. The program encourages medical students to choose family practice as their specialty in sufficient numbers to meet family practice manpower needs, to select Virginia for their residency training and to establish a practice in Virginia, preferably in an underserved area.

In addition to the "Virginia First" program, the Academy is developing a physician placement program for its membership. The program will link practices that are seeking providers to providers who are seeking employment.

☐ Virginia Chapter of the American Academy of Pediatrics

The American Academy of Pediatrics is actively involved in the Community Access to Child Health (CATCH) program. The CATCH program is a grass-roots effort that has mobilized pediatric primary care providers to enhance the delivery of health care services and improve access to health care for all children. The program is supported by a grant from the Robert Wood Johnson Foundation and operates under the theory that local people can solve local problems when given the right mix of training, technical assistance, and community involvement. The Virginia Chapter is pursuing the establishment of a CATCH program in the Commonwealth which will increase access to primary health care for children who are medically underserved.

☐ Virginia Hospital Association

The Virginia Hospital Association is an alliance of hospitals and health networks. The Association strives to develop and promote programs that will enhance hospitals' and health networks' ability to provide comprehensive, efficient, quality health care to Virginians.

Although not active in the area of recruitment and retention, the Association has been active in exploring barriers to the expanded utilization of health care practitioners and has launched a study to assess and document regulatory barriers to the expanded utilization of all advanced practice health care practitioners in Virginia.

Through collaboration between the above public and private organizations, as well as others that are involved in addressing health care needs for the Commonwealth, it is anticipated that many more activities and accomplishments will take place during 1995. One of the strategies for making the Center for Health Professions a success is to link public and private organizations, which have an interest in primary health care, in an effort to retain primary care providers in the state and to attract primary care providers to the state. Although these organizations are involved in different aspects of recruitment and retention, they all are ultimately focused on improved access to health care through the elimination of medically underserved areas.