Implementing Postgraduate Residency Training for NPs and/or Clinical Psychologists in Your Health Center

Application to participate in an intensive learning collaborative designed to take your practice from commitment to implementation

2016

INTRODUCTION

The Residency Learning Collaborative is designed to help Federally Qualified Health Centers (FQHCs) develop postgraduate residency programs for new family nurse practitioners and psychiatric/mental health nurse practitioners and for doctorally-prepared clinical psychologists who have recently completed their academic program of studies. Postgraduate residency training is still a relatively new option for NPs and is completely voluntary as it is not required for licensure or certification. On the contrary, postdoctoral residency training for clinical psychologists is mandatory for licensure.

Regardless of optional vs. mandatory, an FQHC-based residency program provides these practitioners with a twelve month, intensive education and clinical training program which is geared to both clinical complexity and a high performance model of primary care that includes team based, patient centered, data driven care and as such prepares these new providers for expert practice and to contribute as a leader in their future organization.

Both types of residency programs include focus on developing and caring for a panel of patients, a didactic curriculum focused on key clinical and professional issues facing new practitioners, precepting (NPs) and supervision (psychologists) and training to quality improvement, population health, and the needs of vulnerable populations. The residency programs are one year in length, during which time the residents are employees of the health center in which they are practicing. Accreditation for postdoctoral psychology residency program is available through the APA, and available for NPs residency programs through the NNPRFTC and the ANCC.

Who should apply

The Collaborative is open to Federally Qualified Health Centers, with a preference for those that that have participated in the National Collaborative Agreement on Clinical Workforce Development series on “Implementing Postgraduate NP and Clinical Psychology Residency programs.” These webinars, delivered by faculty experts in this area, have provided the advanced curriculum for the Learning Collaborative to inform health centers in making the decision to implement such programs, including
financial, organizational, infrastructure and strategic considerations. Only Health Centers who have made a decision to pursue development and implementation of either or both of these programs should apply to the Collaborative. The Collaborative will include: regular distance learning video-conference sessions (approximately every six weeks); planning and implementation work between sessions using PDSA methodology; access to online benchmarked materials and tools; technical assistance, training and coaching from the NCA team; NCA mentors for internal practice coaches, and a national network of FQHCs who will be learning from each other while developing residency programs.

Benefits of participation

Your participation in the Learning Collaborative will involve the following:

✓ Your team will conduct a self-assessment prior to participation in the Collaborative to help you determine your readiness to develop a residency program.
✓ Your team will meet weekly at your site. Using quality improvement methods, such as aim statements and PDSA cycles, your team will use your self-assessment to identify opportunities for change, and test those changes.
✓ Your team will attend and participate in regular (approximately every 6 weeks) monthly zoom-video-conference sessions. [All sessions are recorded in the event an emergency precludes live participation.]
✓ Your organization will identify at least one individual who will provide coaching support throughout the collaborative with required time for training by the NCA.
✓ Your organization will ensure that your Learning Collaborative participants have access to the required data to guide decision making, which may involve bringing a member of your IT or BI staff into the process.
✓ You will develop a communication plan to regularly update your Board, CEO, CFO, and/or chief clinical officers regarding your project progress.
✓ Board chair and CEO will both sign the application, and will commit to attend by videoconference the last collaborative session at which your team will present your work, or will designate other senior staff to attend in their place if there are unavoidable conflicts with the scheduling of that session.

Completing the application

The application below is designed to help us better understand who you are, why your team wants to do this now, and the resources that you bring to this work. We are committed to your success. While we do not expect you to be experts in quality improvement, we know that experience using improvement methods and gathering and analyzing data will be beneficial.

Key dates

April 22nd: Portal for application submission opens
May 20th: Portal for application submission closes
June: Finalist interviews (by zoom video conference)
July 1st: Announcement of selected participants. Signed approval for participation by CEO and/or Board Chair due by July 15th

September, 2016: Launch of Collaborative

INFORMATION ABOUT YOUR ORGANIZATION/PRACTICE

I. Contact information

Provide the following information about your health center organization (i.e., grantee organization, parent organization for multi-site health centers)

1. FQHC Name:
   Administrative Office Address (number/street/zip):
   Health Center UDS #:
   Total number of service site locations:

2. Name of person completing application:
   Name (first and last):
   Title:
   Email:
   Phone:

3. Primary contact for this application.
   Name (first and last):
   Title:
   Email:
   Phone:

II. Health Center Organization Leadership Team

Provide the following information about leadership staff at your health center organization (i.e., grantee organization, parent organization for multi-site health centers).

4. Chief Executive Officer
   Name (first and last):
   Email:
   Phone:

5. Chief Medical Officer/Medical Director
   Name (first and last):
   Email:
Residency Learning Collaborative Application

Phone:

6. Chair of the Board of Directors
   Name (first and last):
   Email:
   Phone:

III. Learning Collaborative Participants

7. Name of practice/site:
   Address (number/street/zip):

8. Provide the names of each person who is on the implementation team that is committed to participating in the Learning Collaborative: their position title, role and FTE status. Ideally, your implementation team for the NP residency program would have at least one Nurse Practitioner, and one doctorally-prepared clinical psychologist for Clinical Psychology Residency implementation team. We encourage you to also include team members whose day-to-day activities will be involved in or affected by adopting a residency program, and/or whose expertise will be helpful to you in its development and implementation.

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<th>Name</th>
<th>Position title/Role</th>
<th>FTE status</th>
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IV. Demographics
9. It is helpful for NCA to understand more about your FQHC. Based on Table 5 of your latest UDS report, please provide the information below.

a. Number of FTE Medical Providers:
   - Physicians
   - Nurse Practitioners
   - Physician Assistants

b. Number of FTE Mental Health Providers:
   - Physicians
   - Nurse Practitioners
   - Clinical Psychologists
   - Licensed Clinical Social Workers
   - Others

c. Number of FTE Staff:
   - Registered Nurses
   - Licensed Practical Nurses
   - Medical Assistants
   - Office staff (receptionists, etc.)

10. It is helpful for NCA to understand the patient profile of your FQHC. Based on your latest UDS report, please provide the information below.

   _____Number of children ages 0-12
   _____Number of adolescents ages 13-18
   _____Number of adults ages 9-64
   _____Number of elders ages 65+

V. Infrastructure
11. Does your FQHC currently host any type of postgraduate residency or fellowship programs, for example, for family practice physician residents?
   a. Yes
   b. No
   If Yes, what types of residency or fellowship programs do you host?

12. Does your FQHC currently host pre-licensure health professions students, for example, medical, dental, social work or nursing (either RN or NP) students?
   a. Yes
   b. No

**INFORMATION ABOUT YOUR EXPERIENCE WITH PRACTICE IMPROVEMENT**

I. **Improvement model**

15. What quality improvement methodology do you use (if any)? Please provide an example of how your has staff been trained in this methodology.

16. Provide an example of work you have done to change/improve your practice, regardless of its success. How did it go? What did you learn?

II. **Team meetings for implementing new practices**

17. Has your FQHC had any experience working with an improvement coach or quality specialist (e.g. someone who helps teams use improvement skills and work together to achieve better outcomes for patients and families)?

   No________ Yes_______  If Yes, how would you describe the experience?

18. Has the team that will participate in the Learning Collaborative identified any individuals from within your organization who might serve as an internal coach?

   No_______  Yes_______  Consider an individual with some experience helping teams use improvement and data skills to redesign care processes. The collaborative will support internal coaches with a range of skills from beginner to expert.

19. Please check any/all Collaboratives in which your FQHC has participated.

   Diabetes _______ Asthma _______ Access _______ CHF ________

   Behavioral Health Integration _______ Self-Management Support ________

   Other ________
INFORMATION ABOUT YOUR MOTIVATION AND EXPECTATIONS FOR JOINING THE LEARNING COLLABORATIVE

Which postgraduate residency program is your health center planning on starting?

____ Postgraduate Nurse Practitioner Residency or Fellowship Program
____ Postdoctoral Clinical Psychology Residency Program

Please tell us why your team wants to participate in this Learning Collaborative and what you expect to accomplish during your participation. (250-300 words)