



MOSES/WEITZMAN Health System

Always groundbreaking. Always grounded.

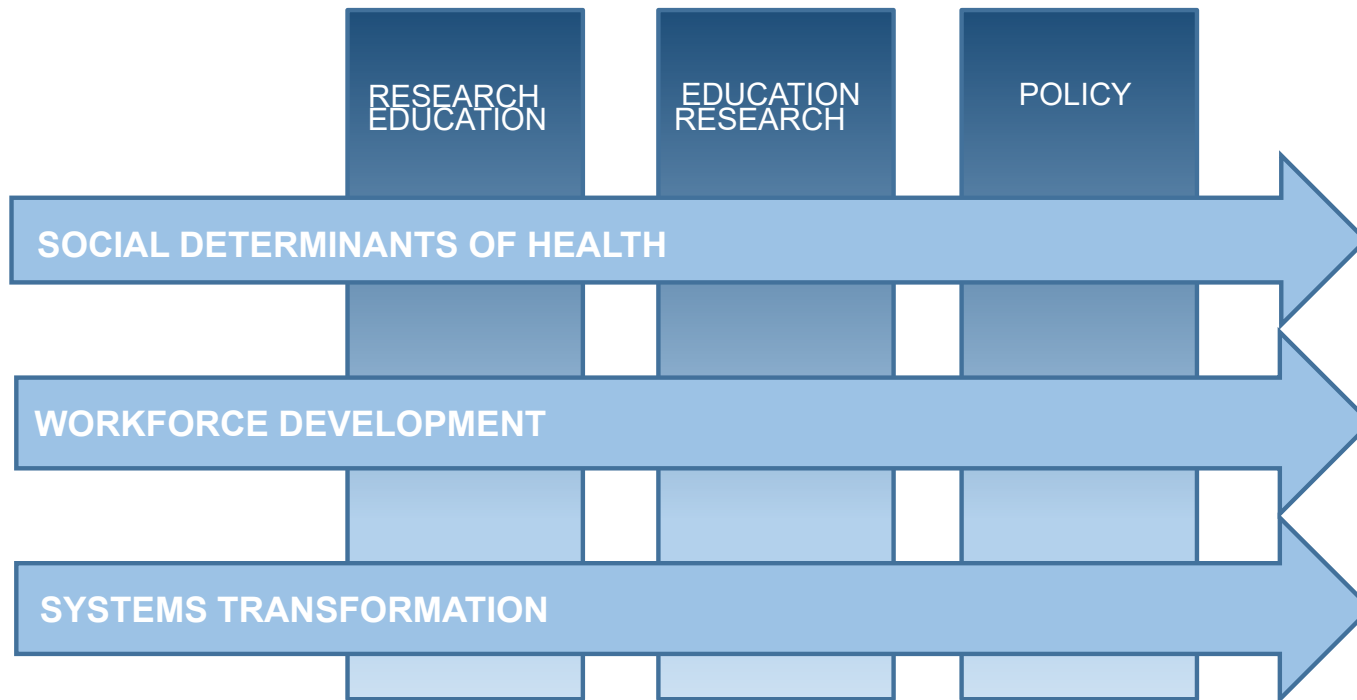
We're America's first primary care system dedicated to underserved populations. Our organizations exist to transform lives through patient care and innovations in education, training, research and accreditation.

Our System



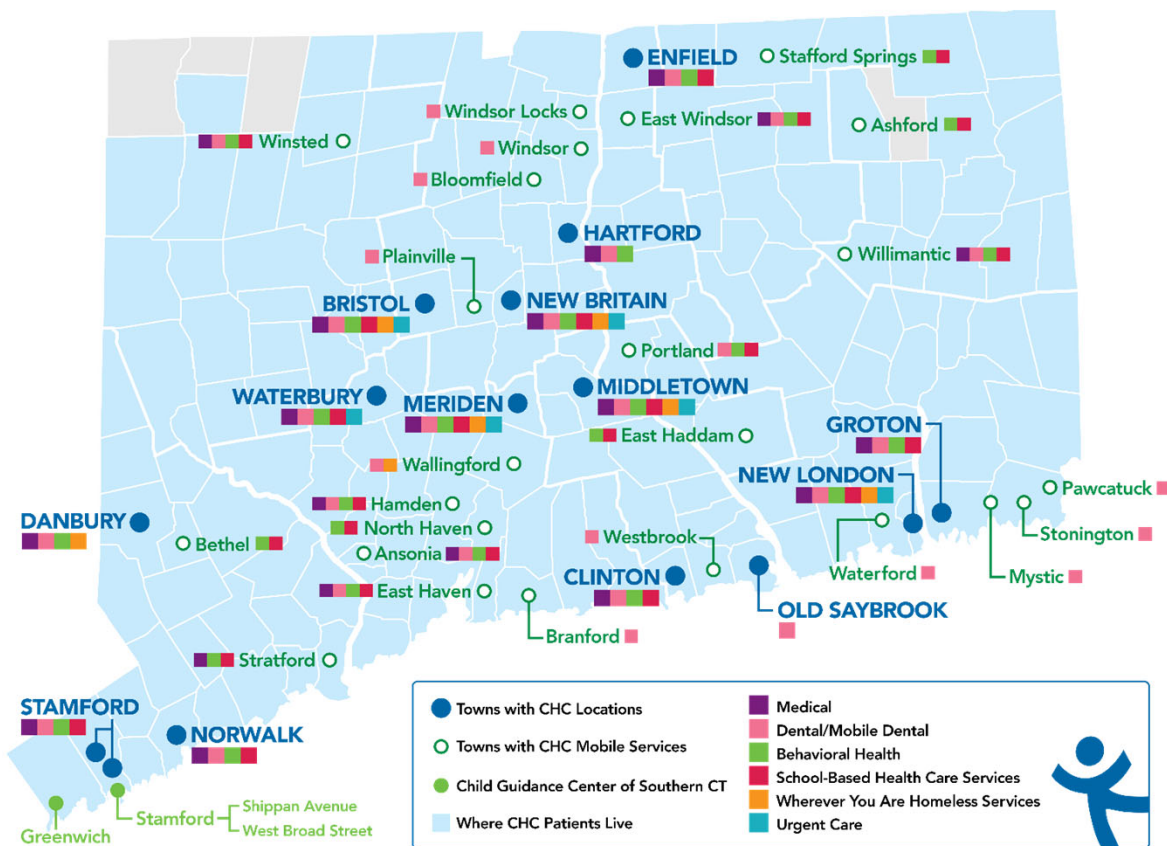
WI Core Pillars and Specialties

Grounded in core values of *Excellence, Innovation, and Equity & Inclusion*



Community Health Center, Inc.

Locations and Service Sites in Connecticut



THREE FOUNDATIONAL PILLARS

1
Clinical
Excellence

2
Research
and
Development

3
Training
the Next
Generation

CHC Profile:

- Founded: **May 1, 1972**
- Active Patients: **150,000**

FQHC Staffing, Visits and Training

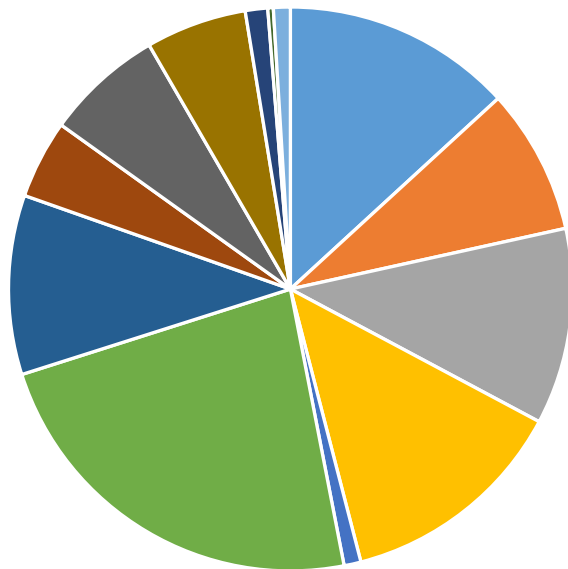
Line	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
8.	Total Physicians (Lines 1-7)	15,205.77	35,805,194	5,449,407	
9a.	Nurse Practitioners	12,177.93	25,468,169	3,907,356	
9b.	Physician Assistants	3,765.81	8,511,660	1,524,286	
10.	Certified Nurse Midwives	726.62	1,365,175	100,204	
10a.	Total NPs, PAs, and CNMs (Lines 9a-10)	16,670.36	35,345,004	5,531,846	
11.	Nurses	21,141.80	2,130,658	162,475	

Source: Uniform Data System, 2021-2022 – Table 5

Line	Measures	Number of Health Centers	% of Total
1.	Does your health center provide any health professional education/training that is a hands-on, practical, or clinical experience?		
	a. Yes	1,158	84.53%
	b. No	212	15.47%
1a.	If yes, which category best describes your health center's role in the health professional education/training process?		
	a. Sponsor ²	234	20.21%
	b. Training site partner ²	974	84.11%
	c. Other	131	11.31%

Source: Uniform Data System, 2021-2022 – Table 5

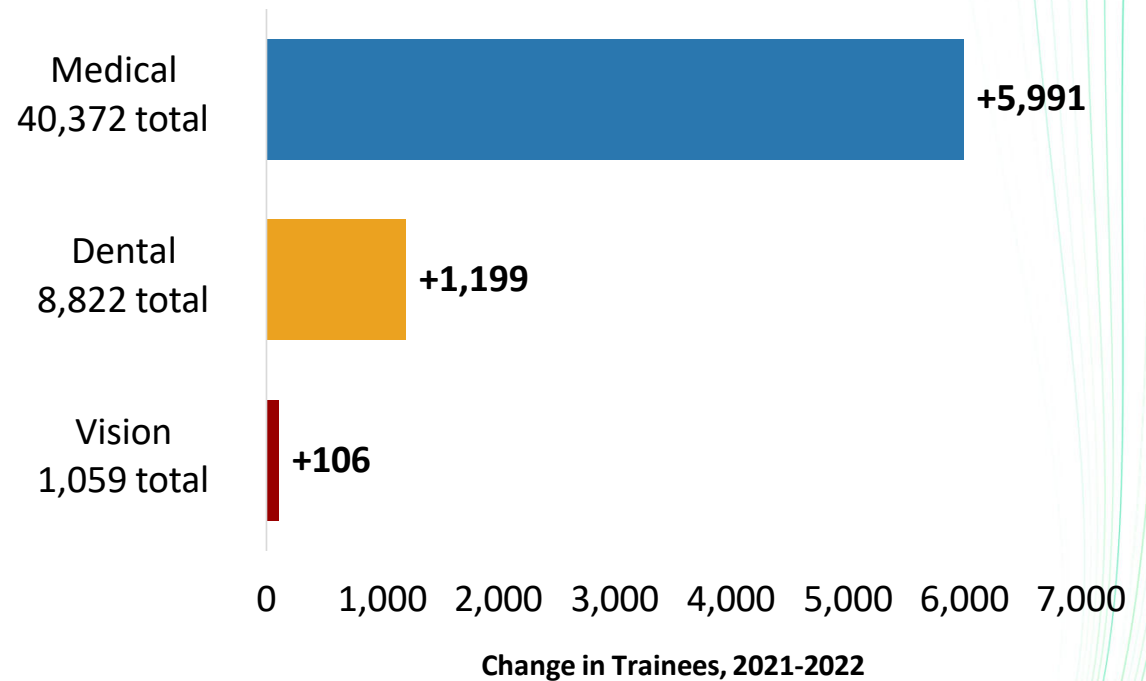
Health Professions Training Overview: 2023



- 311 Students and MD Residents completed their placements at CHC in 2023
- Student disciplines include non-clinical research, resident, and medical
- Placements primarily onsite, with some remaining hybrid/remote
- Postgraduate NP Residents are not included in this chart

Training the Next Health Center Workforce

Health centers hosted nearly 59,000 pre- and post-graduate trainees in 2022, a 12% increase from 2021.



Source: Uniform Data System, 2021-2022 – Workforce Appendix
Note that the net increase in trainees since 2021 includes trainee categories not displayed in the bar graph.

Workforce Training - Medical

Line	Measures	Pre-Graduate/Certificate (a)	Post-Graduate Training (b)
	Medical		
2.	Please indicate the range of health professional education/training offered at your health center and how many individuals you have trained in each category within the calendar year.		
	1. Physicians	9,869	6,381
	2. Nurse Practitioners	4,812	2,519
	3. Physician Assistants	2,348	556
	4. Certified Nurse Midwives	155	62
	5. Registered Nurses	4,949	766
	6. Licensed Practical Nurses/ Vocational Nurses	2,111	527
	7. Medical Assistants	3,412	1,905

Source: Uniform Data System, 2021-2022 – Table 5

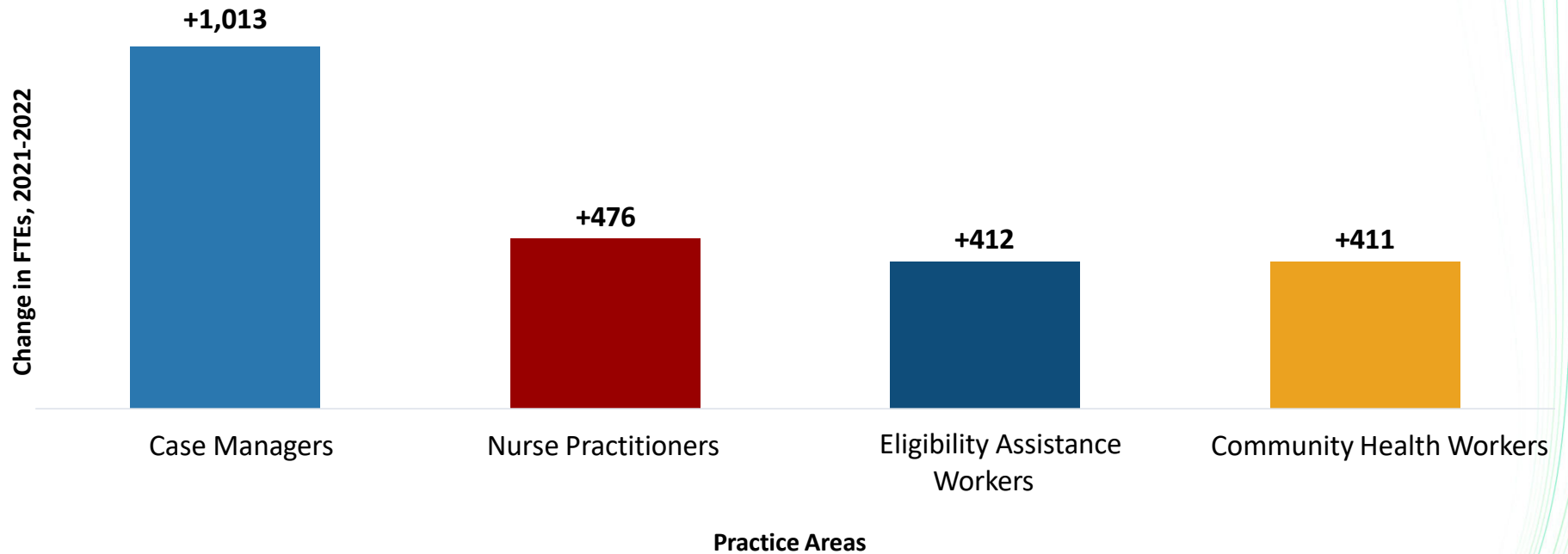
Workforce - Preceptors

Line	Measures	Number of Health Center Staff
3.	Provide the number of health center personnel serving as preceptors at your health center	16,384

Source: Uniform Data System, 2021-2022 – Table 5

Growing Workforce Practice Areas

Health centers saw large workforce growth in several practice areas.



Source: Uniform Data System, 2021-2022 – Table 5

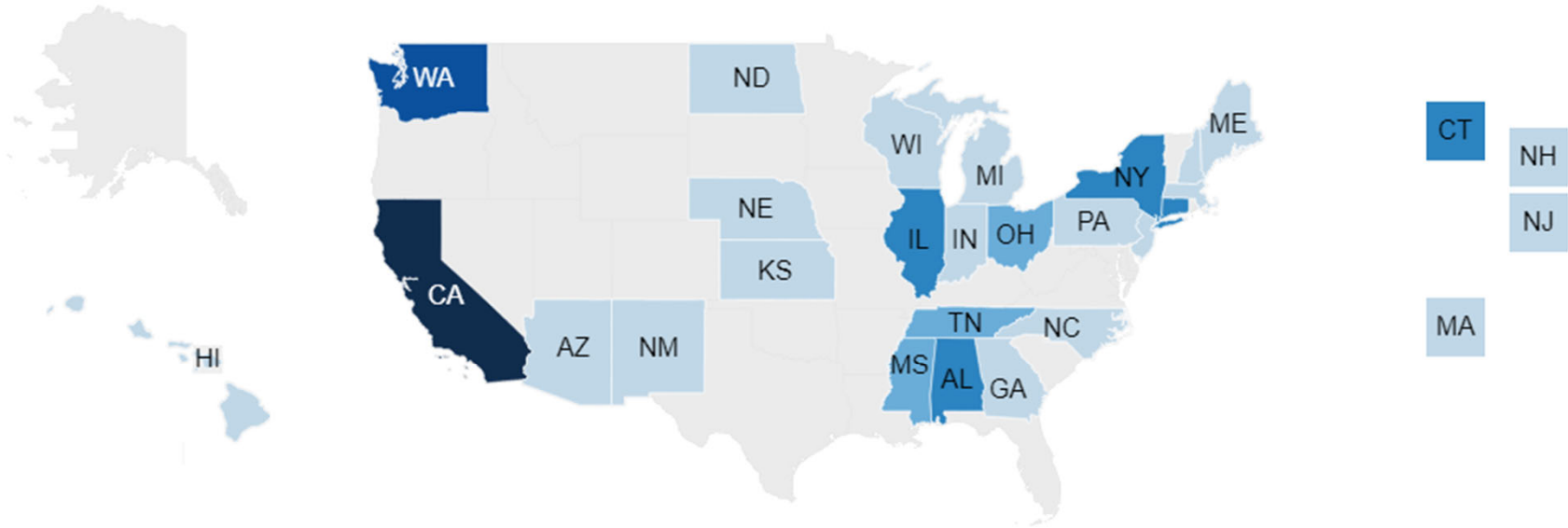
Nationwide Participant Summary at a Glance for Academic Year 2022 - 2023

476

Participants Nationwide

319

Graduates Nationwide



No Participants  Maximum Participants

"No Participants" indicates that there are no participants in the state or territory for the selected Academic Year and/or Program.

Source: Health Professions Training Programs, 2022-2023

Graduate Follow Up

Key Graduate Follow-up Practice or Employment Setting	Graduates	Graduates (%)
Graduate is currently employed or practicing in a Medically Underserved Community	153	64.6%
Graduate is currently employed or practicing in a Primary Care Setting	158	66.7%
Graduate is currently employed or practicing in a Rural Area	42	17.7%

Other Graduate Follow-up Training or Employment Status	Graduates	Graduates (%)
Individual is employed at a NHSC-approved site	69	29.1%
Individual is serving individuals with OUD/SUD	32	13.5%
Individual is currently serving as a preceptor	28	11.8%
Individual is currently working in a facility that provides substance use treatment services	25	10.5%
Individual is currently providing treatment or wrap-around services to individuals with substance use disorders	17	7.2%
Individual is currently employed in a facility that provides primary care services integrated with Behavioral Health	8	3.4%
Individual is providing behavioral health services	4	1.7%
Individual is not currently employed	2	0.8%

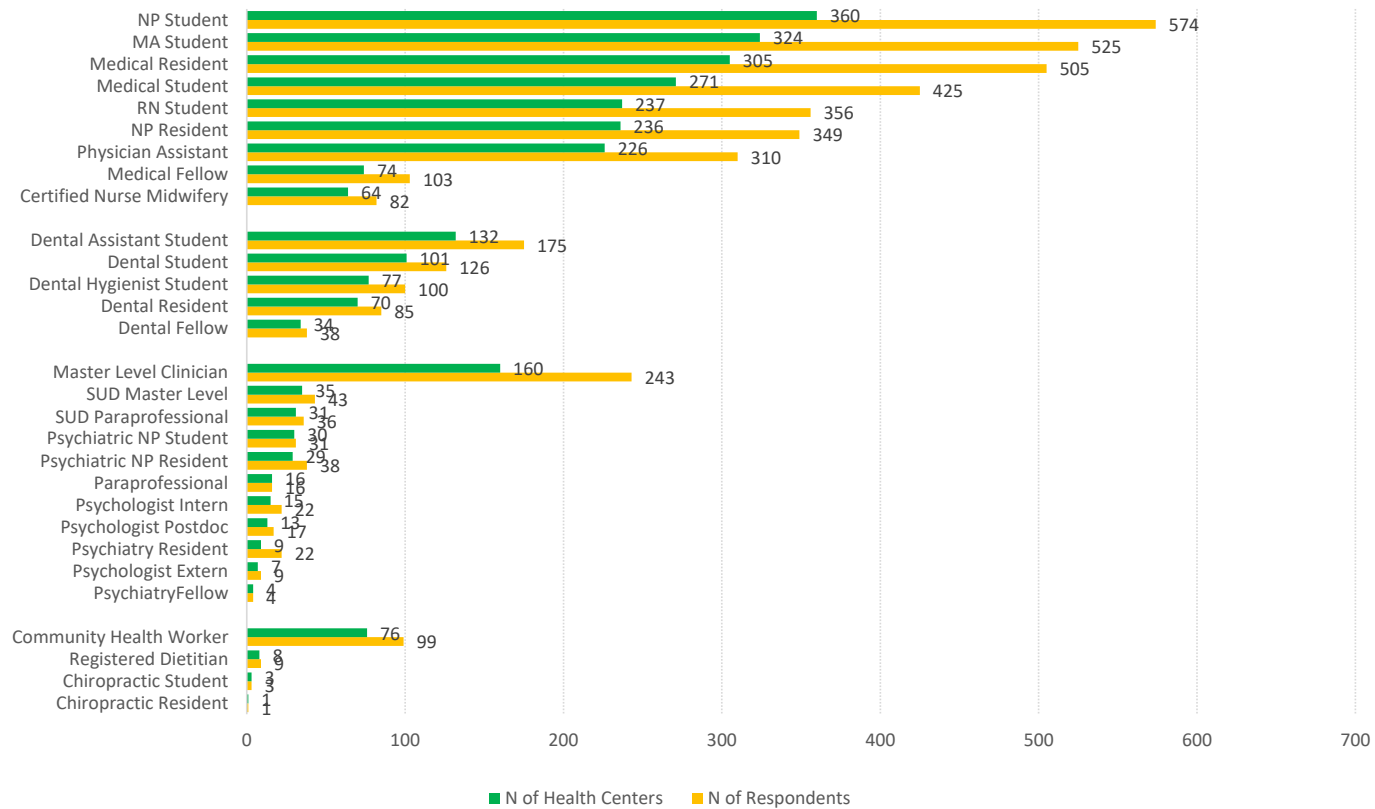
Source: Health Professions Training Programs, 2022-2023

Graduate Follow Up

Graduate Follow-up Employment Facility Type	Graduates	Graduates (%)
FQHC or Look-Alike	116	48.9%
Other Clinical Health Setting	21	8.9%
Academic Medical Center	17	7.2%
Private Practice	15	6.3%
Community Behavioral Health/Mental Health Center	10	4.2%
Other Community-Based Organization	6	2.5%
Rural Health Clinic	6	2.5%
Community Health Center (CHC)	5	2.1%
Hospital (non-academic)	5	2.1%
Federal Government	4	1.7%
Other Specialty Clinic	4	1.7%
Academic Institution	3	1.3%
Not Currently Employed	1	0.4%
Nursing Home	1	0.4%
School-based Clinic	1	0.4%

Source: Health Professions Training Programs, 2022-2023

Nationwide interest in HPT programs within each clinical discipline by number of health centers & individual respondents



National Health Center Training & Technical Assistance Partners (NTTAP)

NTTAP Learning Collaborative Initiatives

Learning Collaborative	Outcomes
Comprehensive Care	<ul style="list-style-type: none"> • Identified a clinical team to work on a quality improvement project. • Established dedicated time to structured meetings.
HIV Prevention	<ul style="list-style-type: none"> • Identified at-risk patients and created workflows that will best meet their patient population needs. • Launched outreach events and campaigns to increase PrEP education among patient population. • Implemented staff training on stigma, pre and post-exposure prophylaxis options, and screening, testing, and treatment protocols.
Postgraduate NP Residency and Fellowship Program	<ul style="list-style-type: none"> • Developed program drivers and core program elements. • Presented a plan to build and implement a Postgraduate Nurse Practitioner Residency and Fellowship program to leadership and board of directors.
Health Profession Student Training	<ul style="list-style-type: none"> • Developed a standardized affiliation agreement template for academic partners with direct oversight by the organization's Director of Risk and Corporate Compliance. • Standardized the learner experience across all departments and promoted interdisciplinary learning across the health center (e.g. uniform application and onboarding process, IT system access). • Created tools to evaluate student capacity and effectiveness of the training program. • Successfully developed a playbook and promoted staff member to serve as a Student Coordinator.
Advancing Team-Based Care	<ul style="list-style-type: none"> • Increased compliance with the Childhood Immunization measure from 5.2% to 11.9% in 5 months. • In one month of running a PDSA cycle, increased compliance with cervical cancer screening from 19% to 22%. • In three months, 10 out of 12 patients had a decrease in A1c by at least 1 point, with a total average of 2.4 decrease in A1c amongst all patients.

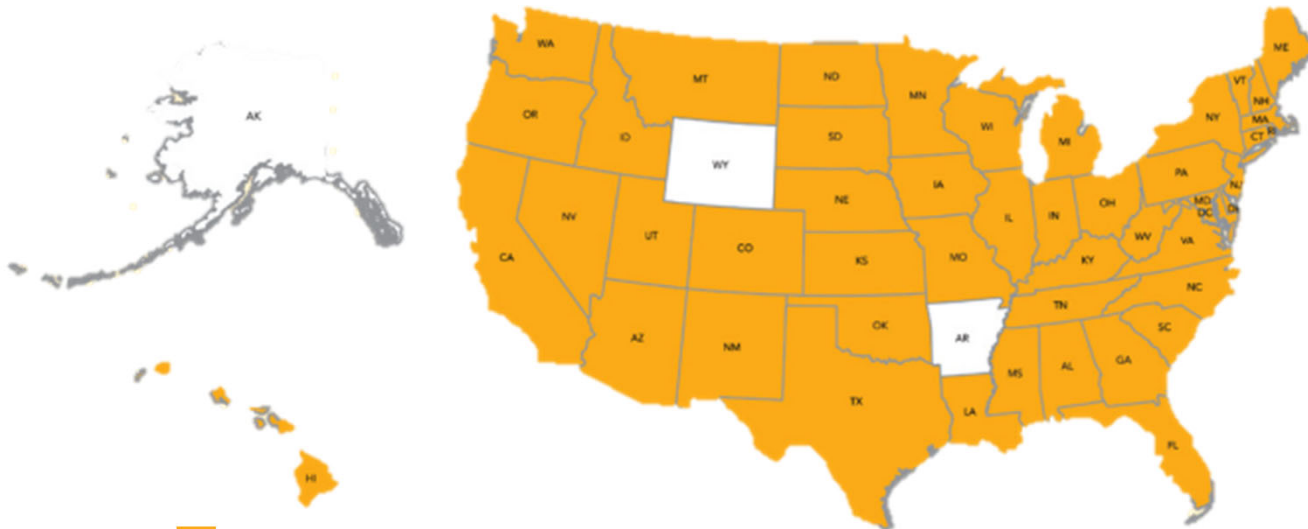
The National Institute for Medical Assistant Advancement (NIMAA)


Level Up Your Medical Assistants with UpSkill NIMAA

- **UpSkill NIMAA** provides next level training to enhance Medical Assistant's contributions as an essential member of a high performing care team. Participants will learn at their own pace by either enrolling in a scheduled cohort with a course facilitator or on-demand. With UpSkill NIMAA, your Medical Assistants will:
 - Enhance their ability to function as fully integrated members of high-performing care teams
 - Strengthen essential interpersonal skills in a clinical environment
 - Enhance their ability to work at the top of their MA certification or registration
- There are currently **seven courses** offered that can be taken separately or in a recommended sequence:
 - Community Health Workers in Primary Care
 - Introduction to Health Coaching
 - Immunizations
 - Immunizations for New Vaccinators
 - Professionalism and Effective Communication
 - Quality Improvement and Making the Data Count
 - Run Charts

Consortium for Advanced Practice Providers

Primary Care, Psychiatric/MH and Specialty Postgraduate Training Programs— 500+ programs across 47 states—and continues to grow!



 States with currently active Postgraduate Nurse Practitioner Training Programs. Currently, 110 programs are in health centers.

Hart AM, Seagriff N, Flinter M. Sustained Impact of a Postgraduate Residency Training Program on Nurse Practitioners' Careers. *Journal of Primary Care & Community Health*. 2022;13. doi:[10.1177/21501319221136938](https://doi.org/10.1177/21501319221136938)

Survey of postgraduate NP Residency program completers 2007-2019:

90 individuals completed the program

72% responded to the survey.

74% of respondents were still practicing as primary care provider, with the majority practicing in FQHCs (57%)

Nine subthemes were identified from the associated interviews, with an **overarching theme that the program was foundational to a successful career in community-based primary care** and that the impact of the program on careers continues to evolve.

Summary recommendations:

- Invest clinical training resources in the FQHC system at a national (service delivery sites) and federal (BHW/HRSA) level to support high quality, effective, and sustainable workforce development, training, and sustained commitment to cause.
- Expand BSN capstone program funding for both FQHCs and Universities
- As Veteran Affairs has a core mission to *train the health care professionals who will care for veterans and care for the U.S.*, so too should Health Centers have a core mission to *train the health care professionals who will care for underserved and special populations and for the U.S.*

Summary recommendations (continued)

- Develop early interest in health professions by actively engaging children and adolescents who receive their health care in FQHCs and school based health centers in positive messaging—and internship opportunities at the high school, college and graduate level
- Implement the five recommendations of the NASEM report:
 - Pay for primary care teams to care for people, not doctors to deliver services
 - Ensure that high quality care is available to every individual and family
 - Train primary care teams where people live and work
 - Ensure that high quality primary care is implemented in the United States.
 - Develop an annual scorecard
 - Prioritize funding of primary care research



2024 Keynote Speakers



Donald Warne, MD, MPH

Professor of Public Health, Provost Fellow of Indigenous Health Policy, and Co-Director, Johns Hopkins Center for Indigenous Health

Presenting on "Representation Matters: The Centrality of Indigenous Communities, Knowledges, and Cultures to Advancing Health Justice."

Hafeezah Muhammad

CEO, Backpack Healthcare

Presenting on "Representation Matters: Centering Lived Experiences in Healthcare Delivery and Innovation."



2024 marks a significant year in electoral politics for 70+ countries across the globe, including the United States. At the Weitzman Institute, we recognize that representation is central to our work in advancing **health equity** and **justice** not just during election years, but rather, on a daily basis. This year's Symposium will focus on why and how *representation matters*, particularly in the context of **health policy, research, clinical training and practice**, as well as **healthcare innovation and technology**.

Registration is free and open now!



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