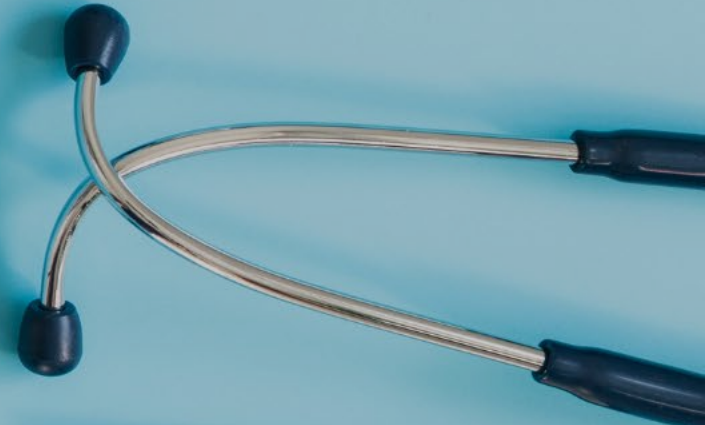




# Health Professions Education & Training (HP-ET) 101: Key Concepts to Successfully Plan, Implement, and Grow an HP-ET Program at Your Health Center

*September 12, 2023 | WVPCA*

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Access to Care & Clinician Support

Recruitment & Retention

National  
Health  
Service Corps

Resources

Training

Networking

# STAR<sup>2</sup> CENTER



- National Cooperative Agreement awarded in 2014
- Funded by the Bureau of Primary Healthcare
- One of 21 National Training and Technical Assistance Partners (NTTAPs)
- Produces **FREE** Resources, Training, and Technical Assistance

[www.chcworkforce.org](http://www.chcworkforce.org)

Contact us: [info@chcworkforce.org](mailto:info@chcworkforce.org)

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# LEARNING OBJECTIVES



- Understand the key role HP-ET and pathway development play in recruiting and retaining mission-driven staff and supporting community representation, diversity, and equity at health centers
- Identify key aspects of designing and implementing an HP-ET program (staffing, partnerships, financial planning)
- Understand the link between staff satisfaction and the opportunity to work with HP-ET learners
- Recognize the importance of justice, equity, diversity, and inclusion (JEDI) in developing HP-ET programs
- Learn key steps to plan for, build, and support a health center HP-ET program

# TODAY'S AGENDA



- Introduction & Ice Breaker
- What is Health Professions Education & Training (HP-ET)?
  - Comprehensive Workforce Planning
  - Recruitment & Retention
  - Justice, Equity, Diversity, and Inclusion (JEDI)
- Designing an HP-ET Program
- Financial Assessment & Planning
- Implementation & Maintenance
- Q&A
- Next Steps



## DISCUSSION QUESTION

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**What did you want to be when you grew up?**

# Introduction to Health Professions Education and Training





# WORKFORCE IS THE FUEL

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A health center with a **full tank** identifies workforce as an essential organizational issue, invests in appropriate operational and staffing resources, and has some key features...



# CORE COMPONENTS

Data-Informed  
Workforce Plan

Equitable &  
Effective  
Compensation  
Structure

Positive Culture  
Focused on  
Engagement

Tested  
Recruitment &  
Retention  
Strategies

Health  
Professions  
Training Program

Chief  
Workforce  
Officer

High-Functioning  
Managers

Policies that  
Support Diversity  
& Cultural  
Respect

# HEALTH PROFESSIONS TRAINING PROGRAM

Core Component



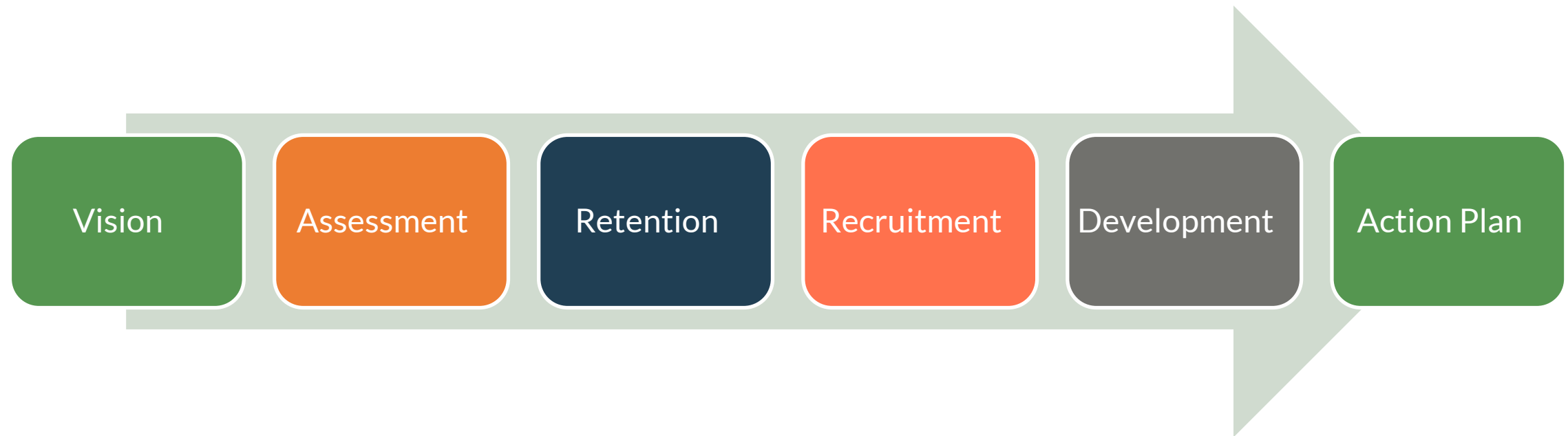
Provides coordinated education and training to developing health professionals and ensures current clinicians can engage in teaching.

# COMPREHENSIVE WORKFORCE PLAN

## Definition & Components



A comprehensive workforce plan describes the process for which a health center assesses the needs of its patients and community while identifying strategies for building and sustaining its capacity to support those needs through qualified personnel that embody mission-driven, equitable, and inclusionary values.



Click [here](#) to access the Comprehensive Workforce Plan Definition

# COMPREHENSIVE WORKFORCE PLAN

CWP & HP-ET Plan



**Comprehensive  
Workforce Plan (CWP)**



**Health Professions  
Education & Training  
(HP-ET) Plan**  
*(also referred to as  
Strategic Workforce Plan)*

*\* HP-ET Plan is one component of a CWP*

# Components of a Comprehensive Workforce Plan



HP-ET Plan



## DISCUSSION QUESTION

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**What is your definition of HP-ET?**

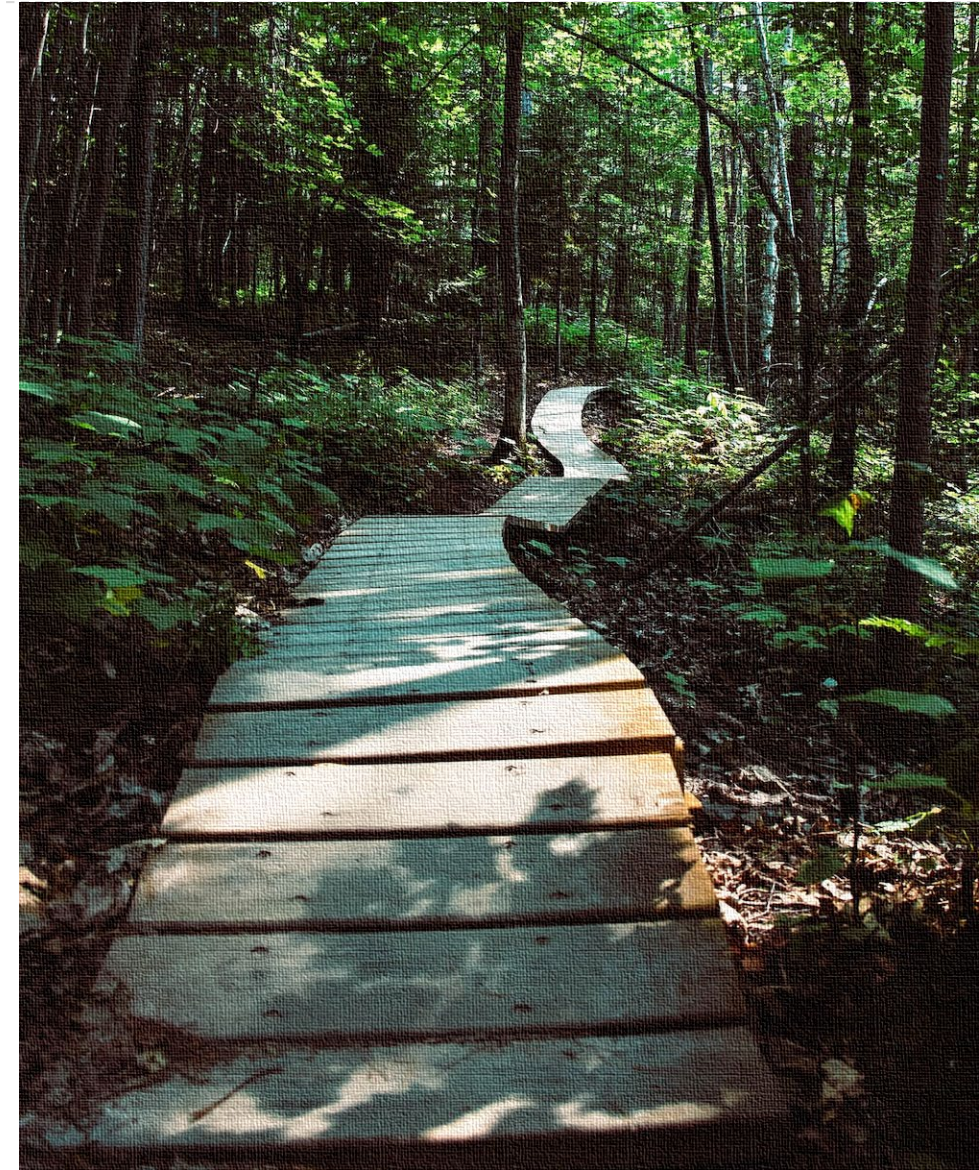
# WHAT IS HP-ET?

Terminology



~~“Pipelines”~~

**“Pathways”**





# WHAT IS HP-ET?

## Working Definition



Enhance health centers' capabilities to recruit, develop, and retain their workforce by exposing health and allied health professions students, trainees, and residents to education and training programs at health centers.

*(may also include non-clinical positions)*



# HP-ET FOR RECRUITMENT & RETENTION



## Retention & Recruitment:

“Family medicine residents who graduate from...Teaching Health Center (TaHC) training residencies are nearly **twice as likely to pursue employment in safety-net settings** compared with non-THC graduates. This trend has been consistent over the past few years...”

# HP-ET FOR RECRUITMENT & RETENTION



## Recruitment:

Exposure to health centers

Working with underserved population

Developing connections with HC staff

Connecting with clients

Active recruiting opportunities

Getting to know candidates

New hires require less time to get up to speed



# HP-ET FOR RECRUITMENT & RETENTION



## Retention:

Helping to teach and shape the next generation

Honing own skills

Potential perks for preceptors (CEUs, additional training, designated time to work with students)

Building team solidarity with current and future staff





## CONTEXT & CONCERNS

- Staff time commitment/added workload
- Finding partners
- Accreditation
- Leadership buy-in
- Adequate staffing
- Adequate learner pool
- Cost

## REALISTIC EXPECTATIONS

- Different requirements for different programs
- Building partnerships vs going it alone
- Increased staff/resource demand
- Time to ramp up and see results

# HP-ET TO “GROW-YOUR-OWN”

## Benefits & Return on Investment (ROI)



- Increased employee satisfaction and retention equals less turnover
- Positive economic impact to community
- Less time to fill open positions
- Greater access to care
- Increased efficiency



\* Nearly 60% of medical residents practice within 100 miles of their residency program and more than half stay in the same state.

# WHAT IS JEDI?



# JEDI DEFINITIONS



**(Social) Justice:** An analysis of how power, privilege, and oppression impact the experience of our social identities.

**Equity:** The notion of being fair and impartial as an individual engages with an organization or system. Acknowledgement that **not everyone has been afforded the same resources and treatment while also working to remedy this fact.**

**Diversity:** Having a **variety of social identities** (sex, race, gender, class, religion, ability, health, ethnicity, migration history and many others) that spend time in shared spaces, communities, institutions or society.

**Inclusion:** The notion that an organization or system is welcoming to new populations and/or identities. This new **presence is not merely tolerated but empowered to contribute meaningfully.**





## **GROUP ACTIVITY**

---

**Identify ways HP-ET can support JEDI?**

**BREAK – 5 min**



# Designing a Health Professions Education and Training Program



# DESIGNING AN HP-ET PROGRAM

## Models & Approaches



- Accredited Programs
- Certificate Programs
- Apprenticeships
- Clerkships & Internships
- Fieldwork/Field Placements
- Partnerships with Academic Institutions or other Health Centers
- Graduate Programs
- Supervision for Licensure
- Mentorships
- Rotations
- Shadowing
- Educational Outreach
- And Much More...

# DESIGNING AN HP-ET PROGRAM

## Key Considerations

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- Need
- Organizational Culture
- Buy-In & Engagement
- Available Faculty
- Partnerships
- Diversity, Equity, and Inclusion (DEI)
- Curriculum Development
- Capacity
- Financial Feasibility & Sustainability
- Gap Analysis
- Location/State Requirements
- Alignment with Organizational Strategy & Objectives
- Building a Culture of Education

# DESIGNING AN HP-ET PROGRAM

## Questions to Consider

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- What staffing shortages have you seen in the last five years? Three years? One year?
- Are any staff roles becoming harder to recruit or seeing greater turnover?
- Are there trends in clinical staff availability in your region or state that indicate those roles may be harder to fill in the future?
- Are there staff in your health center that have expressed an interest in teaching or cross-skilling/up-skilling that can take those roles?
- Are there any current staff that have expressed interest in receiving training to take on jobs or roles that are hard to fill?

# DESIGNING AN HP-ET PROGRAM

## The Value of Human-Centered Design



### Inspiration

How to better understand people?  
And, engage them in the process



### Ideation

Generate ideas, test, identify opportunities, and refine solutions



### Implementation

Make the design available and maximize its impact



# DESIGNING AN HP-ET PROGRAM

## A Human-Centered Design Approach



### DISCOVER

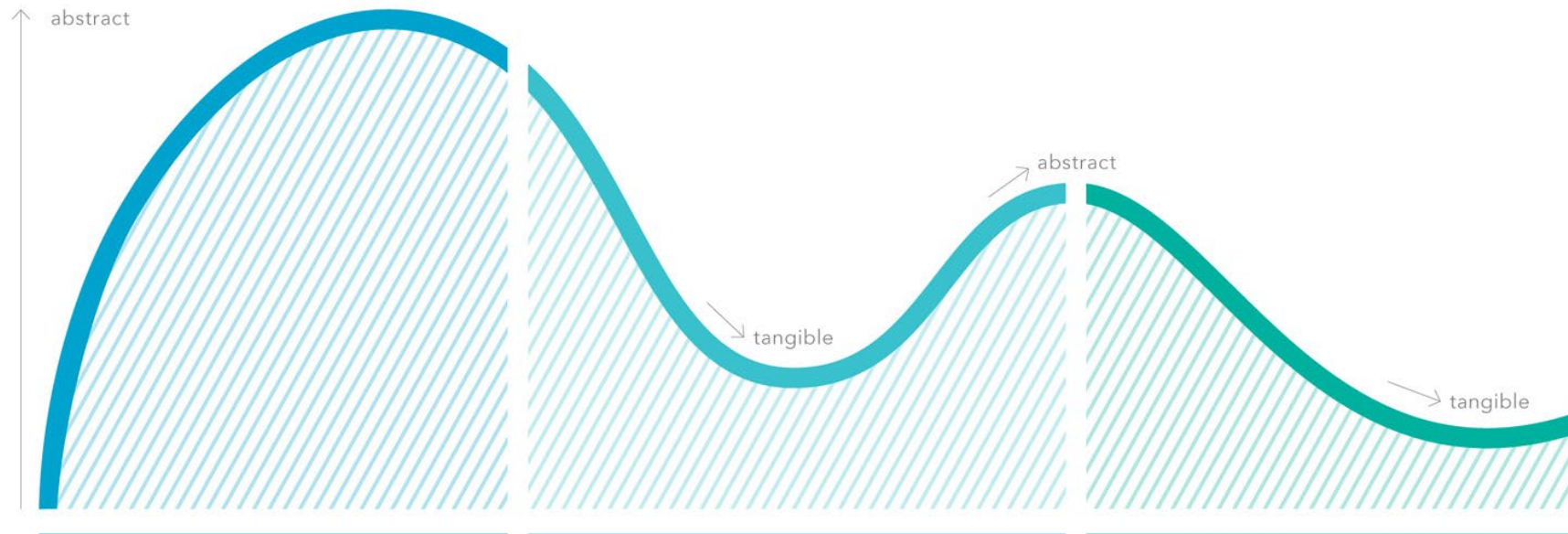
**I have a challenge.**  
How do I approach it?

### IDEATE

**I learned something.**  
How do I interpret it and begin designing from what I learned?

### PROTOTYPE

**I have an idea.**  
How do I build and refine it?



Source: [IDEO](#)

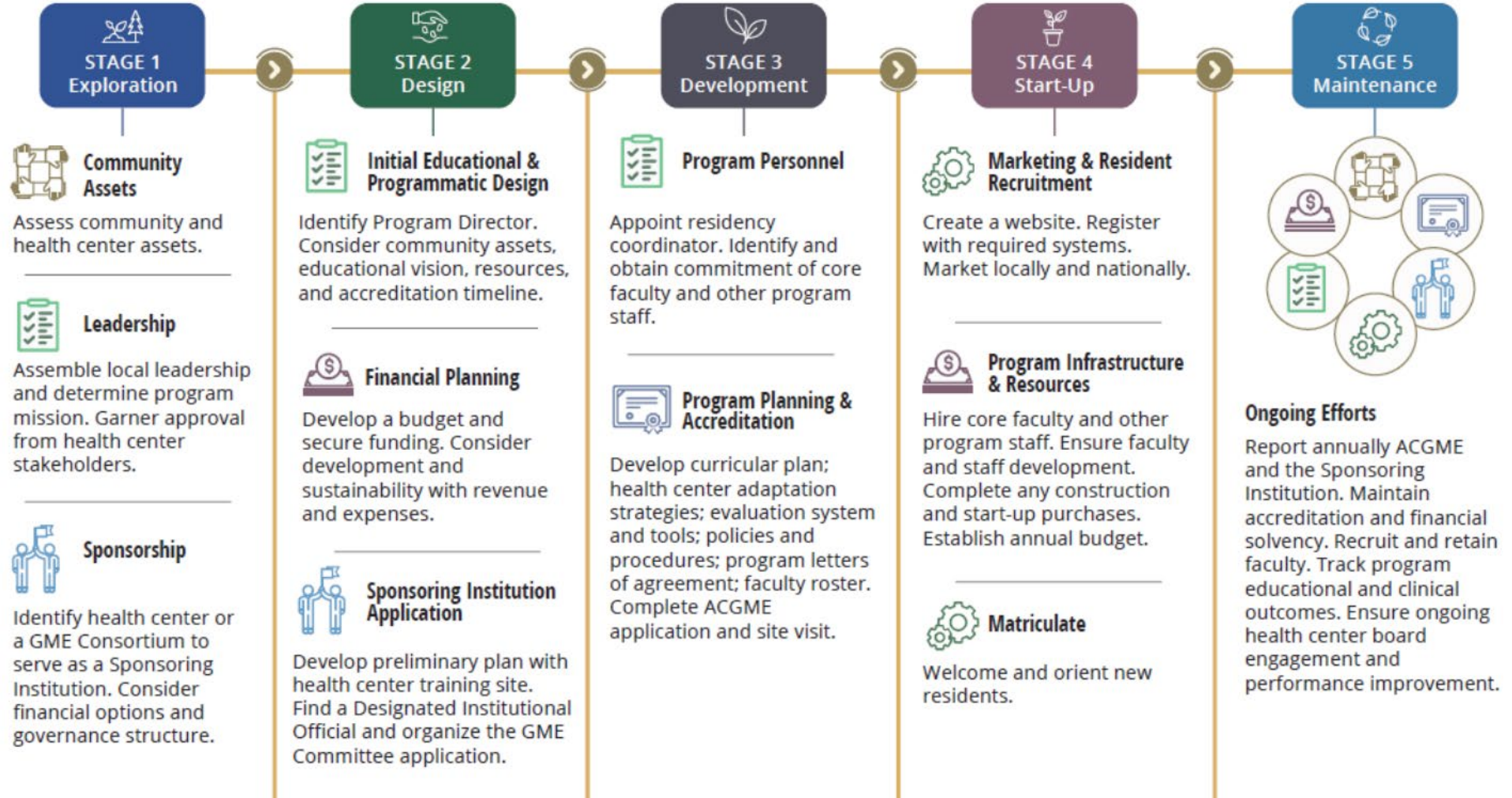


# DESIGNING AN HP-ET PROGRAM

## Example: Teaching Health Center Program Roadmap



### Roadmap for THC Program Development





## **DISCUSSION QUESTION**

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**How is education/training aligned with your current organizational culture?**

# DESIGNING AN HP-ET PROGRAM

Where to Begin?



## Secure buy-in from staff and leadership



# LEADERSHIP BUY-IN

## Outline the Cost of Turnover



## Turnover is **EXPENSIVE!**

\*Calculate your health center's turnover costs by using the [STAR<sup>2</sup> Center Financial Assessment Tool](#)

Therefore, use data to make a business case for retention:

- What's the actual cost of turnover?
- What's the cost of a provider vacancy?
- How much does it cost to recruit?
- How much money is your organization losing to these workforce issues?
- How can you better invest money to retain staff and minimize losses?

# DESIGNING AN HP-ET PROGRAM

## Resources



**Resources – Requirements = Surplus (or Shortfalls)**

What is required?

What do we have?

What do we need? Or what can we offer?

***A plan*** = How do we get what we need, using what we have?

# IDENTIFY RESOURCES

## Internal



- Leadership Support
  - One or more C-Suite members
  - Full C-Suite support
- Board of Directors/Advisory Board Support
  - One or more Board members' support
  - Majority of Board members' support
  - Full Board support
- Patient Population That Would Benefit
  - Diverse patient population that would benefit from additional staff diversity and training
  - Patients have stated an interest in being part of the healthcare training community
- Potential Community Interest, Support, or Benefits
- Training Space for
  - Clinical experience (supervised patient care)
  - Skills practice
  - Didactic instruction, group discussions, etc.
- Financial Resources
  - Income from services provided
  - Grants or donations from government or non-government sources
  - Payment or other funding from training and educational institutions
  - Loans or other funding

# IDENTIFY RESOURCES

## External



- Higher-level educational institutions
    - Technical/community colleges
    - State colleges
    - Private universities
  - State or regional institutions with relevant remote/hybrid training programs
  - Local high schools or community colleges with—or interested in developing—vocational skills programs
  - Student organizations or college/university job boards & clinical rotation opportunity posts
  - Area hospitals, clinics, or independent practices (potential partners)
- Minority-serving institutions with health training programs
  - Primary Care Association (PCA)
  - Area Health Education Centers (AHECs)
  - National Training & Technical Assistance Partners (NTTAPs)—including the STAR2 Center
  - Fellow health centers
  - Accrediting bodies relevant to your training program
  - External funding/grant/loan opportunities



## **GROUP ACTIVITY**

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**What are some potential options or workarounds for filling resource needs?**



# DESIGNING AN HP-ET PROGRAM

## Staffing



- Is there adequate staffing to support an HP-ET program?
- What departments will participate in an HP-ET program (clinical or non-clinical)
- Identifying trainers/preceptors
  - Expressed interest
  - Required credentials
  - Capacity
  - Teaching skills
    - Train-the-trainer
- Mirroring existing care teams
- Administrative support



# DESIGNING AN HP-ET PROGRAM

## Partnerships



- Research
- Outreach
- Proposal
- Negotiation
- Maintenance & Improvement (Communication)



# DESIGNING AN HP-ET PROGRAM

## Partnership Development



- AHECs
- Hospitals
- Academic Institutions
- Other Health Centers
- Contracts
- Community Based Organizations/Non-Profits
- And more...



# DESIGNING AN HP-ET PROGRAM

## Partnerships Benefits & Challenges



## Benefits

- Negotiation Strength
- Aligned Mission, Vision, Values
- Wider Range of Resources
- Shared Control
- Partnership

## Challenges

- More complex decision-making
- Perceived conflicting need or competition
- More personalities in the mix



## Coordinating for better resource management



- Educational institution's goals for its learners?
- What are your health center's goals?
- What is your capacity to support learners? (number, timing, staffing, etc.)
- What is their ability to support your staff?
- How will your health center and the training organization update each other on changes to capacity or needs?

# FORGING STRONG PARTNERSHIPS



- ❑ Work with your HP-ET partner(s) to recruit learners directly & effectively
- ❑ Remember that training organizations and schools want their graduates to get jobs...this gives your health center tremendous opportunity and power!

**Strengthen the partnership, strengthen your recruitment**



# DESIGNING AN HP-ET PROGRAM

## Curriculum



- What is required?
- What is available?
- What is unique?
- What needs to be developed?



# TIMEFRAME ASSESSMENT



- Assessment, planning, and partnership investigation
- Program design (curriculum, staff and learner role and expectations, staff development opportunities, program timelines, assessments/testing/evaluations, etc.)
- Staff training (train-the-trainer, preceptor training, obtaining required certifications, etc.)
- Engaging partners and negotiating contracts/agreements
- Designing a program monitoring, evaluation, and improvement process
- Start of first training cohort
- Completion/graduation of first cohort
- Collecting feedback from learners, partners, and staff
- Implementing improvements
- Funding durations estimates and/or grant timelines
- Return on investment goals

Activity	Milestone 1	Goal Completion Date for Milestone 1	Milestone 2	Goal Completion Date for Milestone 2	Final Completion Date
Ex: Staff Training ("Train the Trainer")	Identify a training program or develop staff training curriculum	6 months	Staff are selected and enrolled for the train-the-trainer course	6-7 months	8 months (Staff complete the one-month train-the-trainer)



# ACCREDITATION ORGANIZATIONS



- Community Health Workers – lists of state-by-state programs:
  - [www.ruralhealthinfo.org/toolkits/community-health-workers/4/training/certification](http://www.ruralhealthinfo.org/toolkits/community-health-workers/4/training/certification)
  - [nachw.org/membership/chw-networks-and-certification-programs](http://nachw.org/membership/chw-networks-and-certification-programs)
- Dental - CODA: [coda.ada.org/en/find-a-program/program-options-and-descriptions](http://coda.ada.org/en/find-a-program/program-options-and-descriptions)
- Medical - ACGME: [www.acgme.org/specialties](http://www.acgme.org/specialties)
- Nurse Practitioner - NNPRFTC: [www.nppostgradtraining.com/accreditation/](http://www.nppostgradtraining.com/accreditation/)
- Medical Assistants - AAHEP and ABHES: [www.aama-ntl.org/medical-assisting/caahep-abhes-programs](http://www.aama-ntl.org/medical-assisting/caahep-abhes-programs)
- Nursing: [nursingcas.org/whats-the-deal-with-accreditation/](http://nursingcas.org/whats-the-deal-with-accreditation/)
- Pharmacy Tech - ASHP: [www.ashp.org/professional-development/technician-program-accreditation/ashp-acpe-pharmacy-technician-accreditation-commission?loginreturnUrl=SSOCheckOnly](http://www.ashp.org/professional-development/technician-program-accreditation/ashp-acpe-pharmacy-technician-accreditation-commission?loginreturnUrl=SSOCheckOnly)
- Social Work - CSWE: [www.cswe.org/accreditation](http://www.cswe.org/accreditation)

# INFO & SUPPORT ORGANIZATIONS



- UDS Mapper - [udsmapper.org](https://udsmapper.org)
- Education Health Center Guide - [educationhealthcenter.org](https://educationhealthcenter.org)
- GWU/Mullan Institute for Workforce Equity - [www.gwhwi.org/](http://www.gwhwi.org/)
- Graham Center - [www.graham-center.org/maps-data-tools.html](http://www.graham-center.org/maps-data-tools.html)
- CHAMPS -
  - [champsonline.org/tools-products/rrresources/pipeline-development-resources/early-pipeline-resources](https://champsonline.org/tools-products/rrresources/pipeline-development-resources/early-pipeline-resources)
  - [champsonline.org/tools-products/rrresources/pipeline-development-resources](https://champsonline.org/tools-products/rrresources/pipeline-development-resources)

# INFO & SUPPORT ORGANIZATIONS



## MD/DO

- ACGME - [www.acgme.org](http://www.acgme.org) (also Psychiatry)
- Education Health Center Guide - [educationhealthcenter.org](http://educationhealthcenter.org)
- Rural GME - [www.ruralgme.org](http://www.ruralgme.org)

## Nurse Practitioner

- CHC Inc. - [www.weitzmaninstitute.org/wp-content/uploads/2022/02/NPResidencyBook.pdf](http://www.weitzmaninstitute.org/wp-content/uploads/2022/02/NPResidencyBook.pdf)

## CHW

- MHP Salud - [mhpsalud.org/community-health-worker-resources](http://mhpsalud.org/community-health-worker-resources)

## Psychology & Social Work

- APA - [www.accreditation.apa.org](http://www.accreditation.apa.org)
- Council for Social Work Education: [www.cswe.org](http://www.cswe.org)

# INFO & SUPPORT ORGANIZATIONS



## Dental

- DDS, etc. - [coda.ada.org/en/find-a-program/program-options-and-descriptions](https://www.coda.ada.org/en/find-a-program/program-options-and-descriptions)
- DA – Washington Association for Community Health - [www.wacommunityhealth.org/capacity-building-1](https://www.wacommunityhealth.org/capacity-building-1)

## Medical Assistants

- NIMAA – [www.nimaa.edu/](https://www.nimaa.edu/)
- Washington Association for Community Health - [www.wacommunityhealth.org/capacity-building-1](https://www.wacommunityhealth.org/capacity-building-1)
- Alaska Primary Care Association - [alaskapca.org/apprenticeships](https://alaskapca.org/apprenticeships)
- NEW Health “University” - [newhealth.org/newhealthuniversity](https://newhealth.org/newhealthuniversity)

**BREAK – 10 min**



# Financial Assessment & Planning of a Health Professions Education and Training Program



# ASSESSING COSTS

## Key Considerations



*Not every cost can be anticipated ahead of time, so providing some flexibility in your program budget is important.*

Costs will fall broadly into the categories of:

- Staff Time
- Staff Training & Education
- Trainee Costs
- Facilities
- Supplies
- Marketing & Promotion
- Recruitment & Partnership Building
- Administration
- Liability Insurance & Other Fees

# ASSESSING COSTS

## Staff



Staff Name   Role	FTE Salary <i>OR</i> Pay per Hour (including overhead/benefits)	Hours or % FTE (as decimal) Spent on HP-ET Work	Hours or % FTE Spent Receiving Training or Credentialing	Total Staff Cost: Pay Rate * (HP- ET Hours + Training Hours)
Ex: Sample Person   RN Clinical Rotation Instructor	<b>\$85,000 per one year FTE</b> (includes benefits & overhead)  <i>OR</i>  <b>\$42 per hour</b>	<b>0.5 FTE</b>  <i>OR</i>  <b>1000 hours per year</b> (20 hours per week: 5 hours lesson planning & admin + 10 hours clinical supervision + 5 hours skills instruction)	<b>0.023 FTE</b>  <i>OR</i>  <b>48 hours per year</b> (3 hours per month CEUs + occasional clinical instruction training and professional development)	$\begin{aligned} & \$85,000 * (0.5 + 0.023) \\ & = \$85,000 * 0.523 \\ & = \mathbf{\$44,455} \end{aligned}$ <i>OR</i> $\begin{aligned} & \$42 * (1000 + 48) \\ & = \$42 * 1048 \\ & = \mathbf{\$44,016} \end{aligned}$

Note: You may notice above there is some slight difference in the estimates between pay per hour and salary full time equivalent (FTE) due to rounding. Be as consistent as possible in your rounding methods and in using FTE or hourly pay, which should minimize these small discrepancies between estimates for different staff.



# ASSESSING COSTS

## Trainee



Trainee Cohort Size	Number of Cohorts per Year	Stipend or Salary per Trainee	Benefits & HR Overhead	Total Trainee Cost per Year = Cohort Size * Cohorts per Year * (Stipend + Overhead)	Notes
Ex: 12 Medical Assistant Program learners per cohort	2 cohorts per year	\$18 per hour x 30 hours per week x 25 weeks = <b>\$13,500</b>	20% = <b>\$2700</b> per learner	12*2*(\$13500+\$2700) = 24*\$16200 <b>= \$388,800</b>	Each cohort will include two additional part-time (10 hours per week) MA Apprentice students from local high school; those costs are not listed here as a state grant is paying for their program costs.

# ASSESSING COSTS

## Facilities



Facility Space Requirements (square feet)	Facility Lease Cost per Square Foot per Month (monthly lease payment / total facility square footage)	Utility Cost per Square Foot per Month (monthly average utility payment [power, water, waste, internet, etc] / facility square footage)	Maintenance & Janitorial Service Cost per Square Foot per Month	Other Recurring Monthly Costs per Square Foot (ex: security, bio waste, etc)	Total Monthly Cost per Square Foot (lease cost per sq ft + utility cost + maintenance & janitorial + other costs)	Total HP-ET Facility Cost per Month (HP-ET facility space requirements * cost per square foot)
Ex: <b>1000 square feet</b> of facility space	\$50,000 per month lease / 25,000 sq ft facility = <b>\$2.00 per square foot</b>	\$15,000 per month / 25,000 sq ft = <b>\$0.60 per sq ft</b>	\$12,000 per month (incl staff salaries and supplies) / 25,000 sq ft = <b>\$0.48 per sq ft</b>	\$8000 per month / 25,000 sq ft = <b>\$0.32 per sq ft</b>	\$2.00 + \$0.60 + \$0.48 + \$0.32 = <b>\$3.40 per square foot</b>	1000 sq ft * \$3.40 per sq ft per month = <b>\$3400 per month</b>

# ASSESSING COSTS

## Supply



Non-Recoverable Supply	Cost per Unit	Units per Trainee or Staff	Number of Trainees or Staff per Cohort	Total Cost Per HP-ET Cohort
Badge and access credentials	\$50	1	12 Trainees + 3 Staff	\$750
Office supplies (pens, notebooks, printing, miscellaneous)	\$500	Program office supply budget (one unit per training cohort)	NA	\$500
Education materials (coursebooks or online training course and software access, pocket guides, reference books, etc)	\$400 Student Edition \$1000 Instructor Edition	1	12 + 1 Instructor Edition	\$5800
Trainee equipment (ex: stethoscope & BP cuff)	\$100	1	12	\$1200
Cohort training equipment (ex: butterfly needles, tourniquets, and blood draw kits)	\$3000	Training supply budget per cohort	NA	\$3000
Trainee uniforms	\$40	2	12	\$960
				<b>\$12,210</b>

# ASSESSING COSTS

## Marketing, Recruitment, & Partnerships



Staff Name   Role	HP-ET Promotion Duties	Estimated Time (hours per week)	Pay Rate (including benefits & overhead)	Total Cost per Week	Notes
Ex: Mary Nguyen   RN & HP-ET Instructor	In-person information sessions for job fairs and at local college	2 hours per week, including presentation development	\$60/hr	\$120 per week	Estimated 25 weeks per year HP-ET program promotion work



# ASSESSING COSTS

## Liability Insurance & Other



- Insurance supplemental to the facility's general liability or property damage insurance
  - Specific to the training program activities
  - May not be needed depending on the facility liability insurance coverage—consult legal
- Other program fees/costs



# OFFSETTING COSTS



Income Source	Amount (total)	Timeframe (Annual? Semester? Monthly? Etc.)	Recurring	Amount per Learner	Notes
Ex: State healthcare worker education grant	\$100,000	Annual	Contingent on reapplication for grant & state budget	\$25,000 x 4 learners	Specific reporting and accounting requirements, see <www...>. Current funding cycle = 3 years (2024-2027).
Ex: Donation from retired physician	\$20,000	One-time	No	NA	Donation from retired health center physician for health center medical education initiatives

# CALCULATING RETURNS

**Returns (Losses) = Gains – Inputs or Expenditures**



## **Potential Losses**

- Reduced patient load per FTE
- Reduced income per patient visit

## **Tangible Returns**

- Reduced turnover
- Fewer position vacancies/increased recruitment
- Client retention
- Increased shift coverage
- Savings on certification, training, or CMEs now obtained in-house

## **Intangible Returns**

- Staff Satisfaction
- Quality of Care
- Client Satisfaction
- Improved Site Reputation and Community Links
- Partnerships



# STAR<sup>2</sup> CETNER HP-ET FINANCIAL IMPACT ASSESSMENT TOOL



The STAR<sup>2</sup> Center [Health Professions Education and Training Financial Impact Assessment Tool](#) is designed to help you understand how a health professions training and education (HP-ET) program can financially affect your health center, including estimating impact to staff development and satisfaction, which can be harder to calculate using discreet figures

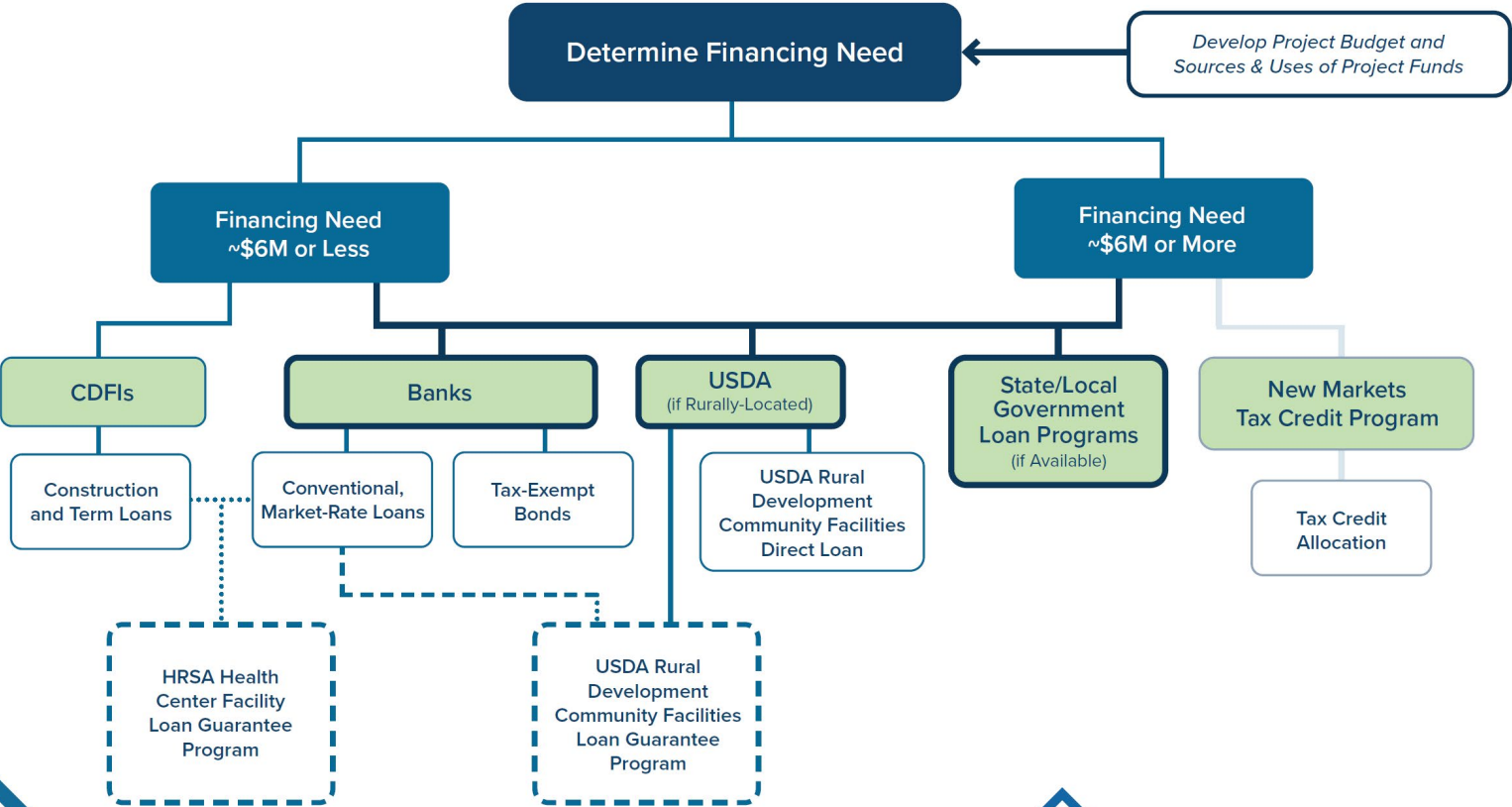


*\*Use QR code to access the assessment tool*

# OTHER RESOURCES FOR FINANCIAL PLANNING



## Financing Decision Tree Model for Health Center Capital Projects



Source: Capital Link Financing Decision Tree Model for Health Center Capital Projects, 2023



# OTHER RESOURCES FOR FINANCIAL PLANNING



## Resources

- » **Estimating Health Center Project Costs**  
<https://www.caplink.org/project-costs>
- » **HRSA Health Center Facility Loan Guarantee Program Toolkit for Health Centers**  
<https://www.caplink.org/hrsa-loan-guarantee-program-toolkit-for-health-centers>
- » **HRSA Health Center Facility Loan Guarantee Program Instructions**  
<https://bphc.hrsa.gov/sites/default/files/bphc/initiatives/hcf-lgp-instructions.pdf>
- » **New Markets Tax Credits**  
<https://www.caplink.org/NMTC>
- » **Spotlight on Capital Resources: Community Development Financial Institutions**  
<https://www.caplink.org/images/stories/Resources/publications/pub-spotlight-on-capital-resources-cdfis.pdf>
- » **Spotlight on Capital Resources: Tax-Exempt Bonds**  
<https://www.caplink.org/images/stories/Resources/publications/pub-spotlight-on-capital-resources-tax-exempt-bonds.pdf>
- » **Working with the USDA: Opportunities for Rural Federally Qualified Health Centers**  
<https://www.caplink.org/images/stories/Resources/publications/pub-working-with-the-usda-guide-for-health-centers.pdf>
- » **Capital Link Client Case Studies**  
<https://www.caplink.org/resources/client-stories>

*Source: [Capital Link Financing Decision Tree Model for Health Center Capital Projects, 2023](#)*

This resource is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award totaling \$292,188 with 0 percent financed with nongovernmental sources. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by HRSA, HHS, or the U.S. Government. For more information, please visit [HRSA.gov](https://www.hrsa.gov).

# OTHER RESOURCES FOR FINANCIAL PLANNING



June 2017

## Health Provider Mix and Staffing Ratios



**Prepared for:**  
Association of Clinicians for the Underserved

**Prepared by:**  
Patricia DiPadova, MBA, PCMH CCE  
John Snow, Inc.

Source: [STAR<sup>2</sup> Center Health Provider Mix and Staffing Ratios](#)

Additional Supporting Tools:

[HRSA Uniform Data System \(UDS\) Dashboards](#)

[STAR<sup>2</sup> Center Data Profile Dashboards](#)

# Implementation & Maintenance of a Health Professions Education and Training Program



# ASSESSING READINESS

## Key Areas

- Leadership Commitment
- Program Goals
- Program & Licensure Requirements
- Feasibility Assessment
- Patient Volumes
- Staffing
- Space
- Technology
- Financing
- Malpractice & Liability
- Partnership Development



# ASSESSING READINESS

## Feasibility

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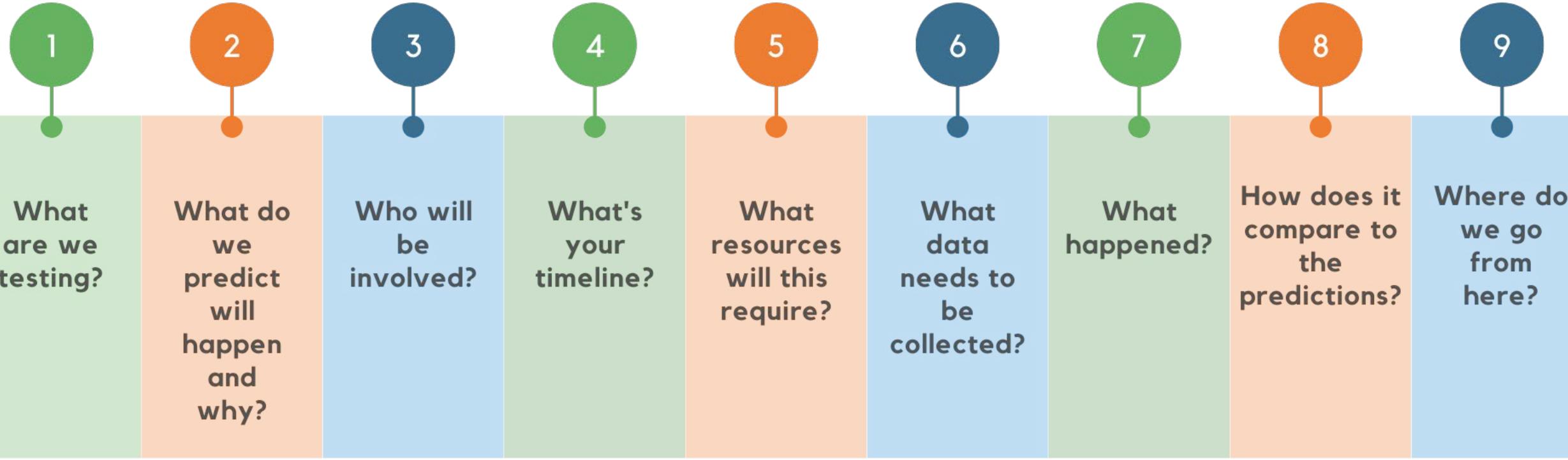


- Involves ALL internal stakeholders
- Identifies Gaps
- Develops and Implements Plans to Address Gaps
- Develops Business Model
- Financial Modeling
- Supports Internal Consensus
- Provides Foundation for Funding Applications and Contract Negotiations

Source: STAR<sup>2</sup> Center Strategic Workforce Planning HP-ET Learning Collaborative & [WIPFLI](#)

# HP-ET PROGRAM

## Question to Help Guide Process





# HP-ET PROGRAM

## Evaluating Success



- How are learners able to provide feedback to both your organizations/programs?
- How are your staff able to provide feedback?
- How are you evaluating learners' achievements at your health center?
- How is the educational institution/training organization evaluating what learners achieve at your health center?
- How are your organizations sharing that information and addressing challenges together?

# HP-ET PROGRAM – GROUP ACTIVITY

Use a Framework (Ex: RE-AIM Model)



Reach – The absolute number, proportion, and representativeness of individuals who are willing to participate in a given initiative, intervention, or program.

Effectiveness (or Efficacy) – The impact of an intervention on important outcomes, including potential negative effects, quality of life, and economic outcomes.

Adoption – The absolute number, proportion, and representativeness of settings and intervention agents (people who deliver the program) who are willing to initiate a program.

Implementation – At the setting level, implementation refers to the intervention agents' fidelity to the various elements of an intervention's protocol, including consistency of delivery as intended and the time and cost of the intervention.

Maintenance – The extent to which a program or policy becomes institutionalized or part of the routine organizational practices and policies.

# QUESTIONS





# STAR<sup>2</sup> CENTER RESOURCES



- [Recruitment & Retention Self-Assessment Tool \(Newly updated!\)](#)
- [Health Center Comprehensive Workforce Plan Template \(formerly Health Center Provider Recruitment & Retention Plan - Newly updated!\)](#)
- [Pay Equity Checklist](#)
- [Pay Equity White Paper \(New Resource!\)](#)
- [Financial Assessment For Provider Turnover Tool \(Newly Updated!\)](#)
- [Building an Inclusive Organization Toolkit](#)
- [Onboarding Checklist \(A Brand New Tool!\)](#)
- [HP-ET Financial Impact Assessment Tool \(A Brand New Tool!\)](#)
- [Supporting Mental Health Through Compensation Equity Factsheet](#)

[You can find all of the STAR<sup>2</sup> Center's free resources here](#)

[Sign up for our newsletter here for new resources, trainings, and updates](#)

READY TO LEARN MORE?

Check out the  
**STAR<sup>2</sup> Center Self-Paced Courses**

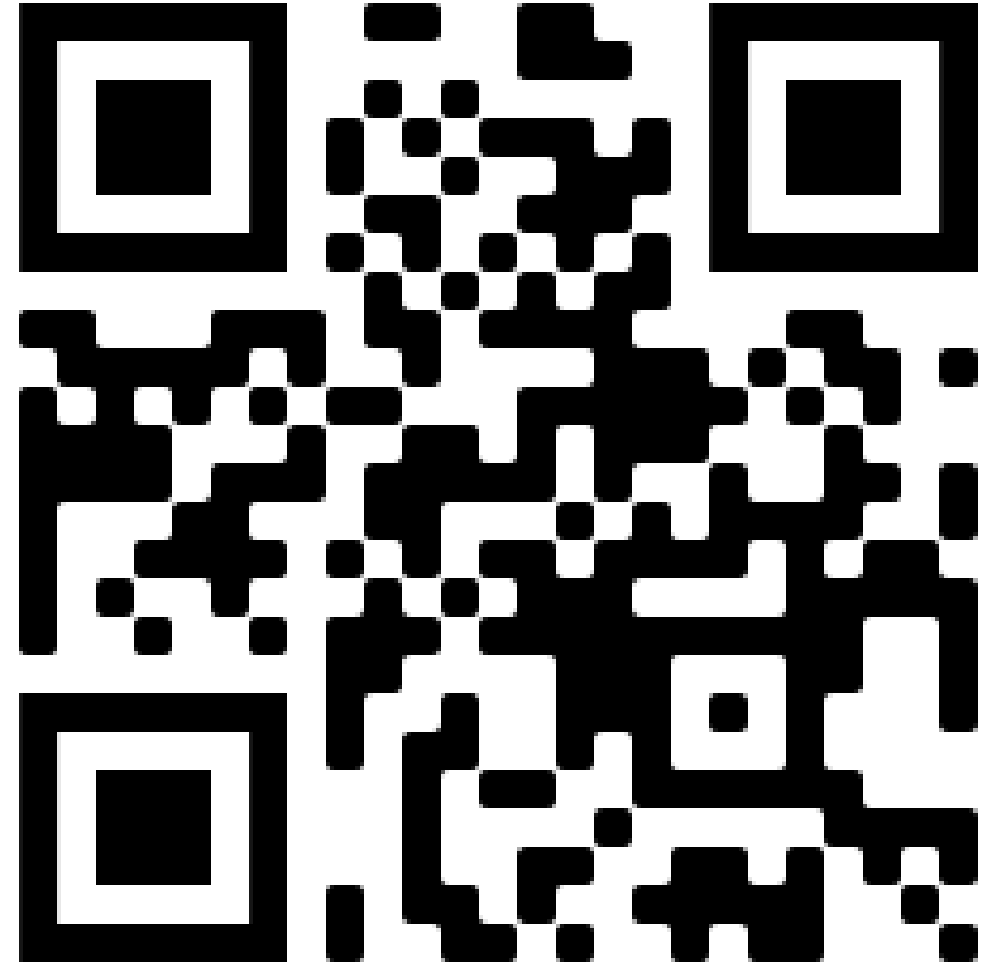
And the STAR<sup>2</sup> Center's  
Podcast Series, **STAR<sup>2</sup> Center Talks**  
**Workforce Success**



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