



**Department of Health and Human Services
Health Resources and Services Administration**

**REPORT TO CONGRESS
Nurse Education, Practice, Quality and Retention
Program
Fiscal Year 2012**

Executive Summary

The Nurse Education, Practice, Quality and Retention (NEPQR) program has broad legislative authority to address the development and enhancement of the nursing workforce. The NEPQR program provides grant support for academic, service delivery, and continuing education projects designed to enhance nursing education, improve the quality of patient care, increase nurse retention, and strengthen the nursing workforce.

Sections 831 and 831A of Title VIII of the Public Health Service (PHS) Act, as amended by section 5309 of the Patient Protection and Affordable Care Act, Public Law 111-148, require an annual report to Congress on the grants awarded and contracts entered into through the NEPQR program. This document serves as the annual report for fiscal year (FY) 2012 and provides: (1) a description of the nursing workforce priority areas and grant programs under the NEPQR program authority, and (2) summaries of all FY 2012 grant and cooperative agreement awards and their linkages to the priority areas.

In FY 2012, the NEPQR program appropriation was \$39.6 million, which supported 119 total awards and 2 contracts. Consistent with section 805 of Title VIII of the PHS Act, preference in making NEPQR program awards was given to projects that substantially benefit rural and/or underserved populations or that help to meet the public health nursing needs in state or local health departments. Appropriated funds were expended for awards and contracts, as well as for costs associated with program oversight, grant reviews, grant processing, and follow-up performance review. The funds also supported the National Advisory Council on Nurse Education and Practice, which advises and makes recommendations to the Secretary and Congress on policy matters arising in the administration of Title VIII including the range of issues relating to the nurse workforce, nursing education and nursing practice improvement.

For FY 2012, the NEPQR program continued funding projects in the 3 priority areas of Education, Practice, and Retention with quality embedded across the priority areas (75 awards, \$22.3 million). The specific focus areas for each of these priorities are defined in statute as follows:

The **Education (“E”) Priority Area** includes projects that:

- (E1) expand enrollment in baccalaureate nursing programs; or
- (E2) provide education in new technologies, including distance learning methodologies.

The **Practice (“P”) Priority Area** includes projects that:

- (P1) establish or expand nursing practice arrangements in noninstitutional settings (Nurse Managed Health Centers) to demonstrate methods to improve access to primary health care in medically underserved communities;
- (P2) provide care for underserved populations and other high-risk groups such as the elderly, individuals with HIV/AIDS, substance abusers, the homeless, and victims of domestic violence;
- (P3) provide quality coordinated care and other skills needed to practice in existing and emerging organized health care systems; or
- (P4) develop cultural competencies among nurses.

The **Retention (“R”) Priority Area** includes projects that:

- (R1) promote career advancement through career ladder programs for individuals, including licensed practical nurses, licensed vocational nurses, certified nursing assistants, home health aides, or diploma degree or associate degree nurses to become baccalaureate prepared registered nurses or advanced education nurses in order to meet the needs of the registered nurse workforce;
- (R2) develop and implement internships and residency programs in collaboration with an accredited school of nursing to encourage mentoring and the development of specialties;
- (R3) assist individuals through career ladder programs to obtain education and training required to enter the nursing profession and advance within such profession; or
- (R4) enhance patient care that is directly related to nursing activities by enhancing collaboration and communication among nurses and other health care professionals, and promote nurse involvement in the organizational and clinical decision making processes of a health care facility.

In FY 2012, HRSA also implemented four funding opportunity announcements under the NEPQR program authority:

- Faculty Development: Integrated Technology into Nursing Education and Practice projects supported nursing faculty development in new technologies (5 awards, \$1.4 million).
- Nursing Assistant and Home Health Aide projects supported the training of nursing assistants and home health aides to meet the needs of the aging population (14 awards, \$2.8 million).
- Interprofessional Collaborative Practice projects were newly created in FY 2012 and aim to strengthen nursing’s capacity to advance the health of patients, families, and communities through innovations in interprofessional collaborative practice (24 awards, \$10.4 million).
- The NEPQR program also created a Coordinating Center for Interprofessional Education and Collaborative Practice that provides infrastructure support to develop leadership and expertise in interprofessional education and collaborative, team-based practice among health professions across the United States, including medically underserved areas (one award, \$750,000).

All applications to the NEPQR program undergo a rigorous peer-review process. Applications are reviewed, and then scored and rank ordered. The highest scoring, or most competitive, applications receive funding which ensures that the Health Resources and Services Administration (HRSA) funds the most competitive applications for the NEPQR program during the funding cycle.

Table of Contents

Executive Summary	1
Table of Contents	3
I. Legislative Language	4
II. Nurse Education, Practice, Quality and Retention Program Overview	4
A. Education, Practice, and Retention Priorities	5
A.1 Education Priority Area.....	5
A.2 Practice Priority Area.....	6
A.3 Retention Priority Area	6
B. Faculty Development: Integrated Technology into Nursing Education and Practice.....	7
C. Nursing Assistants and Home Health Aide	7
D. Interprofessional Collaborative Practice.....	7
E. Coordinating Center for Interprofessional Education and Collaborative Practice	8
F. Contracts	8
III. FY 2012 – Continuing Funding for Existing Grantees	9
A. E1 Grantees: Expanding Enrollment in Baccalaureate Nursing Programs.....	9
B. E2 Grantees: Providing Education in New Technologies, Distance Learning Methodologies	10
C. P1 Grantees: Establishing or Expanding Nursing Practice Arrangements	12
D. P2 Grantees: Providing Care for Underserved Populations and Other High-Risk Groups.....	16
E. P3 Grantees: Providing Quality Coordinated Care.....	17
F. P4 Grantees: Developing Cultural Competencies Among Nurses	19
G. R1 Grantees: Career Ladder Program – Career Advancement.....	19
H. R2 Grantees: Developing and Implementing Internships and Residency Programs	20
I. Faculty Development: Integrated Technology into Nursing Education and Practice...	23
J. Nursing Assistant and Home Health Aide.....	24
IV. FY 2012 – New Competitions.....	26
A. Interprofessional Collaborative Practice.....	27
B. Coordinating Center for Interprofessional Education and Collaborative Practice	32
V. Conclusion.....	33

I. Legislative Language

Sections 831 and 831A of Title VIII of the Public Health Service (PHS) Act, as amended by section 5309 of the Patient Protection and Affordable Care Act, Public Law 111-148, require an annual report to the U.S. Congress on the grants awarded and contracts entered into through the Nurse Education, Practice, Quality, and Retention (NEPQR) program. This document serves as the annual report for fiscal year (FY) 2012 and provides (1) a description of the nursing workforce priority areas and grant programs under the NEPQR program authority, and (2) summaries of all FY 2012 grant and cooperative agreement awards and their linkages to the priority areas.

II. Nurse Education, Practice, Quality and Retention Program Overview

The NEPQR program, administered by the Health Resources and Services Administration (HRSA), seeks to strengthen the nursing workforce and improve nurse retention and quality of care by expanding the pipeline into the nursing workforce, promoting career mobility, enhancing nursing practice, increasing access to care and interprofessional clinical training and practice, and supporting retention activities. For FY 2012, the NEPQR program continued funding projects under its three statutorily mandated purposes, which are (1) education, (2) practice, and (3) retention.¹ Quality is integrated throughout all of the priority areas.

The NEPQR program supported projects under four additional funding opportunity announcements—Faculty Development: Integrated Technology into Nursing Education and Practice (ITNEP); Nursing Assistants and Home Health Aide (NAHHA); Interprofessional Collaborative Practice (IPCP), and a Coordinating Center for Interprofessional Education and Collaborative Practice (CCIECP).

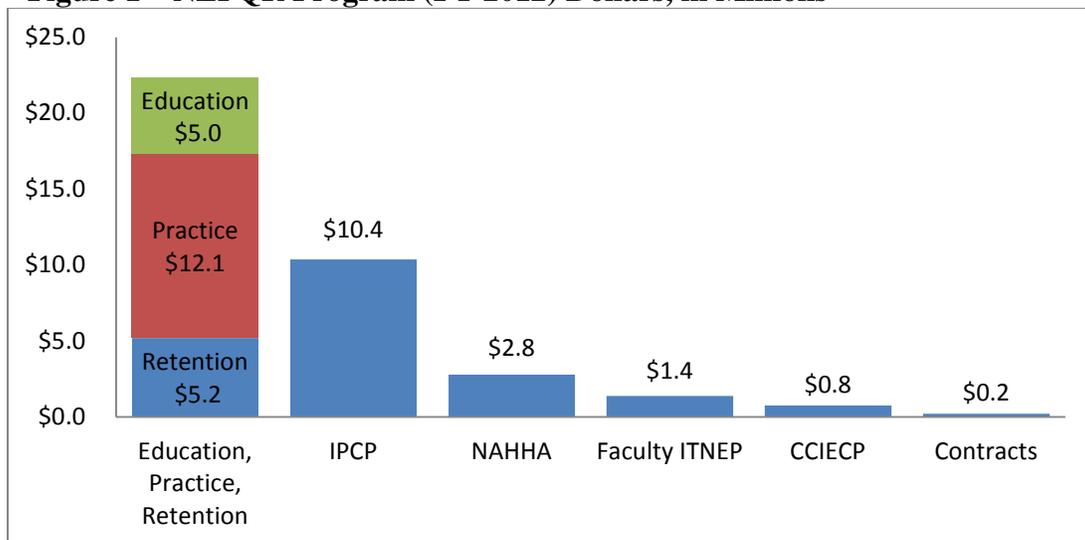
The FY 2012 NEPQR program appropriation was \$39.6 million, which supported 119 awards and 2 contracts. Consistent with the statute, preference in making awards was given to projects that substantially benefit rural and/or underserved populations, or help to meet the public health nursing needs in state or local health departments. Appropriated funds were expended for grant and cooperative agreement awards and contracts, as well as for costs associated with program oversight, grant reviews, grant processing, and follow-up performance reviews. The funds also supported the National Advisory Council on Nurse Education and Practice, which advises and makes recommendations to the Secretary and Congress on policy matters arising in the administration of Title VIII including the range of issues relating to the nurse workforce, nursing education and nursing practice improvement.

¹ Section 5309 of the Affordable Care Act amended Title VIII of the PHS Act by renaming Section 831 "Nurse Education, Practice, and Quality Grants" with the addition of "quality." The Statute did not expand the priority areas to include the term "quality." Quality is therefore presumed to be integrated throughout all priority areas.

The FY 2012 funding included 75 awards totaling \$22.3 million for continuing support for grants under 3 priority areas (education, practice, and retention); 5 awards totaling \$1.4 million to Faculty Development: ITNEP projects; 14 awards totaling \$2.8 million to NAHHA projects; 24 new awards totaling \$10.4 million to IPCP projects; and a single new award totaling \$750,000 to the CCIECP.

Two contracts were also supported. A contract totaling \$145,411 was awarded to REI Systems Inc. of Herndon, Virginia, for IT support and electronic management of the NEPQR program grantee applications and reporting. A second contract was awarded totaling \$65,105 to John Snow Incorporated to provide grantee support and training, technical assistance, analytical support, data verification, reporting related materials, and Electronic Handbook support and enhancements to the Uniformed Data Systems reporting system used by the Nurse Managed Health Clinics.

Figure 1 – NEPQR Program (FY 2012) Dollars, in Millions



Data Source: HRSA Electronic Handbook, accessed August 2014

Note: The totals provided in Figure 1 may not match the totals provided in the text due to rounding.

A. Education, Practice, and Retention Priorities

The NEPQR program provides grant support for academic, service delivery, and continuing education projects designed to enhance nursing education, improve the quality of patient care, increase nurse retention, and strengthen the nursing workforce. Seventy-five continuation grants totaling over \$22 million were funded in three priority areas.

A.1 Education Priority Area

- **E1:** Expanding enrollment in baccalaureate nursing programs to help people enter the nursing field for the first time. In FY 2012, eight grants were funded totaling \$2.5 million.

E2: Providing education in new technologies, including distance learning methodologies. In FY 2012, nine grants were funded totaling \$2.6 million.

A.2 Practice Priority Area

- **P1:** Establishing or expanding nursing practice arrangements in noninstitutional settings to demonstrate methods to improve access to primary health care in medically underserved communities. In FY 2012, 18 institutions were funded totaling over \$7.1 million.
- **P2:** Providing care for underserved populations and other high-risk groups such as the elderly, individuals with HIV/AIDS, substance abusers, the homeless, and victims of domestic violence. In FY 2012, eight grants were funded totaling over \$2.2 million.
- **P3:** Providing coordinated care and other skills needed to practice in existing and emerging organized health care systems. In FY 2012, nine grants were funded totaling \$2.3 million.
- **P4:** Developing cultural competencies among nurses. In FY 2012, two grants were funded totaling \$0.5 million.

A.3 Retention Priority Area

- **R1:** Promoting career advancement for individuals who are already in the nursing field (including licensed practical nurses, licensed vocational nurses, certified nurse assistants, home health aides, or diploma degree or associate degree nurses) to become baccalaureate prepared registered nurses or advanced education nurses in order to meet the needs of the registered nurse workforce. In FY 2012, six grants were funded totaling \$1.5 million.
- **R2:** Developing and implementing internships and residency programs in collaboration with an accredited school of nursing to encourage mentoring and the development of specialties. In FY 2012, 15 grants were funded totaling \$3.7 million.
- **R3:** Assisting individuals through career ladder programs to obtain education and training required to enter the nursing profession and advance within such profession. In FY 2012, no grants received funding.
- **R4:** Enhancing patient care delivery systems through improving the retention of nurses and enhancing patient care that is directly related to nursing activities. In FY 2012, no grants received funding.

B. Faculty Development: Integrated Technology into Nursing Education and Practice

The NEPQR program funds Faculty Development: ITNEP projects to support nursing collaboratives develop their faculty in the use of information and other technologies to expand the capacity of collegiate schools of nursing to educate students for 21st century health care practice. These projects assist nursing collaboratives to use health care information systems to enhance nursing education and practice, optimize patient safety, and drive improvements in health care quality. In FY 2012, five Faculty Development: ITNEP projects were funded totaling \$1.4 million.

C. Nursing Assistants and Home Health Aide

The NEPQR program funds NAHHA projects to train nursing assistants and home health aides to meet the needs of the aging population.² HRSA began supporting the NAHHA projects in response to a request in the U.S. Senate Committee on Appropriations report on the FY 2010 Department of Health and Human Services appropriation bill. In FY 2012, 10 NAHHA projects were funded totaling \$2.8 million.

D. Interprofessional Collaborative Practice

In FY 2012, the NEPQR program established new funding for Interprofessional Collaborative Practice (IPCP) projects that strengthen nursing's capacity to advance the health of patients, families, and communities. The IPCP projects support the development and implementation of innovative practice models that use collaborative interprofessional teams comprised of nurses and other health professionals. The projects are consistent with the NEPQR program P3 priority by providing quality coordinated care and other skills needed to practice in existing and emerging organized health systems. Interprofessional team-based care environments are comprised of high-functioning diverse professionals with a collective identity who collaborate and communicate effectively to increase access to care and achieve high quality patient and population-centered outcomes. For FY 2012, 24 3-year cooperative agreement awards, totaling \$10.4 million, were made to support projects proposing innovations in interprofessional collaborative practice.

² H. Rept. 111-366, Division D, Title II at 997 (referencing S. Rept. 111-66), accompanying the Consolidated Appropriations Act, 2010, P.L. 111-117.

E. Coordinating Center for Interprofessional Education and Collaborative Practice

In FY 2012, the then HRSA Bureau of Health Professions (BHPR)³ announced a funding opportunity to support a cooperative agreement for the creation of a CCIECP. The goal of the CCIECP is to facilitate the transformation of the prevalent siloed health care delivery system into an integrated health system where coordinated, collaborative, team-based practice, informed by interprofessional education, becomes a national norm in the United States.⁴ The CCIECP serves as a respected source for unbiased, expert guidance to the health care community on issues related to interprofessional education and collaborative practice. The CCIECP also provides infrastructure support for national interprofessional research and evaluation activities to include data collection, analysis, and dissemination. In addition, the CCIECP forges partnerships with key stakeholders to collectively create new interprofessional programs and enhance, expand, and link existing interprofessional programs. The CCIECP is also tasked with raising the visibility of high quality, coordinated, team-based care that is well informed by interprofessional education and best practice models. For FY 2012, a single cooperative agreement to create a CCIECP was awarded. The NEPQR program provided \$750,000 of the total funding and the Primary Care Training Enhancement Program (PHS Title VII Section 747) provided the remaining \$22,122 for a total award of \$772,122.

Three leading foundations focused on health, health professions education, and patient care announced a public-private partnership and pledged additional support for the new National Center for Interprofessional Practice and Education. The Josiah Macy Jr. Foundation, Robert Wood Johnson Foundation, and Gordon and Betty Moore Foundation collectively committed up to \$6 million in grant support over 5 years (2012 - 2017).

F. Contracts

The NEPQR program's contract obligations totaled \$145,411 to REI Systems Inc. of Herndon, Virginia, for IT support for nursing training programs, including enhancements to the Electronic Handbook used to manage grantee applications and reporting. A second contract totaling \$65,105 was awarded to John Snow Incorporated to provide grantee support and training, technical assistance, analytical support, data verification, reporting related materials, and Electronic Handbook support and enhancements to the Uniformed Data Systems reporting system used by the Nurse Managed Health Clinics.

³ In 2014, HRSA created the Bureau of Health Workforce (BHW), which includes programs from the Bureau of Health Professions and Bureau of Clinical Recruitment and Services.

⁴ The Future of Nursing: Leading Change, Advancing Health. (2010). Retrieved May 6, 2012, from: <http://thefutureofnursing.org/IOM-Report>.

III. FY 2012 – Continuing Funding for Existing Grantees

A. E1 Grantees: Expanding Enrollment in Baccalaureate Nursing Programs

Ashland University, Mansfield, OH

Funding Amount: \$536,019

Focus: Supports recruitment of students from minority and disadvantaged backgrounds as well as mentorship in order to promote retention. This project also provides for simulated learning experiences that encompasses scenarios of culturally diverse and underserved populations within Ohio. It addresses the shortage of nurses in the workforce by increasing the enrollment of baccalaureate nursing students with an emphasis on increasing the numbers of students from minority and disadvantaged backgrounds.

Board of Regents of the University of Nebraska Medical Center, Omaha, NE

Funding Amount: \$279,114

Focus: Expands training capacity by using clinical staff instructors as faculty extenders for the clinical education of students. Using the dedicated educational units model, this pilot test allows the school to offer admittance to an additional eight students per semester, resulting in a 25 percent increase in enrollment at the pilot campus during the grant period.

Marquette University, Milwaukee, WI

Funding Amount: \$277,078

Focus: Expands enrollment of minority students into Bachelor of Science in Nursing (BSN) degree programs through efforts to diversify the applicant and enrollee pool of nursing students to better reflect the diversity of Milwaukee's population. This project supports the need for a diverse nursing workforce to improve access to and quality of health care.

Oral Roberts University, Tulsa, OK

Funding Amount: \$322,662

Focus: Expands enrollment in the BSN program for minority and disadvantaged students from medically underserved areas and health professional shortage areas. This program integrates health promotion with disease and accident prevention and places an added emphasis on metabolic syndrome. It focuses on all cultural groups across the lifespan so that nurses are properly trained to meet the needs of the populations they serve.

Prairie View A&M University, Prairie View, TX

Funding Amount: \$249,999

Focus: Increases enrollment, retention, and graduation rates in the Licensed Vocational Nurse to BSN Program. This project has a specific focus on increasing enrollment and retention of licensed vocational nursing students from rural and underserved areas of the Gulf Coast Region by 30 percent each project year.

Texas Woman’s University, Denton, TX

Funding Amount: \$218,570

Focus: Expands an existing pilot nursing program to increase nursing school enrollment with an emphasis on recruiting racial and ethnic minority students and students from underserved areas. This project supports partnerships between a nursing program and health care organizations that provide nursing students with opportunities to serve vulnerable underserved populations in a clinical setting.

University of Tennessee at Chattanooga, Chattanooga, TN

Funding Amount: \$371,490

Focus: Expands enrollment in the BSN program to help the University of Tennessee meet regional needs in the nursing workforce. This project focuses on enhancing the nursing workforce and improving access to quality care for a 21-county region in southeast Tennessee and north Georgia marked by severe nursing shortages, critically underserved urban and rural populations, and poor health outcomes.

University of Texas Health Science Center of San Antonio, San Antonio, TX

Funding Amount: \$205,640

Focus: Supports a project to increase enrollment and retention of baccalaureate nurses, and particularly minorities, who will practice in medically underserved areas and health professional shortage areas. This project will increase access to health care by increasing the distribution and retention of a diverse, culturally-competent nursing workforce that can effectively adapt to various health care needs.

**B. E2 Grantees: Providing Education in New Technologies,
Distance Learning Methodologies**

George Washington University, Washington, DC

Funding Amount: \$200,979

Focus: Provides nursing students with a blended online and on-campus educational experience that meets the needs of students in geographically diverse settings. This project supports a curriculum that equips nurses to use teaching and learning technologies in order to support patient education and communication in care delivery. This project supports a culturally-competent diverse nursing workforce to address the needs of an increased workforce overall and a specific need for nurses in rural areas.

Georgia Health Sciences University, Augusta, GA

Funding Amount: \$167,128

Focus: Provides technology to enhance accurate assessment of geriatric residents in community residential clinical rotations, as well as decrease the need for clinical travel for on-site observations of students in remote locations. Faculty and participant residents interact with students enrolled in gerontology and community courses at the Medical College of Georgia and the University of South Carolina-Aiken Schools of Nursing. This project addresses the nursing shortage in Georgia and South Carolina, as well as the specific need for more qualified nurses to care for geriatric residents through the infusion of innovative and creative technology.

New York State Rehabilitation and Research Training Institute, Albany, NY

Funding Amount: \$226,981

Focus: Supports the Nurse Training Program: Pharmacology and Developmental Disabilities, a continuing education program for 400 registered nurses employed in New York State rehabilitation centers, adult homes, long-term care facilities, hospitals, community-based agencies, state and local clinics, and health departments. This program is provided statewide via videoconferences in response to the critical need for nurse training on pharmacology and technology to improve care of adults with developmental disabilities and to strengthen and enhance the capacity for nurse education, practice, and retention.

South Dakota State University, Brookings, SD

Funding Amount: \$488,368

Focus: Supports a Simulation Informatics Technology Enhancement program that prepares nursing students to practice in a quality and safety driven rural health care environment. This project utilizes human patient simulation, point of care technologies, informatics applications, and telehealth resources. This project supports the use of technology-based learning in order to address rural health needs in South Dakota.

Texas A&M University, Corpus Christi, TX

Funding Amount: \$395,305

Focus: Increases access to quality health care in Texas by developing a qualified, culturally-competent health workforce and strengthening and expanding the nursing workforce to help reduce the shortage in nursing. The College of Nursing and Health Sciences offers the eLine Military Program to residents of Texas who are members of the military or veterans with previous medical experience in an effort to address the dramatic shortage of nurses in Texas. The eLine Military Program facilitates access to a full curriculum for a BSN degree online; allows for college credit based on medical experience in the field while serving the military; and provides education, training, supportive services and job placement services. Supplemental funding of \$178,374 (included in the total funding amount) was awarded to conduct a feasibility study of challenges faced by veterans in completing undergraduate degrees in nursing.

University of Washington, Seattle, WA

Funding Amount: \$326,014

Focus: Supports a wound management education program for nurses in urban, rural, medically underserved, and health professional shortage areas in the Pacific Northwest. This project utilizes technology and distance learning methodologies in order to broaden the educational impact and increase the number of nurses prepared for expanded practice in wound management. This project addresses the significant health risks and financial cost of non-healing wounds.

University of Wisconsin, Madison, WI

Funding Amount: \$223,226

Focus: Promotes the eSupport for School Nurses Caring for Children with Chronic Conditions project in order to improve competencies for school nurses who work in a continually changing care delivery environment. This project provides accessible technology support for managing children's care and equips nurses with the knowledge and skills required to provide care for

children with chronic conditions. This project utilizes a distance learning platform to train and prepare school nurses to care for children with chronic conditions.

Virginia Highlands Community College, Abingdon, VA

Funding Amount: \$326,146

Focus: Revises the curriculum to integrate state-of-the-art technology at Virginia Highlands Community College to improve nursing workforce education, leading to higher quality care for the medically underserved population of the rural Appalachian communities served by the college. The curriculum change incorporates essential learning experiences through the use of advanced technologies in a high fidelity simulation environment and health care software applications including electronic medical records, computers, and computer-assisted medication administration systems.

Visiting Nurse Service of New York, New York, NY

Funding Amount: \$229,731

Focus: Supports the development of a “Geriatric Competency Course eLearning” education program in order to offer this program to its entire home health care nursing workforce. The Visiting Nurse Service of New York is the nation’s largest nonprofit certified home health care agency. This new eLearning program is a more efficient way to educate a greater number of trainees. This project increases the knowledge of home care nurses in caring for the growing number of older adults with complex care needs.

C. P1 Grantees: Establishing or Expanding Nursing Practice Arrangements

Board of Trustees of the University of Illinois at Chicago, Chicago, IL

Funding Amount: \$483,359

Focus: Expands the University’s Aviva Women’s Health and Midwifery practice to a new freestanding clinic in the medically underserved areas of Humboldt Park, Logan Square, and West Town in the northwest side of Chicago. This project increases access to midwifery for women living in underserved communities and who are high-risk and physically impaired. This clinic provides innovative, evidence-based care in multiple venues, while increasing knowledge and clinical competencies of health care providers, nursing faculty, and nursing students providing care for physically disabled and culturally diverse women.

East Tennessee State University, Johnson City, TN

Funding Amount: \$276,599

Focus: Expands primary care services to low-income residents of public housing in Appalachia by adding an on-site clinic in the community and in-home advanced practice nurse primary care and case management for older adults experiencing serious chronic illnesses. The project is designed to address episodic illness events and chronic care with particular attention to self-care and physical activity support. These efforts work to expand access to care as well as provide faculty practice and student learning opportunities.

George Mason University, Fairfax, VA

Funding Amount: \$328,945

Focus: Improves access to quality primary and behavioral health care for low-income people living in Fairfax County with chronic disease who lack health insurance. The program is called Mason Partners for Access to Healthcare, which is part of the nursing faculty access plan. Service learning and clinical activities for graduate and undergraduate nursing students provide experiences that promote future commitment and competence in providing care for the underserved.

Louisiana State University System, New Orleans, LA

Funding Amount: \$527,332

Focus: Supports a Nurse Managed Clinic in New Orleans East, an area which has had limited health care access since Hurricane Katrina. This project provides nurse practitioners and nursing students with training in delivering linguistically and culturally-competent primary care. This project improves access to primary health care, reduces health disparities, and enhances quality of life for a medically underserved community.

Loyola University Chicago, Maywood, IL

Funding Amount: \$273,064

Focus: Operates a high school health center that serves primarily working class and low-income minority adolescents in a suburb of Chicago. Offers intensive mental health services for at-risk adolescents, expands successful nutrition programming, and provides new health promotion and primary care services for children in local elementary schools.

Marquette University, Milwaukee, WI

Funding Amount: \$388,798

Focus: Supports a nurse managed clinic that provides primary health care services and enhances educational opportunities for students. This project addresses the needs of the urban underserved population in Milwaukee by supporting both a certified nurse-midwife practice as well as a peer breastfeeding support group in order to improve health outcomes for underserved urban Black or African-American women and their children. This project is located in a health professional shortage area in Milwaukee.

North Georgia College & State University, Dahlonega, GA

Funding Amount: \$597,220

Focus: Provides structured clinical experiences for undergraduate and graduate students in the School of Nursing at North Georgia College & State University. This project provides primary care and disease management programs for underserved Appalachian residents of Central North Georgia. It also provides support for a clinical facility that offers primary care services and holds clinics for chronic disease management of hypertension and diabetes.

New York University, New York, NY

Funding Amount: \$625,091

Focus: Supports the New York University College of Nursing Mobile Health Van Program, which serves the dual purposes of (1) improving access to primary health care in a medically underserved adolescent/immigrant population through school-based primary care services, health

literacy education, and linkages to community resources; and (2) offering clinical experiences to undergraduate and graduate nursing students. The program helps to develop primary care and community nursing clinical competencies, cultural competency, and community outreach skills required to meet the health needs of underserved communities and to prepare students for post degree careers in primary care and community health service delivery in underserved communities.

Regents of UW System for University of Wisconsin-Milwaukee, Milwaukee, WI

Funding Amount: \$249,967

Focus: Increases access and reduces fragmentation of services by linking multiple providers of medical, health, and social services in one central location. The project model employs primary and secondary prevention strategies, nurse case management services, and linkages with broad-based family support services to reduce health disparities in the Milwaukee community.

The Regents of the University of California, Los Angeles, CA

Funding Amount: \$270,000

Focus: Expands access to care at a nurse managed academic health center for homeless persons and families through added outreach activities, more convenient hours, and additional personnel. The project also enhances faculty practice with the addition of new faculty nurse practitioners with chronic illness expertise.

The Regents of the University of California, Irvine, CA

Funding Amount: \$291,929

Focus: Provides clinical training to undergraduate and graduate nursing students from the University of California, Irvine, and neighboring schools of nursing. This project increases access to primary care for underserved, largely uninsured, predominately Hispanic or Latino communities in Orange Country.

The Regents of the University of California at San Francisco, San Francisco, CA

Funding Amount: \$546,411

Focus: Expands and enhances primary health care services to a medically underserved, high-risk, predominately homeless, client population served by a practice arrangement. The project supports nursing leadership and clinical expertise to provide the highest quality health care to a client population that has significant health disparities and faces numerous barriers to care.

University of Detroit Mercy, Detroit, MI

Funding Amount: \$281,273

Focus: Supports the expansion of additional nurse managed practice sites in Detroit to train nurses in chronic disease management, health promotion, and primary care. This project increases access to health care for a city that is largely designated as a medically underserved area, and in large part, designated as a health professional shortage area. This project also emphasizes increased access to health care for underserved children.

University of Florida, Gainesville, FL

Funding Amount: \$310,652

Focus: Increases access to quality health care services for rural, medically underserved residents of north central Florida and expands the availability of structured clinical experiences for nursing students in a medically underserved area. In addition, the project continues to provide a quality community health education program to area residents and to increase the percentage of nursing graduates who practice in medically underserved areas.

University of New Mexico, Albuquerque, NM

Funding Amount: \$750,006

Focus: Establishes a new faculty nurse managed center to increase access to prenatal and primary health care for the rural ethnically diverse population of Sandoval County, New Mexico. This project meets faculty practice development aims that focus on preparing graduate and baccalaureate students to reduce disparities in rural and underserved communities.

University of South Alabama, Mobile, AL

Funding Amount: \$306,648

Focus: Provides after-hours, accessible, and holistic health care to patients and serves as a safety-net provider for clients seeking primary care services. The project integrates teaching and evidence-based practice to significantly increase access to primary health care and improve health outcomes for an underserved, vulnerable population.

University of Southern Indiana, Evansville, IN

Funding Amount: \$268,063

Focus: Supports a nurse-managed nurse practice arrangement clinic training site, which is designated both as a medically underserved area and as a health professional shortage area. This project provides a clinical training site for nursing and health professions students and increases access to primary care in a medically underserved, largely uninsured community.

Valdosta State University, Valdosta, GA

Funding Amount: \$284,017

Focus: Increases access to primary health care services to reduce financial burden among uninsured employed adults in Lowndes County (South Georgia) by expanding the nursing infrastructure of a community supported primary care center. The project uses a formal partnership between Valdosta State University College of Nursing and Lowndes County Partnership Health Center, a recently established Georgia Free Clinic. This project expands services for uninsured adults and eligible adult dependents, focusing on those who have no usual route of access to primary health care.

D. P2 Grantees: Providing Care for Underserved Populations and Other High-Risk Groups

Boston Health Care for the Homeless Inc., Boston, MA

Funding Amount: \$201,177

Focus: Operates a multi-faceted continuing education program that provides both day-to-day technical support and training as well as academic coursework for the nursing staff. This project supports a clinical nurse educator who provides hands-on training and support to more than 100 nurses throughout the organization, providing instruction on how to use new medical equipment, conducting competency reviews, and teaching key skills so that they are better equipped to provide care for the vulnerable populations that the program serves.

New York University, New York, NY

Funding Amount: \$392,597

Focus: Supports a nurse practitioner managed Elder Care Program for clinical training to develop competencies related to primary care and community health nursing of older adults. This project increases access to primary care for a rapidly increasing, vulnerable aging population, particularly those who reside in underserved communities.

The Regents of the University of California at San Francisco, San Francisco, CA

Funding Amount: \$418,663

Focus: Operates a wellness center to complement the services provided by the existing Nurse Managed Health Center. The services provided by the wellness center support health promotion, disease prevention, and client empowerment services to a high-risk client population, including both homeless adults and transitional-age youth ages 16-24 years.

The University of North Carolina at Chapel Hill, Chapel Hill, NC

Funding Amount: \$218,563

Focus: Supports the implementation of an evidence-based depression detection and management program for medically underserved adults, 60 years and older, living with chronic health conditions and functional limitations. This project provides training for 125 front-line service providers to screen; educate; utilize behavioral activation; and provide linkage, referral, and follow-up for clients in need of additional health and social services.

University of Alabama at Birmingham, Birmingham, AL

Funding Amount: \$287,706

Focus: Expands a current on-line neurovascular education program that aims to improve the early recognition and diagnosis of acute stroke patients, thereby increasing the numbers of patients treated. Quality metrics related to the provision of acute stroke services will be collected across all subscribing hospital sites. This project supports improved interdisciplinary acute stroke care through development of knowledgeable neurovascular nursing staff advocates.

University of Medicine and Dentistry of New Jersey, Newark, NJ

Funding Amount: \$273,050

Focus: Establishes a community-based health center where residents of an underserved community receive comprehensive health care services, including primary care, case

management and coordination, and health education and promotion including home visitation to high-need populations such as new mothers, the elderly, and frail. This project supports a transdisciplinary model of care to increase the cultural sensitivity of nurses and health professionals to help meet the complex needs of an underserved community.

University of Mississippi Medical Center, Jackson, MS

Funding Amount: \$144,081

Focus: Expands the current nurse managed center in the Jackson Public School District by adding two new sites in two public schools to reduce health disparities and improve access to primary health care in a medically underserved community in Hinds County, Jackson, Mississippi. This project also establishes a medical home at one site using an electronic health record, which covered 50 percent of the school-aged youth in the school site.

University of Tennessee at Chattanooga, Chattanooga, TN

Funding Amount: \$291,300

Focus: Supports a Get Healthy program that prepares nursing students and practicing nurses to improve health outcomes among individuals with severe and persistent mental illness. This program improves health outcomes of this population by developing a nursing workforce that understands the needs of this underserved and high-risk population and provides culturally specific integrated care. This program provides comprehensive integrated health care to persons with mental illness in their residential and community support facilities.

E. P3 Grantees: Providing Quality Coordinated Care

Board of Regents of the University of Nebraska Medical Center, Omaha, NE

Funding Amount: \$152,475

Focus: Provides rural family nurse practitioners with distance education training in order to develop competencies in emergency and urgent medical care practice in rural hospitals. This project addresses the shortage of health care providers in rural communities by increasing access to emergency care and impatient management in rural critical access hospitals.

Colorado Center for Nursing Excellence, Denver, CO

Funding Amount: \$300,813

Focus: Provides frontline nursing leaders with leadership education and skills in order to be successful in their roles and to adapt to the needs of long-term care. This project addresses the turnover rate of long-term care personnel in order to improve the quality of care and to increase the workforce available in the field.

Lourdes College, Sylvania, OH

Funding Amount: \$339,707

Focus: Provides educational programs and clinical experiences that focus on building competencies of nursing students and practicing nurses to provide safe, quality care for diverse and vulnerable populations. This project increases patient safety with a curriculum that develops competencies essential to providing safe and quality care. This project increases access for patients in northwest Ohio and southeast Michigan, especially rural and underserved populations.

North Shore—Long Island Jewish Health System, Inc., Great Neck, NY

Funding Amount: \$226,907

Focus: Supports a Taming Sepsis Educational program for registered nurses in critical care units and emergency departments. This education program specifically provides comprehensive education in early recognition and effective treatment of the septic patient. This project equips registered nurses with the clinical knowledge and communication skills necessary to care for critically ill patients in a culturally diverse and interdisciplinary care environment.

New York State Rehabilitation Research and Training Institute, Albany, NY

Funding Amount: \$226,981

Focus: Implements a statewide training program to increase the competencies of nursing personnel to provide quality geriatric care to individuals with developmental disabilities. Training topics include: Aging and Developmental Disabilities, Geriatric Assessment, Medical Update and Geriatric Individuals with Developmental Disabilities, Mental Health and Older Individuals with Developmental Disabilities, and End-of-Life and Developmental Disabilities.

Sanford Research/USD, Sioux Falls, SD

Funding Amount: \$309,529

Focus: Adapts existing nurse education modalities to the needs and concerns of neonatal intensive care units aimed at improving the level of care provided by rural hospital nurses. This project is a comprehensive, research-based educational intervention to address access to quality care and reduce mortality and morbidity rates for infants in South Dakota.

The Curators of the University of Missouri, Columbia, MO

Funding Amount: \$265,146

Focus: Expands the University's Leadership Development Academy for registered nurses in long-term care. This project includes an evidence-based curriculum with a strong focus on application to practice and peer consultation, a highly interactive classroom using participants' experiences as learning exemplars, a curriculum that builds on content and discussions from preceding classes, and the development of lasting colleague reference groups.

University of Connecticut, Storrs Mansfield, CT

Funding Amount: \$220,906

Focus: Provides nurses with the knowledge and skills required to practice safely and effectively with the corrections population. This project implements a nurse competency system to improve access and quality of patient care, patient satisfaction, and nursing workforce satisfaction. This project educates the 443 licensed nurses employed by the University of Connecticut under its Correctional Managed Health Care contract to provide quality nursing care to individuals who are incarcerated and/or transitioning to the community under the Connecticut Department of Corrections. The population includes men, women, and adolescents.

University of Pittsburgh, Pittsburgh, PA

Funding Amount: \$253,021

Focus: Provides a screening, brief intervention, and referral to treatment training for registered nurses working in the Emergency Department. The program provides nurses in community-based hospitals serving rural and other underserved populations with the knowledge and skills to

identify and address the needs of individuals who present to the emergency room as a result of alcohol and other drug use. This project impacts the health care provided by nurses to this target population and on reducing the health risks associated with alcohol and other drug use.

F. P4 Grantees: Developing Cultural Competencies Among Nurses

Louisiana State University Health Sciences Center, New Orleans, LA

Funding Amount: \$236,669

Focus: Provides nurses and nursing students with undergraduate and graduate courses and continuing education that address cultural competencies in disasters. This project addresses the health hazards and life-threatening damage present to vulnerable populations in disaster areas.

Ohio University, Athens, OH

Funding Amount: \$249,998

Focus: Provides a focused, accelerated degree program for individuals to become registered nurses, with an emphasis on cultural sensitivity and competence. This program addresses the shortage of nurses, the underrepresentation of racial and ethnic minorities, and the need for culturally-competent health care. This project increases enrollment of minority and disadvantaged individuals in nursing education and increases graduation rates of culturally-competent registered nurses.

G. R1 Grantees: Career Ladder Program – Career Advancement

California State University - Fresno, Fresno, CA

Funding Amount: \$97,454

Focus: Offers a BSN in the registered nurse-to-BSN track at multiple sites throughout the Central San Joaquin Valley. The program is designed to meet the needs of practicing associate degree-prepared registered nurses with courses offered as hybrids, and delivered via distance learning modalities, to accommodate the needs of working nurses wanting to continue their education.

New York City Health & Hospitals Corporation, New York, NY

Funding Amount: \$249,416

Focus: Provides on-site support for a BSN degree program available to 50 Health and Hospitals Corporation (HHC) registered nurses to better address the complex health care needs of HHC patients, while simultaneously providing a career ladder opportunity for HHC nurses. HHC provides the clinical learning experiences in designated educational units focusing on leadership/management skills and community-based care.

Pennsylvania State University, University Park, PA

Funding Amount: \$273,028

Focus: Provides an educational program that facilitates the associate of science degree prepared registered nurses in obtaining a BSN within 1 year. This project addresses the shortage of health care professionals in rural Pennsylvania by working to increase the number of bachelor degree

prepared registered nurses. The project is designed to broaden this educational program to benefit students who are location-bound.

Riverside City College, Riverside, CA

Funding Amount: \$324,376

Focus: Develops four career ladder programs using previously established infrastructure with six regional hospitals to address issues of nurse retention and career mobility. This project expands the number of culturally diverse and culturally-competent registered nurses in the traditional programs, as well as expands the number of nurses in advanced programs such as the BSN.

University of Miami, Coral Gables, FL

Funding Amount: \$246,017

Focus: Increases capacity in nursing programs by expanding the pool of clinicians who are qualified to teach as preceptors and clinical instructors. The program utilizes technologies to deliver course content and focused classroom time for clinical, simulation activities, and other hands-on learning exercises.

University of Tennessee at Chattanooga, Chattanooga, TN

Funding Amount: \$291,365

Focus: Enhances the nursing workforce for medically underserved regions of Tennessee and north Georgia through the implementation of a revised registered nurse-to-BSN curriculum. This project is designed to provide a career ladder for working registered nurses recruited to participate in this program, while enabling registered nurses to continue working in regional health facilities.

H. R2 Grantees: Developing and Implementing Internships and Residency Programs

Adventist Health System Sunbelt Healthcare Corp., Orlando, FL

Funding Amount: \$392,161

Focus: Expands and enhances an electronic distance learning residency program to encourage mentoring and the development of specialty practice in adult critical care to decrease the nurse workforce shortage in Florida. This project builds upon a current program by adding an electronic evaluation system and a formalized, electronic distance learning module in cultural competency to provide the 840 new project participants (500 nursing residents, 250 preceptors, and 90 mentors) with specific knowledge and skills to increase their ability to provide culturally-competent critical care to diverse populations.

Benefis Hospital, Great Falls, MT

Funding Amount: \$332,673

Focus: Offers new graduate American Indian nurses a 12-month internship at one of two clinical experience sites: Benefis Hospitals in Great Falls or Billings Clinic in Billings. This project includes 4 months of general medical surgical nursing and 8 months of rotating through specialty critical care areas. It also includes advanced coursework in critical care delivery and

certifications in advanced life support. The project aims to increase the number of available American Indian nurses by 11 percent who are adequately prepared for acute care and to positively impact the nursing shortage on Montana's Indian reservations.

Idaho State University, Pocatello, ID

Funding Amount: \$319,056

Focus: Supports a Rural Nurse residency program for rural nurses to develop basic practice competencies and advanced assessment and management skills. This project uses a central education agency to provide distance learning seminars, clinical experience, and technology, including personal digital assistants and simulation workshops.

Marquette University, Milwaukee, WI

Funding Amount: \$353,313

Focus: Provides a Supporting Onboarding and Retention of Rural Nurses residency program that meets the specific needs of new rural nurses and the associated unique nursing skills and competencies of practicing in rural hospitals with a particular focus on critical access hospitals. This project also will support partnerships with larger urban hospitals and academic institutions to provide additional resources to better meet needs of the rural hospital partners.

Mary Imogene Bassett Hospital, Cooperstown, NY

Funding Amount: \$243,352

Focus: Supports a nurse residency program that provides nurses with training in specialty practice areas. This project increases access to health care for the underserved population in the hospital's eight-county rural service region.

Penobscot Community Health Center, Inc., Bangor, ME

Funding Amount: \$225,000

Focus: Provides nurse practitioner residents with clinical training in acute, chronic, and preventative care. This project addresses the shortage of primary care physicians in Maine and increases access to health care for the uninsured, elderly, poor, and rural residents.

Provena Saint Joseph Medical Center, Joliet, IL

Funding Amount: \$210,405

Focus: Supports an innovative education and preparation program for registered nurses, enhancing the skills, knowledge, and competence of those who will be shepherding new graduate and transition nurses as preceptors and coaches. The program prepares registered nurses experienced in other areas (transition nurses) and new graduate registered nurses (nurse interns) for areas of high-risk practice in behavioral health, peri-operative, or neuroscience services.

Saint Mary's Foundation, Reno, NV

Funding Amount: \$258,988

Focus: Supports a Transition to Practice Program that prepares newly graduated nurses to effectively transition into the nursing career. This project addresses the nursing shortage and high turnover rate of new graduates in the Reno, Nevada, area by producing and maintaining competent registered nurses. This project increases access to health care in Washoe County, which is designated as both a medically underserved area and a health care professional shortage area.

Santa Rosa Community Health Centers, Santa Rosa, CA

Funding Amount: \$289,271

Focus: Supports a nurse practitioner residency program that prepares participants to be patient centered medical home clinicians and team members. This project collaborates with Sonoma State University Nursing and Primary Care faculty to design curriculum that strengthens culturally-competent clinical skills, understanding of public health and population management, data analysis skills, and organizational and leadership skills. This project increases access to primary care to the underserved and predominately Hispanic or Latino community in Santa Rosa.

The General Hospital Corporation, Boston, MA

Funding Amount: \$291,851

Focus: Builds clinical ethics capacity among registered nurses at Massachusetts General Hospital and outreach to Brigham and Women's Hospital and other Partners HealthCare entities. This project develops registered nurses in the specialty of clinical ethics through didactic teaching and a mentored practicum under the Clinical Ethics Residency for Nurses Project.

The New York & Presbyterian Hospital Inc., New York, NY

Funding Amount: \$221,373

Focus: Reduces health disparities of underserved populations through recruiting, retaining, and training graduate registered nurses transitioning into their professional roles to provide care to the underserved population in a compassionate and culturally-competent manner. The Nurse residency program provides direct support and development through didactic sessions and mentoring and provides new graduate nurses opportunities to participate in community outreach by working with local high schools to educate minority students on the benefits of the profession of nursing as well as the importance of maintaining a healthy lifestyle.

The Regents of the University of California at San Francisco, San Francisco, CA

Funding Amount: \$372,506

Focus: Supports a Nurse Practitioner Residency Program with a focus on primary care. This project develops and implements the clinical training and academic components of a nurse practitioner primary care residency program that strengthens core competencies and prepares participants for a fully independent role in the community health setting.

University of Illinois at Chicago, Chicago, IL

Funding Amount: \$77,144

Focus: Improves nurse recruitment and increases nurse retention in county public health departments. The project offers informal education to enhance the public health nurse's ability to identify errors and preventable harm, initiate corrective actions, provide support and guidance to nursing directors at the county government level, and foster multi-disciplinary collaboration to monitor public health nursing care indicators and initiate proactive corrective actions.

University of North Carolina at Chapel Hill, Chapel Hill, NC

Funding Amount: \$64,246

Focus: Implements an innovative set of change strategies to improve collaboration and communication between registered nurses and other members of the health care team, increase registered nurse involvement in decisions about nursing work and patient care, and increase cultural competence. The project will benefit rural and underserved populations by stabilizing the nursing workforce, which is essential to provide access to quality health care.

West Virginia University Research Corp, Morgantown, WV

Funding Amount: \$42,271

Focus: Increases recruitment and enhances retention of registered nurses through a learner-centered, cost-effective orientation focused on the improvement of care for critically ill patients. The project matches level of competency with orientation level and promotes nurse involvement in the organizational and clinical decision-making processes of the orientation.

I. Faculty Development: Integrated Technology into Nursing Education and Practice

Drexel University, Philadelphia, PA

Funding Amount: \$299,963

Focus: Operates a collaborative agreement between the nursing programs of Drexel University, the Community College of Philadelphia, Bloomsburg University of Pennsylvania, and Howard University to incorporate the use of technology in their respective nursing undergraduate and graduate programs. Nursing faculty of these schools participate in training programs to ensure faculty competence in technologies designed to enhance the nursing education curricula.

Hunter College, City University of New York, New York, NY

Funding Amount: \$264,599

Focus: Provides support to a nursing collaborative for faculty development in the use of information and other technologies through a consortium in technology. The New York City Nursing Education Consortium in Technology will impact nursing education during a 5-year period by disseminating expertise and resources through learning-centered technological strategies within 12 City University of New York schools of nursing and will prepare 350 nurse educators to use culturally-competent simulated learning.

University of South Florida, Tampa, FL

Funding Amount: \$253,715

Focus: Develops and implements a nursing faculty development program based on documented educational and clinical practice needs in the use of simulated learning, informatics, and telehealth. This 6-month program is designed to increase faculty knowledge of health informatics and support faculty in the use of information and other technologies for nursing education and practice.

University of Washington, Seattle, WA

Funding Amount: \$298,056

Focus: Supports a regional multi-institutional nursing collaborative that develops faculty expertise in using simulation, clinical informatics, telehealth, and distance learning technologies. This project assists faculty in creating pedagogical frameworks for teaching with technology, processes for integrating technological tools into nursing, assessment and evaluation tools, and competency standards for teaching using technology.

Vanderbilt University Medical Center, Nashville, TN

Funding Amount: \$256,046

Focus: Operates the Informatics, Simulation, and Telehealth Initiative to address faculty development utilizing a multidisciplinary approach to education that strengthens patient safety and quality. This project uses the strength of Vanderbilt University in the area of informatics, and collaboration with the University of Kentucky in the areas of simulation and telehealth, to complete faculty development in these three major areas.

J. Nursing Assistant and Home Health Aide

American Red Cross, Greater Cleveland Chapter, Cleveland, OH

Funding Amount: \$341,303

Focus: Utilizes funds to expand the geographic reach of its current Nurse Assistant Training program (NAT).⁵ The NAT Program is currently a comprehensive 140-hour, 4-week program initially developed by the Red Cross in 2002. The expanded program is offered in one site that serves two Ohio counties with significant health care and employment needs (Mahoning and Trumbull). The first class of the Mahoning/Trumbull NAT began in January 2011, and 240 local residents were trained as nurse assistants/home health aides over the 36-month grant period. The total amount included a \$100,000 supplemental award to increase training to nursing assistants and home health aides in the areas of care coordination, behavioral health, and social support.

American National Red Cross, Santa Rosa, CA

Funding Amount: \$139,350

Focus: Produces well-trained assistants and aides whose success is supported by continuing education through the development of a new nurse assistant and home health aide training program, supported by five American Red Cross Chapters working under the leadership of the Red Cross Sonoma & Mendocino Counties Chapter. These replicable programs work to create qualified new workers to alleviate the shortage of aides and nurses in the state, thereby creating greater and improved health care options for underserved residents of Northern California.

⁵ Please note that the American Red Cross' Nurse Assistant Training program is not the same as HRSA's Nurse Anesthetist Traineeship program, which also uses the acronym NAT.

The College of Menominee Nation, Keshena, WI

Funding Amount: \$250,000

Focus: Supports the development of a new home health aide training program in the College's Technical Education Department. The project works to increase the availability of home health aides to meet the regional demand in rural and tribal communities and develop a pipeline to increase racial and ethnic diversity in the nursing profession.

Erie 1 BOCES (Board of Cooperative Educational Services), West Seneca, NY

Funding Amount: \$350,000

Focus: Expands training to a greater number of certified nursing assistants and home health aides to raise the level of care and professionalism provided by these entry-level workers. Through this project, Erie 1 BOCES trains 16 classes of 10 students each, resulting in 160 certified nursing assistants and home health aides combined per year. This influx of well-trained workers allows long-term care facilities and home care agencies to better meet the needs of the elderly and underserved. The total amount includes a \$100,000 supplemental award. The supplemental award will help enhance the original grant program by preparing certified nursing assistants and home health aides with "soft skills" that include providing behavioral and social support, caring for mentally challenged/confused patients (i.e., dementia, Alzheimer's) and working with uncooperative clients.

Hazard Community and Technical College, Hazard, KY

Funding Amount: \$248,485

Focus: Expands and implements an enhanced Nurse Aide/Direct Support Worker program to prepare students to work in clinical and home health settings and to meet the current and future demands for nurse aides. The Nurse Aide/Direct Support Worker Program consists of interdisciplinary classes, a student/alumni support group for providing community service activities, and other service work skill development.

Jewish Vocational Service and Employment Center, Chicago, IL

Funding Amount: \$250,000

Focus: Expands a current home health aide training program to assist an additional 400 or more low skilled, low-income project participants in underserved communities obtain education and training suitable for entry-level career paths in health care. Program delivery consists of a competency-based contextualized curriculum.

Penn Asian Senior Services, Jenkintown, PA

Funding Amount: \$348,993

Focus: Provides a competency-based, culturally sensitive and language appropriate uniform-curriculum Home Health Aide and Certified Nursing Assistant Program to 100 individuals from the diverse Chinese, Cambodian, Korean, Vietnamese and other Asian communities in the greater Philadelphia area. This project prepares students to be qualified home health aides and state certified nursing assistants, alleviating barriers to quality health care for the elderly Asian population in the area. The total amount includes a \$99,074 supplemental award to develop curricula and educational materials to teach home health aides skills for medication management and administration and care coordination. The supplemental award will also add care

coordination and follow-up to the existing curriculum to prepare home health aides for participation in care plan development and implementation for clients.

Southwestern Oregon Community College, Coos Bay, OR

Funding Amount: \$349,547

Focus: Uses a statewide systems approach to increase training capacity through a coordinated, collaborative effort that involves 8 of Oregon's 17 community colleges; regional workforce investment boards; long-term care facilities and their state association, Oregon Health Care Association; hospitals; and aQuire Training Solutions, an online training company. The project focuses on employment in rural and underserved communities around the state. The total award amount includes a \$100,000 supplemental award that will expand the current online nursing assistants and home health aide curriculum to include the skills areas of medication administration, care coordination and behavioral and social support, medication administration, and care coordination.

Sears Methodist Retirement System, Inc., Abilene, TX

Funding Amount: \$250,000

Focus: Offers a Certified Nursing Assistants Training program that is composed of a concentrated 2-week training and a 4-month continuing education career ladder component created to enrich their professional with in-depth experiences designed to increase their leadership qualities, skill levels, and critical thinking. The additional education aims to empower staff, create an atmosphere of job satisfaction, and reduce the turnover rate.

St. Joseph Medical Center, Reading, PA

Funding Amount: \$249,821

Focus: Implements and evaluates a uniform curriculum to train qualified nursing assistants and home health aides within Berks County, Pennsylvania. The project is specifically designed to address the unique challenges faced by a small city in recruiting and training a strong foundation of nursing assistants and home health aides to meet the primary health care needs of its residents.

IV. FY 2012 – New Competitions

In FY 2012, new opportunities for grant funding were available for IPCP projects and CCIECP. All new applications for NEPQR program awards underwent an independent and objective peer review, where a committee of experts determined the technical merit of grant applications based on review criteria and subsequently recommends applications for funding. The number of applications funded, out of those recommended by the review committee, was determined by available appropriations. Funded applications represent those that were ranked the highest and that includes those that received a preference for substantially benefitting rural and/or underserved populations or that help meet the public health nursing needs in state or local health departments. As a result of the independent objective review process, 24 awards were made for IPCP projects and a single award was made to establish a CCIECP.

A. Interprofessional Collaborative Practice

Armstrong Atlantic State University, Savannah, GA

Funding Amount: \$490,146

Focus: Supports the transition of St. Mary's Health Center from a nurse-managed health center to a primary care home, through the creation of a core interprofessional collaborative practice team with support from a practice partner consultant team. Innovations include the use of interprofessional practice partner consultants, the inclusion of a social determinants focus, the use of technology for consultant meetings and electronic apps for patient health education, and on-line resources for education and skill development in social determinant areas.

Case Western Reserve University, Cleveland, OH

Funding Amount: \$265,808

Focus: Develops a clinical demonstration project that will promote safe, efficient, and effective care in an innovative program, providing health promotion, education, and prevention strategies by incorporating nurse practitioner students and faculty in a dental clinic. This innovative transformational interprofessional educational program will pair nurse practitioner students with dental students to promote shared decision making, making use of the opportunity to meet with patients and increasing access to care for the underserved population currently seen in the clinic.

Duke University, Durham, NC

Funding Amount: \$227,906

Focus: Enhances transition-to-practice for interprofessional rural health care teams by implementing a 12-month fellowship project that focuses on building the interprofessional skills, behaviors, and attitudes necessary for the provision of safe and effective, patient-centered care and that supports a team-based collaborative practice environment. The project will create an innovative, nurse-led transition-to-practice fellowship. The fellowship will culminate in an evidence-based project that supports the collaborative practice of a diverse interprofessional team (Nursing, Pharmacy, Respiratory Therapy, Physical Therapy, and Radiology/Imaging) of health science graduates delivering team-based patient care in rural communities and targeting specific patient outcomes.

El Pueblo Health Services Inc., Bernalillo, NM

Funding Amount: \$498,520

Focus: Responds to the need for demonstrated collaborative practice solutions to preventable yet widespread unmet oral health needs in Sandoval County, New Mexico. The El Pueblo Health Services Federally Qualified Health Center look-alike is partnering with faculty of the University of New Mexico's College of Nursing and the Department of Dental Medicine to develop an interprofessional practice based on core competencies for interprofessional practice. The project will build a primary care oral health care delivery model to improve the health of its patients. The project aims to create an innovative interprofessional primary care oral health delivery model by bringing together a team of dental, medical, and nursing providers responding to the Sandoval County community. This team will address the health of patients, families, and communities by reducing oral health disparities and their impacts on overall health in a New Mexico Community Health Center environment.

Emory University-Nell Hodgson Woodruff School of Nursing, Atlanta, GA

Funding Amount: \$498,377

Focus: Strengthens and expands the provision of interprofessional collaborative practice, specifically primary palliative care, to a large and diverse group of underserved patients and their families. Primary palliative care involves team-based symptom management and communication of care goals in clinical services that are typically oriented toward aggressive diagnosis and cure. Primary palliative care can address pain and symptom issues that can adversely affect quality of life and may contribute to unnecessary and costly medical care.

Fayetteville State University, Fayetteville, NC

Funding Amount: \$394,516

Focus: Establishes a comprehensive Interprofessional Behavioral Center that focuses on the biopsychosocial health of military personnel and veterans and their families. The Department of Nursing at Fayetteville State University will lead this collaboration with the departments of Social Work, Psychology, Fort Bragg Veteran's Center, and VA Medical Center. The project will support an interprofessional collaborative practice model for staff by providing high quality culturally-centered and well-coordinated care that meets the biopsychosocial health needs of diverse populations including military families. The services will include the assessment and management of behavioral-based health problems, evidenced-based prevention, early intervention, complementary and alternative therapies, and promotion of psychosocial wellness. The populations served will be dual with (1) clinical services for the returning military services personnel, families, and veterans residing in the surrounding communities; and (2) an educational setting for a newly developed master's degree for family psychiatric mental health nurse practitioner students and undergraduate students enrolled in nursing, social work, and psychology programs.

Lehigh Valley Hospital Inc., Allentown, PA

Funding Amount: \$496,512

Focus: Develops interprofessional strategies and training to facilitate a newly implemented, innovative Community Care Team model. The project will be conceptualized and developed by Lehigh Valley Hospital, Inc. (LVH) and integrated with Patient Centered Medical Homes to meet the needs of underserved populations with health disparities in Allentown, Pennsylvania. The practices and community care teams involved in this project provide care for Allentown's urban population, many of which are underinsured or uninsured. With both of the LVH campuses located in the Allentown region, the project will focus on developing an interprofessional collaborative model to meet the primary health care needs of its diverse, underserved population.

Michigan Department of Community Health, Lansing, MI

Funding Amount: \$492,596

Focus: Builds an innovative state model in interprofessional collaborative practice by implementing Grand Valley State University's West Michigan Interprofessional Initiative model in two clinics located in designated health professional shortage areas. This model will include a strategic dissemination plan that leverages partnerships, collaboratives, and community stakeholders to encourage adoption by providers interested in transforming patient care delivery and outcomes. The interprofessional model will be piloted in two urban nurse managed primary

care facilities focusing on, at minimum, 175 children and adults who are obese with associated co-morbidities.

Ohio State University, Columbus, OH

Funding Amount: \$500,000

Focus: Expands a part-time primary care clinic into an innovative nurse practitioner-led interprofessional collaborative practice called The Ohio State University College of Nursing Total Health & Wellness Center, which will integrate mental health and primary care services for a high-risk population in inner-city Columbus, Ohio. The purpose of this center is to provide integrated team-based patient/population-centered quality health care that is safe, efficient, effective, evidence-based, and equitable.

Oregon Health and Science University, Portland, OR

Funding Amount: \$488,067

Focus: Involves collaboration between the Oregon Health and Science University School of Nursing, the School of Medicine, and the Global Health Center to create an Interprofessional Care Access Network (I-CAN). The I-CAN project creates a collaborative model for clinical practice and education that enhances health care experiences, improves population health outcomes, and reduces health care costs for disadvantaged and underserved patients, families, and populations in established partner neighborhoods. This project will expand community partnerships to create neighborhood centers for academic and practice partnerships with a nurse faculty in residence working with students and agency staff to address population health.

Rutgers, The State University of New Jersey, Newark, NJ

Funding Amount: \$499,872

Focus: Centered on the creativity within the disciplines of nursing, social work, pharmacy, medicine, health informatics, and violence prevention, this project addresses the leading causes of morbidity and mortality in an urban multi-ethnic, underserved community. The Rutgers College of Nursing creates, develops, implements, and evaluates an interprofessional collaborative practice model utilizing a system of three nurse-led care cores to improve the health and safety of individuals, families, and the community of Newark, New Jersey. The model will be integrated into a newly launched nurse-managed Health and Wellness Center.

The Regents of the University of California at San Francisco, San Francisco, CA

Funding Amount: \$499,936

Focus: Creates a unique nurse-managed interprofessional practice model by expanding and refining the successful comprehensive primary care model at Glide Health Services, a University of California, San Francisco, School of Nursing faculty practice arrangement serving a medically underserved, predominately homeless client population in San Francisco's Tenderloin District. The project expands and enhances the interprofessional collaborative practice core competencies by creating an environment where all team members, including professional staff, health care professional learners, health workers, clients, and community partners practice to the full extent of their competency and education.

The Vanderbilt University, Nashville, TN

Funding Amount: \$436,181

Focus: Advances a partnership with the Vanderbilt School of Nursing, a University pharmacy program, and a nonprofit subsidized housing provider to open a primary care clinic in five housing complexes serving low income individuals and families. The primary care model at Mercury Courts is led by a nurse practitioner with collaborative partners from pharmacy, professional counseling (Master's prepared), and medicine. This primary care site serves underserved and vulnerable populations in urban Davidson County, Tennessee. House calls will be provided to medically fragile patients as part of this interprofessional collaborative practice model.

Trustees of Boston College, Chestnut Hill, MA

Funding Amount: \$440,835

Focus: Promotes a collaboration between Boston College School of Nursing and Brigham and Women's Hospital using an interprofessional collaborative practice model to focus on effective, comprehensive management of patients with diabetes mellitus. The project will implement an interprofessional education program, led by Boston College School of Nursing, to ensure that health care students and team members are prepared to manage individuals with diabetes. The project will expand an existing interprofessional diabetes management team at Brigham and Women's Hospital to provide comprehensive diabetes care to surgical patients with poorly controlled diabetes.

University of Alabama at Birmingham, Birmingham, AL

Funding Amount: \$454,378

Focus: Implements an innovative, interprofessional collaborative practice model at the Providing Access to Healthcare (PATH) Clinic, an ongoing partnership between Mission to Provide Opportunities With Empowering Results (M-POWER) Ministries and the University of Alabama at Birmingham School of Nursing. This Nurse Managed Center was established within an existing free clinic facility in a high-need area in May 2011. This project will expand the current PATH Clinic; and a collaborative, team-based practice model will be developed that includes social work, nutrition, optometry, medicine, informatics and health information management, and nursing. The project will expand the current primary care and chronic disease management PATH Clinic at M-POWER Ministries from 4 hours per week to 18 hours per week (three 6-hour days), starting September 2012, and incorporate and train a diverse group of health professionals to work together in an interprofessional collaborative practice model.

University of Arizona, Tucson, AZ

Funding Amount: \$492,220

Focus: Creates a novel, comprehensive interprofessional collaborative practice primary care environment (*Health 360*) that will achieve coordinated, connected, and comprehensive care for patients and families with actual or increased risk of chronic diseases. Nurse practitioners will demonstrate leadership in interprofessional teams. The project provides clinical training opportunities for nursing and other health professional students to promote mastery of interprofessional collaborative practice core competencies.

University of Kansas Medical Center Research Institute, Inc., Kansas City, KS

Funding Amount: \$359,700

Focus: Develops, implements, evaluates, and disseminates a patient-centered interprofessional collaborative practice model within an acute care pediatric unit at the University of Kansas Hospital. The focus is the delivery of interprofessional collaborative care in an acute care setting and includes an interprofessional transitional care team to assist at-risk children with special health care needs, cystic fibrosis and hematology/oncology concerns and their families, or caregivers to transition from the hospital to home and back to their primary care providers.

University of Missouri-Kansas City, Kansas City, MO

Funding Amount: \$483,286

Focus: Creates an interprofessional collaborative practice model at Hope Family Care Center and expands an existing interprofessional practice environment at Samuel U. Rodgers Health Center. The interprofessional team includes nurse practitioners, other health professionals, and students engaging in collaborative practices who provide health care services to the underserved populations in Kansas City, Missouri. The project is a collaboration between the University of Missouri-Kansas City School of Nursing and the Schools of Dentistry and Pharmacy. The community-based health facilities are located in a health professional shortage area and serve an urban population living at 200 percent of the federal poverty level.

University of New England, Portland, ME

Funding Amount: \$389,091

Focus: Trains nurse leaders for interprofessional practice environments that reach underserved communities, specifically immigrant and refugees in the Portland, Maine area. Focuses on innovative strategies grounded in team based collaborative care and cultural competence that will train health professionals and community health workers. The project develops a satellite community-based clinic for underserved housing authority populations as part of an existing Federally Qualified Health Center in Portland.

University of Pittsburgh, Pittsburgh, PA

Funding Amount: \$397,841

Focus: Creates a team-based interprofessional collaborative practice intervention that leads to efficient, quality care for substance use patients in rural populations. The interprofessional team is comprised of three diverse professionals: nurses, public health workers, and behavioral health counselors. The intervention includes WebEx online conferences, substance use content, WebEx case studies, interprofessional dialogues, and focus groups. The project is designed to improve the capacity of health care workers to screen, intervene, and refer to treatment those who use substances in rural settings located within the Tri-State Regions of Pennsylvania, West Virginia, and Ohio.

University of Tennessee, Chattanooga, TN

Funding Amount: \$470,243

Focus: Cultivates at least nine interprofessional collaborative practice teams in which emergent nurse leaders will engage in team building, collaborative problem-solving, and care-coordination with interprofessional peers. In response to regional health indicators and workforce needs, the University of Tennessee, Chattanooga designed the Interprofessional Collaborative Practice Approach for Geriatric Education Strategies. The project provides interprofessional clinical

training opportunities for nursing students using high-tech simulation and standardized patients supported by a virtual learning environment to facilitate interprofessional engagement and will demonstrate innovation by focusing on the continuum of care and patient transitions among care settings.

University of Tennessee, Knoxville, TN

Funding Amount: \$409,814

Focus: Provides support for the University of Tennessee-Knoxville College of Nursing to create an interprofessional collaborative practice environment providing comprehensive health care services for patients and their families in a nurse-managed, school-based health clinic system. Interprofessional care provided to patients and their families at the Vine School Health Center, a joint cooperative between the College of Nursing and Knox County Schools, strengthens nursing's capacity to advance the health of patients, families, and communities in collaboration with professional educators and social workers.

University of Texas Medical Branch, Galveston, TX

Funding Amount: \$296,176

Focus: Creates an interprofessional practice environment that delivers high quality care to a vulnerable population of medically fragile children (MFC) through an innovative collaboration with Child Protective Services (CPS). The program provides practice opportunities for nurses and other health profession students in the client's home, thereby stressing the importance of community, family-based service. Faculty from nursing, medicine, and physical/occupational therapy will work together to develop a website that will orient students to collaborative team care, CPS services, and the special needs of MFC patients.

University of the Incarnate Word, San Antonio, TX

Funding Amount: \$384,597

Focus: Integrates the clinical resources of a primary care practice setting with the academic resources of nursing, optometry, pharmacy, physical therapy, and health care administration within a faith-based, private university in the provision of interprofessional collaborative care. The University of the Incarnate Word, School of Nursing and Health Professions strengthens nursing's capacity to advance the health of patients, families, and communities by leading the implementation of patient-centered interprofessional collaborative practice within a Federally Qualified Health Center.

B. Coordinating Center for Interprofessional Education and Collaborative Practice

Regents of the University of Minnesota, Minneapolis, MN

Funding Amount: \$750,000

Focus: The National Center for Interprofessional Practice and Education accelerates the transformation of health care in the United States through the active engagement and connecting of the interprofessional education and interprofessional collaborative practice communities. The health care transformation creates a new nexus between the rapidly transforming health care system and higher education. The National Center for Interprofessional Practice and Education

uses an approach that builds upon the significant past and current efforts and stakeholder commitments that have laid the foundation for interprofessional principles, guidelines, and goals. For FY 2012, a single cooperative agreement to create a CCIECP was awarded. The NEPQR program provided \$750,000 of the total funding and the Primary Care Training Enhancement Program (PHS Title VII Section 747) provided \$22,122 for a total award of \$772,122. Three leading foundations focused on health, health professions education, and patient care announced a public-private partnership and pledged additional support for the new National Center for Interprofessional Practice and Education. The Josiah Macy Jr. Foundation, Robert Wood Johnson Foundation, and Gordon and Betty Moore Foundation have collectively committed up to \$6 million in grant support over 5 years.

V. Conclusion

As discussed above, given the program's broad authority, NEPQR grantees support the needs of the nursing workforce by enhancing nursing education, improving the quality of patient care, increasing nurse retention, and strengthening the nursing workforce. In FY 2012, NEPQR program grants and contracts supported three priority areas of education, practice and retention. Based on the successful implementation of FY 2012 NEPQR program activities, which support the dynamic changes taking place in the nursing profession, HRSA will continue to support these efforts and similar projects while addressing developing workforce needs.