American Recovery and Reinvestment Act  
Connecticut Department of Public Health (DPH)  
Project Abstract

New limited Competition Award: HRSA-09-277 CFDA No. 93.414: State Primary Care Offices Primary Care Services Resource Coordination and Development

Proposed Connecticut application budget: Personnel: $36,268; Supplies $507; Total $36,775

Background: The Department of Public Health’s Primary Care Office promotes comprehensive and preventive health care programs that improve health care access and workforce issues in the State to meet the needs of medically underserved populations through health centers and other community based providers of comprehensive primary, dental and mental health care services. Activities to support this mission also include recruitment and retention efforts of the health professions included under the umbrella of primary care, i.e. dental, mental health, and primary medical care providers. American Recovery and Reinvestment Act funds have been offered to Connecticut in the amount of $36,775 in Fiscal Years 2009-2011 to support the National Health Service Corps recruitment activities, which would help place primary medical care providers, dentists, dental hygienists, and mental health professionals in designated health professional shortage areas throughout the State. This project will support the coordination of activities to strengthen the primary care workforce by reviewing and applying for designation of new health professional shortage areas and providing resources to respond to the increased demand for approval recommendations for the National Health Service Corps sites and clinicians.
IX. Program Narrative

INTRODUCTION

The Connecticut Department of Public Health’s (DPH) Primary Care Office (PCO) supports local, state, and Federal resources contributing to primary care service delivery and workforce issues in the state. The PCO works collaboratively with the National Health Service Corps (NHSC), a program of the federal Health Resources and Services Administration’s Bureau of Health Professions, that focuses on the provision of health care services to underserved and vulnerable populations. Funding has become available to assist State Primary Care Offices in the coordination of activities within the states/U.S. Territories as it relates to the delivery of primary care services and the recruitment and retention of critical health care providers. The American Recovery and Reinvestment Act (ARRA) funds dedicated to strengthening the primary care workforce administered through the NHSC represents a significant increase in support activities by the State Primary Care Office in order to meet the demand to recruit new clinicians into the program and facilitate matching them to eligible sites.

The Connecticut PCO reviews all site applications for NHSC Recruitment and Retention (R&R) assistance as part of the on-going NHSC Site R&R application process to determine eligibility of potential NHSC Service Sites and provides recommendation for approval for critical health professional placement at approved sites. It is felt that the doubling of the NHSC field strength as the result of ARRA funding will result in a concurrent doubling of workload for State Primary Care Offices to meet the increased demand for new and renewal of previously approved sites. The funds from this project will be utilized to dedicate CT DPH personnel to support this specific Workforce Development initiative for the NHSC and Safety Net/Health Center Network in Connecticut.

Access to primary medical, oral and behavioral health care is an important requisite for good health. Lack of primary health providers creates barriers to access for low-income, publicly insured, uninsured and geographically isolated residents in the State of Connecticut. Connecticut, like many other states is currently facing an unprecedented economic challenge. It has lost more than 63,000 jobs since May 2008, businesses are closing, homes are being foreclosed on, and our State budget deficit is projected to be $8.56 billion over the next two years. Families and businesses throughout Connecticut are cutting back spending and making difficult choices everyday in order to make ends meet. As a result of the increase in unemployment, more people are finding themselves without health insurance and seeking services through safety net providers when health care services are needed. This initiative presents itself at a critical time, as safety net providers have reported an increased demand for their services, recruitment of critical health care professionals will help meet the increasing needs of Connecticut’s most vulnerable populations.

PROGRAM NARRATIVE

The CT DPH provides a multi-pronged approach to the issue of the health recruitment and retention of healthcare providers in Connecticut by collaborating with other programs in the Department. This includes the State Loan Repayment Program administered through the Health
Education Management and Surveillance Section, the Planning Branch Health Information and Reporting and Workforce and Professional Development Sections, and the Office of Multicultural Health. The PCO also works collaboratively with federal resources and local institutions and organizations such as The Connecticut Area Health Education Center (AHEC), Office of Rural Health, Community Health Center Association of Connecticut (CHCCT-PCA) and Community Health Center, Inc. Assistance has been provided to support 330 funding applications, other funding opportunities for safety net providers, and to sites interested in participating in the NHSC program. The Planning Branch provides written information to all physicians who contact DPH expressing an interest in serving Connecticut’s underserved population.

The National Health Service Corps currently has 12 scholarship positions and 129 loan repayment positions posted for the State of Connecticut to help meet primary care needs of our residents. The 12 Scholarship-Only Job Opportunities include 3-Dentists, 1-Nurse Practitioner or Physician Assistant, 5-Physicians (3-Internal Medicine, 1-Pediatrician and 1-Psychiatrist), and 3 Nurse Practitioners (1-Family Practice and 2-Women’s Health). The Loan Repayment postings include 41-Physicians (5-Psychiatry, 6-Internal Medicine, 14-Internal Medicine, 9-Pediatrics, and 2-Obstetrics and Gynecology); 22-Dentists (2-Pediatric specialty and 20-General); 2-Nurse Midwives; 34-Nurse Practitioners (7-Psychiatry specialty, 16-Family Practice, 8-Pediatric, 1-Women’s Health and 2-Adult Specialty); 3-Physician Assistants; 1-Physician Assistant or Nurse Practitioner; 7-Dental Hygienists; 11-Social Workers, 5-Clinical Psychologists, 2-Licensed Professional Counselors; and 1-Marriage and Family Therapist. The PCO reviews all NHSC recruitment and retention application requests for approval.

We will be utilizing existing staff to support the activities related to this project. All shortage designation applications had been contracted out to a consultant until March 31, 2009. A revised Notice of Grant Award for the State Primary Care Office Award received on July 17, 2009, has allowed the CT DPH begin the process to establish a full-time Epidemiologist 1 position dedicated to the PCO program. Following discussion with the Shortage Designation Group, we were able to dedicate an Epidemiologist 2, from another area in the Agency to work in the PCO program on a full-time basis from June 18, 2009 through September 24, 2009. Her time will be split between PCO and another federally funded beginning September 25, 2009 (as planned and approved with budget revision). The Epidemiologist 2 will continue to work half time in the Primary Care Office until the end of the calendar year. She has become familiar with the NHSC applications and has reviewed applications with the current PCO officer. She has participated in all conference calls related to the Primary Care Grant since June 18, 2009.

The funds from this program will support .15 FTE of an Epidemiologist 3 who will participate in the HPSA and ASAPs (electronic application) training to be provided by the Shortage Designation Branch. There are 19 designations scheduled to expire in 2010, twelve in 2011, 15 in 2012, 19 in 2013 and 12 in 2014. The staff will begin reviewing the designations scheduled to expire in 2010, provide technical assistance to communities/organizations who are considering applying for a new HPSA designation and are interested in becoming a NHSC site, as well as assist with the review of site and clinician applications if needed. The Epidemiologist 3 will also be able to provide additional support to mentor and assist with the training of the Epidemiologist 1 once hired with funds from the primary grant. The State of Connecticut does not have an
approved budget at this time and as a result we are still experiencing a hiring freeze. The CT DPH has also lost more than 60 employees due to a retirement incentive program, which became effective July 1, 2009. It will be critical for the success and sustainability of the PCO program to hire the Epidemiologist 1 to support this program.

The other DPH staff person who has agreed to work an additional 5 hours per week is a Health Program Assistant 1 (HPA1) who will review the site and clinician NHSC applications, assist with providing technical assistance and outreach activities. The Health Program Assistant 1 will be able to assist with gathering program or project related data, compile statistics, and monitor programmatic performance related to this grant. The HPA 1 will answer general information questions related to this project and can prepare information for distribution. The HPA 1 is currently involved with two other large federal grants and is managing the projects associated with the grant deliverables. The HPA 1 will not begin working in the program until funding for this project is received.

The Department of Public Health continues to support Primary Care Office activities through in-kind staff contributions. An Epidemiologist 4 will provide managerial oversight for the grant. The Epidemiologist 1 that is hired with funding from the PCO Grant will report directly to the Epidemiologist 4 as do the other Epidemiologists working in the program.

Another Epidemiologist III, will continue to provide 5% of her time in-kind for the technical assistance to safety net providers and clinicians making inquiries about potential job opportunities in the State of Connecticut (NHSC loan repayor, scholar, or J-1 VISA program). In-kind Family Health Section clerical support will be made available to the PCO as needed.

In addition, staff supporting this project will have access to other in-kind contributions such as telephones, facsimile, Xeroxing, Internet access, web casting, computers, printers, workstations, conference rooms, and state vehicles for in-state travel. In-house Information Technology staff is available to assist with technological support.
### WORKPLAN

1. **Workforce Development for NHSC and Safety Net/Health Center**

**Objective #1:** The recipient will evaluate all NHSC Recruitment and Retention Application requests from entities in their State requesting assignment of Corps members from September 30, 2009 through September 29, 2010.

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<tr>
<th>Objective</th>
<th>Activity</th>
<th>Outcome</th>
<th>Staff Responsible</th>
<th>Due Date</th>
<th>Evaluation Plan</th>
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<td>1.1 Increase the number of NHSC approved sites and critical health care clinicians in Connecticut to improve access to care and meet needs of the low-income, publicly insured, uninsured and geographically isolated residents.</td>
<td>Staff dedicated to the PCO program will review all (100%) NHSC site and clinician applications and provide follow-up by phone and/or email when additional information is needed to accurately make recommendation for approval.</td>
<td>There will be an increased number of NHSC sites available to recruit critical health care professionals in health professional shortage areas and clinician applications will be reviewed within 4 working days.</td>
<td>Epidemiologists/ Health Program Assistant</td>
<td>October 2009</td>
<td>There will be a quarterly review of the number of applications reviewed and number of application approvals submitted to the NHSC.</td>
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<td>1.2 Increase NHSC primary care site eligibility by identifying and processing new and renewal HPSA applications processed</td>
<td>Dedicated staff will be trained to support PCO program with the HRSA on-line shortage designation application process.</td>
<td>DPH Epidemiology staff will complete and submit HPSA applications to Shortage Designation Branch. Epidemiology staff will evaluate the 19 designations due to expire in 2010 and submit applications for renewal as appropriate.</td>
<td>ASAPS and HPSA Training from Shortage Designation Branch</td>
<td>October 2009</td>
<td>Success will be demonstrated by number of new and renewed shortage designations for 2010.</td>
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Objective #2: **Technical Assistance will be provided to organizations/communities wishing to expand access to primary care for underserved populations by becoming a NHSC placement site and to critical health professionals seeking job opportunities in Connecticut during this project period.**

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<td>Staff will be available to respond to requests for technical assistance for organizations, clients or communities wishing to become NHSC placement sites or for critical health professionals seeking job opportunities in Connecticut</td>
<td>Staff dedicated to PCO will provide technical support in person, by email or by phone.</td>
<td>Contact will be made with those requesting technical assistance within one-working day of the request being received.</td>
<td>All PCO Support Staff, Epidemiologist, Health Program Assistant 1</td>
<td>October 2009</td>
<td>There will be a quarterly review of the number of requests received, and type of technical assistance provided. This information will be reported in the quarterly Progress Reports</td>
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Objective #3: **Outreach activities/tasks will be performed in relation to recruitment and retention as it relates to NHSC.**

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<td>Outreach activities will be provided to eligible sites, clinicians, post-secondary students, academic partners, and others on the NHSC loan repayment and scholarship programs.</td>
<td>Staff dedicated to PCO will provide outreach activities to promote NHSC recruitment efforts.</td>
<td>Staff dedicated to PCO program will promote the NHSC through presentations, meeting attendance, and distribution of written documents.</td>
<td>Epidemiologist/Health Program Assistant 1</td>
<td>January 2010</td>
<td>There will be a quarterly review of the number of requests received, contacts made, and type of activity and date of completion. This information will be reported in the quarterly Progress Reports</td>
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RESOLUTION OF CHALLENGES

Challenges that are likely to be encountered in designing and implementing the activities outlined in the Work Plan, and approaches that will be used to resolve such challenges include:

(1) ASAPS and HPSA Training for the Epidemiology staff as required by the Shortage Designation Branch. Dates of availability for epidemiology staff were provided on June 26, 2009 through the end of August 2009.
   Resolution: Continue to work with Shortage Designation Branch to schedule training. Staff will utilize the Shortage Designation Staff as resources as they make the transition of providing the service that had formerly been provided by a consultant.

(2) Providing outreach in the community.
   Resolution: Staff supporting this program will need to be trained and mentored in all aspects of the program before going out to speak in the community. This activity should occur in the spring of 2010 with staff funded through this project.

The proposed ARRA funded State PCO grant will be managed using the same processes that are used for current grants. An accountant from the DPH’s Fiscal Office is designated to the grant and the program staff (PCO) and accountant work collaboratively to ensure compliance with the fiscal requirements of the grant. The proposed grant activities are consistent with the funding provided for the purpose of strengthening the primary care workforce administered through the NHSC.
BUDGET JUSTIFICATION/NARRATIVE

1. Supplies: $507

Justification:
General Office supplies, such as writing tablets, pens, pencils, Xerox and computer paper, ink cartridges, mailing envelopes, etc. that will be used by project staff to carry out grant related activities.

2. Salary: $36,268

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<td>.15 FTE Epidemiologist 3 (12 months)</td>
<td>$17,022</td>
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The HPSA designation process was formerly contracted out to a consultant until 3/31/2009. The Epidemiologist 3 funded with these funds will be trained in the HPSA designation process using the on-line shortage designation application. This person will also help support the full-time Epidemiologist 2 (currently funded by the PCO grant) dedicated to the PCO program at this time to review and apply for new shortage designation areas. The Epidemiologist 2 will be reducing their dedicated time to the PCO Grant to a part-time basis from September 25, 2009 through the end of the calendar year due to responsibilities with another grant. The Epidemiologist 3 funded with this stimulus funded grant will help support and mentor the Epidemiologist 1 position (not yet hired) which was funded with the primary PCO grant. The State of Connecticut is still experiencing a hiring freeze, however the revised NGA from the Primary Care Office Grant received in July of this year has allowed us to begin the process to establish the full-time position for the Primary Care Office. This person would also provide technical assistance to communities seeking special designations, which will impact eligibility of NHSC sites and potential placement of NHSC critical health care professionals.

Justification: **Health Program Assistant 1 (HPA 1)** who will work an additional 5 hours per week dedicated to this project (12 months) $19,246

The Health Program Assistant 1 will assist with the monitoring of activities, assist with completing NHSC site and clinician approval recommendations, monitor inquiries, help provide follow-up for incomplete applications by phone, email or fax, and provide technical assistance as needed.

Total Annual Budget: $36,775