

Utilizing the Readiness to Train Assessment Tool (RTAT) to Assess Organizational Capacity

Tuesday June 6th, 2023

3:00-4:00pm Eastern / 12:00-1:00pm Pacific

This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award totaling \$550,000 with 0% financed with non-governmental sources. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by HRSA, HHS, or the U.S. Government. For more information, please visit [HRSA.gov](https://www.hrsa.gov).

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, activity sessions, learning collaboratives, trainings, publications, etc.

To learn more, visit weitzmaninstitute.org/nca

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Speakers

- Amanda Schiessl, MPP, Deputy Chief Operating Officer, Project Director/Co-Principal Investigator, Community Health Center, Inc. (CHCI)
- Meaghan Angers, Project Manager, National Training and Technical Assistance Partners (NTTAP), Community Health Center, Inc. (CHCI)
- Victoria Malvey, MS, Inter-professional Student Specialist, Community Health Center, Inc. (CHCI)

Objectives

1. Identify essential components of a health professions student training program
2. Discuss how to utilize the Readiness to Train Assessment Tool (RTAT) to assess your readiness to engage with health professions training programs
3. Gain knowledge and confidence in understanding the tool and your readiness scores

Essential components to organizing and supporting safe, high quality, satisfying, and productive educational and training experiences

Identify your wishes and priorities

Identify your capacity

Identify your infrastructure requirements



Nurse Manager, Patrick Murphy, with Quinnipiac University DEU Nursing Students



CHC/NIMAA Inaugural Medial Assistants

Uniform Data System (UDS) Data on Health Professions

- From 2021 UDS data, 82.3% of responding health centers (n=1,373) provide health professional education/training that is hands-on, practical clinical experience; 84.15% (n=1,295) do so in partnership with educational and postgraduate institutions and 19.1% sponsor their own programs.
- Among health centers there is an urgency and demonstrated effort to grow their own in response to the projected workforce shortages.

What does it mean to “Grow Your Own” workforce?

- Involves educating trainees on a career providing care for the medically underserved.
- Present a unique opportunity to prepare pre-licensure and postgraduate health professionals to practice with confidence and competence at a high level of performance, not to just fill a job vacancy.
- New graduates often lack training in settings that welcome vulnerable populations, and therefore are often overwhelmed by the complexity of the patients that health centers serve.

Investment in Your Workforce

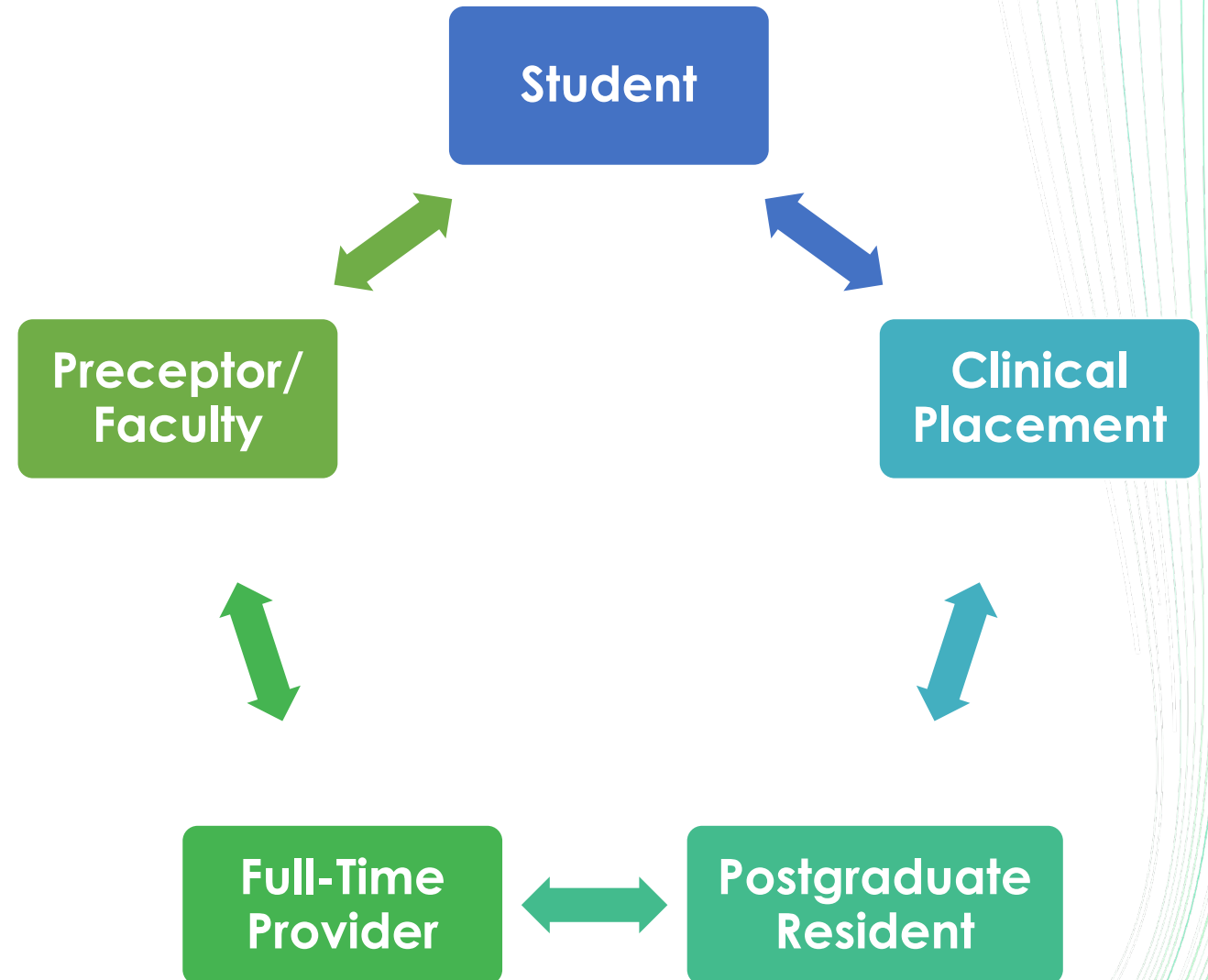
Objectives for Organizations

- ✓ Recruit individuals within your own communities who represent the community
- ✓ Professional responsibility
- ✓ Creates clinical workforce pathways
- ✓ Provide clinical staff opportunity to teach

Objectives for Trainee

- ✓ Train to a high performing model of care
- ✓ Opportunity to increase confidence and competency
- ✓ Train to the needs of underserved populations

Developing a Clinical Workforce



What is Health Professions Training?

- Any formal organized education or training undertaken for the purposes of gaining knowledge and skills necessary to practice a specific health profession or role in a healthcare setting.
 - **Types of HPT programs:** shadowing, rotations, affiliation agreements, accredited or accreditation-eligible programs
 - **At any educational level:** certificate, undergraduate, graduate, professional and/or postgraduate
 - **In any clinical or non-clinical discipline**

Readiness to Train Assessment Tool (RTAT)

- As part of HRSA's Health Professions Education & Training (HP-ET) initiative, Community Health Center (CHC), Inc., a HRSA-funded National Training and Technical Assistance Partner (NTTAP), received funding to develop a tool to help health centers assess and improve their readiness to engage in health professions training programs.
- Creating this tool required extensive literature review to create the framework/subscales and that process gave us expertise at to what health professions training is and made us realize there was no clear definition of HPT before
- Access the tool: <https://www.chc1.com/rtat/>



RTAT Timeline

2018-2019: Creation of the Tool

September 2020 - February 2021: National Launch

July – August 2021: Data Analysis

September – December 2021: Distribution of Health
Center Level Reports

January – April 2022: National Level Report

Survey Overview

- The Readiness to Train Assessment Tool (RTAT) is a 41-item, 7-subscale validated survey instrument that measures health centers' degree of readiness and motivation to engage with Health Profession Training (HPT) Programs.
- Organizational readiness is defined by RTAT as 'the degree to which health centers are motivated and capable to engage with and implement HPT programs.'
- Based on the mean RTAT scores, three levels of readiness are assigned: (1) developing readiness, (2) approaching readiness, and (3) full readiness.



Subscales of the RTAT

1. Readiness to engage (8 items)

All RTAT survey respondents provided responses for this subscale.

2. Evidence strength and quality of the HPT program (4 items)

3. Relative advantage of the HPT program (4 items)

4. Financial resources (3 items)

5. Additional resources (3 items)

6. Implementation team (4 items)

7. Implementation plan (15 items)

Program-specific subscales

Sub-scale	Brief Description	No. of Survey Items
Readiness to Engage	Indicators of the health center's overall readiness and commitment to engage with health professions training.	8
Evidence, Strength & Quality of the HPT Program	Stakeholders' perceptions of the quality and validity of evidence supporting the belief that the HPT program will have desired outcomes at their health center.	4
Relative Advantage of the HPT Program	Stakeholders' perceptions of the advantage of engaging with/implementing the HPT program versus an alternative solution.	4
Financial Resources	The level of financial resources dedicated for implementation and ongoing operations.	3
Additional Resources	The level of additional resources dedicated for implementation and on-going operations, including appropriate staff and assistance for staff (e.g. evaluation resources, tools, training, and coaching).	3
Implementation Team	This subscale is about the individuals involved with the HPT implementation process who can formally or informally influence this process through their knowledge, attitudes, and behaviors. They are effective in overcoming indifference or resistance that the implementation of an HPT program may provoke in the health center.	4
Implementation Plan	This subscale is associated with the implementation process. Successful engagement usually requires an active change process aimed to achieve effective implementation of the HPT program(s). The subscale measures the degree to which a scheme or method of behavior and tasks for implementing an HPT program are developed in advance, and the quality of those schemes or methods.	15

Scoring and Subscales

- The scores can be used to assign one of three levels of readiness for each
 1. Survey item
 2. Subscale
 3. Overall scale levels by obtaining their mean (average) scores

Likert Scale	Readiness Score	READINESS
Strongly Agree	5	Ready
Agree	4.00-4.99	
Neutral	3.00-3.99	Approaching Readiness
Disagree	2.00-2.99	Developing Readiness
Strongly Disagree	1.00-1.99	

Medical

1. RN Students: Pre-Licensure
2. NP Students: Pre-Licensure as NP/APRN
3. NP Postgraduate/Post Licensure: NP Residents or Fellows
4. Certified Nurse Midwifery: Pre-Licensure as CNM
5. Physician Assistants: Pre-Licensure
6. Medical Students: Pre-Licensure
7. Medical Residents
8. Medical Fellows
9. Medical Assistant Students
10. Other

Dental

1. Dental Students: Pre-Licensure
2. Dental Residents: Pre-/Post Licensure
3. Dental Fellows
4. Dental Assistant Students
5. Dental Hygienists: Pre-Licensure
6. Other

Clinical Disciplines with Health Professions Training Programs

Behavioral Health and/or Substance Abuse

1. Psychiatry MD/DO Residents
2. Psychiatry MD/DO Fellows
3. Psychiatric/Mental Health Nurse Practitioners: Pre-Licensure
4. Psychiatric/Mental Health Nurse Practitioners: Post Licensure Residents and Fellows
5. AA/BA/Paraprofessionals
6. Master Level Clinicians (MSW, LPC, MA, LDAC, Other)
7. Substance Abuse Counselors: Master's Level
8. Substance Abuse Counselors: Paraprofessional/Non-Licensed
9. Psychologists: Predoctoral Interns
10. Psychologist: Predoctoral Externs
11. Psychologist: Postdoctoral Residency
12. Other

Other

1. Chiropractic Students: Pre-Licensure
2. Chiropractic Residents: Post-Licensure
3. Registered Dietitian: Pre-Licensure
4. Community Health Workers
5. Other

Using the RTAT

- Results can be used to inform:
 - Determinations of individual health center readiness to engage with HPT programs
 - Determinations of readiness at various levels for the purposes of evaluation and support such as at the state/regional level
 - Development of effective T/TA at the level of state, regional and national

Using the RTAT to understand capacity

Additional Resources Subscale: The following resources are available and sufficient to implement and carry out the health professions training program: Staff (e.g., interested and qualified preceptors/supervisors).

- Use results from this subscale to determine readiness
 - Full Readiness [4.00-5.00] – begin outreach to preceptors
 - Approaching Readiness [3.99-3.00] – need to discuss with leadership further to assess readiness
 - Developing Readiness [1.00-2.99] – may need to determine a different program to invest in

Next Steps Road Map

1. Create a working group to bring together key stakeholders (HR, clinical leaders, IT)
2. Complete the Readiness to Train Assessment (RTAT) with your organization
3. Determine health professions pathway
4. Deeper dive into replicable models, best practice, and partnership opportunities
5. Assess your organization's capacity and infrastructure
6. Designate a champion for this initiative
7. Develop a plan and a team to go from planning to implementation

Download a PDF of the RTAT tool!

<https://www.chc1.com/rtat/>

Instructions on How to Use the Readiness to Train Assessment Tool™

The *Readiness to Train Assessment Tool™* (RTAT™) is a survey instrument that allows health centers to assess their organization's readiness to engage in health professions training (HPT) programs. For the purposes of RTAT, we broadly define **Health Professions Training (HPT)** as any formal organized education or training, undertaken for the purposes of gaining knowledge, and skills necessary to practice a specific health profession or role in a healthcare setting.

Health centers may provide health professions training at any educational level (certificate, undergraduate, graduate, professional and/or postgraduate) and in any clinical discipline. Some examples of types of **Health Professions Training Program(s)** are below:

- Established affiliation agreements with academic institutions to host students
- Formal agreements with individual students
- Directly sponsoring accredited or accreditation-eligible training programs (across all disciplines and education levels)

Key Takeaways

- Decisions cannot happen in silos
- The RTAT is designed to take again and again – can download the PDF on our website (www.chc1.com/RTAT), create survey, and follow instructions on how to aggregate the data

Pre-Work: Aggregated Data

- 17 organizations completed the RTAT and have received their individual results
 - 11 organizations continued past “core readiness” and assessed HPT programs
 - 14 total HPT programs were assessed with a majority in medical programs (79%) followed by BH (14%) and Dental (14%). The most assessed program was Medical Assistant Students (21%).
 - Readiness Breakdown:

Mean: Medical Programs Assessed	3.76
Mean: Dental Programs Assessed	3.91
Mean: BH Programs Assessed	3.60

Questions?

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>

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HEALTH CENTER RESOURCE CLEARINGHOUSE

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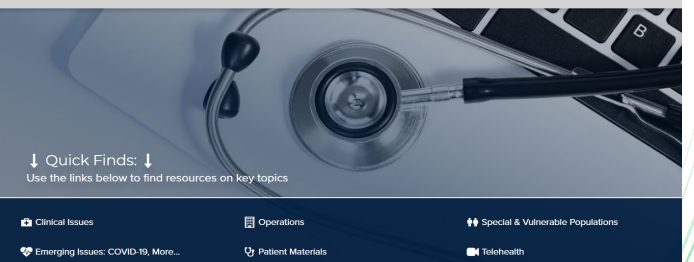
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<https://www.healthcenterinfo.org/>

Contact Information

For information on future webinars, activity sessions, and learning collaboratives: please reach out to nca@chc1.com or visit <https://www.chc1.com/nca>