GME EXPANSION INAUGURAL MEETING
STRATEGIC PLANNING
SEPTEMBER 5-6, 2019
DAVID SCRASE, MD, HSD SECRETARY
A. Prior to 10/1/19, HSD shall create the “GME expansion review board" to:

1. develop a state strategic plan for expanding graduate medical education training programs;

2. review grant applications; and,

3. review the grants awarded pursuant to the GME Expansion Grant Program Act.
HB 480: SECTION 4. GME EXPANSION REVIEW BOARD--CREATED--DUTIES.--

G. The HSD Secretary and the HED Secretary shall assist the Board in developing a strategic plan for the expansion of GME training programs, which shall include the following:

1. a statement describing board objectives and goals, strategies by which those goals will be achieved and a timeline for achieving those goals;
SECTION 4. GME EXPANSION REVIEW BOARD--CREATED--DUTIES.--

2. summary of current GME training programs throughout the state;
3. 5-year plan for expanding GME training programs in the state;
4. evaluation of standards and curriculum guidelines for GME training programs; *(should we just defer to ACGME?)*
SECTION 4. GME EXPANSION REVIEW BOARD--CREATED--DUTIES.--

5. ongoing evaluation process of funds distributed through the GME expansion grant program; and,

6. long-term sustainability plan.
STRATEGIC PLANNING OVERVIEW

▪ Mission
▪ Vision
▪ Goals
▪ Objectives
▪ Tactics
MISSION: WHAT IS OUR CORE PURPOSE?

▪ Written declaration of organization's core purpose and focus that normally remains unchanged over time.

▪ Properly crafted mission statements:
  ▪ serve as filters to separate what is important from what is not,
  ▪ clearly state which markets will be served and how, and,
  ▪ communicate intended direction.
VISION: WHAT DOES THE FUTURE LOOK LIKE?

▪ Aspirational description of what an organization would like to achieve in the mid-term or long-term future.
▪ Clear guide for choosing current and future courses of action.
GOALS

- Goals are broad and highest-level outcomes towards which effort and actions are directed.
- They are "what's", not "how's."
- Normally they contain a verb.
- No measurement in goal definition
- Time frame: 2-5 years
OBJECTIVES/STRATEGIES:

- Objectives differs from goals in that they are measurable and specific.
- Quantifies and sets a target so strategy can be planned around it.
- For example, “fill all open positions in CY 2018” or “develop a succession plan for retiring physicians.”
- Time frame: 1-2 years.
TACTICS

▪ Tactics are actions/tools that achieve objectives.
▪ They are "how's," not "what's."
▪ Goals, objectives, and tactics must work in tandem, without tactics the organization has big thinking and no action.
▪ We need both big wings (strategies/goals) and feet (tactics).
▪ Time frame: 3-12 months.
MISSION. WHAT IS OUR CORE PURPOSE?

- Written declaration of organization's core purpose and focus that normally remains unchanged over time.

- Properly crafted mission statements:
  - serve as filters to separate what is important from what is not,
  - clearly state which markets will be served and how, and,
  - communicate intended direction.

A mission is different from a vision in that the former is the cause and the latter is the effect; a mission is something to be accomplished whereas a vision is something to be pursued for that accomplishment.

Read more: http://www.businessdictionary.com/definition/mission-statement.html
WHAT FIVE KEY WORDS/CONCEPTS COME TO MIND WHEN YOU ENVISION THE MISSION OF THE BOARD?

- Respect and compassion
- Effective communications and collaborations
- Lead with integrity and professionalism
- Work efficiently
- Cultural diversity that reflects our population
- Graduate Medical Education Accredited training for residents Primary Care expansion
- Addressing physician shortages
- Identifying opportunities for expansion of primary care
- Advocating for the expansion of GME slots for primary care and providing oversight of the programs implemented
- Meeting the needs of underserved communities
- Promoting preventive medicine through primary care
- Making GME sustainable and balanced
- Foster nascent programs.
- Facilitate and provide support for the development of high quality residency training programs in New Mexico
- To provide direction, supported by funding, for the expansion of primary care in New Mexico, especially in support of under-served and primary care shortage communities
- Primary care shortages
- Priority setting
- Resource allocation
- Direction-setting
- Under-served communities
- Use value-based data to assess current needs to understand how to best invest in training programs that will be serve the diverse health needs of our state.
- Coordination
- Collaboration
- Implementation
- Widespread

- Across areas
- Accountability
- Contribution
- Guidance
- Action
- Expanding GME opportunities strategically throughout the state
- Strategic
- Integrity
- Dedication
- Visionary
- Collaborative
- Community
- Health
- Teach
- Action
- Future
- Objectives
- Increase residency training slots
- Evaluate curriculum
- What is the long term sustainability
- Assessment of grant proposals
- To positively impact the expansion of graduate medical education in the State of New Mexico
- All-in "GME" payment system
- Focus on willingness
- Focus on readiness
- Assist
- Let it happen
- Mission
- Behavioral care expertise
KEY IDEAS FOR MISSION

BOARD AND ADVISORS

- GME in New Mexico
- Expand GME opportunities strategically
- Primary care expansion
- Support underserved and primary care shortage communities
- Integrate value-based data
- Assure NM’s future workforce is sustainable

STATUTE (HB 480)

- Establish new GME training programs with first-year positions;
- Fund unfilled, accredited first-year positions within GME training programs;
- Expand first-year positions within existing GME training programs; and,
- Fund existing GME training programs
DRAFT MISSION STATEMENT

The mission of the GME Expansion Review Board & Advisory Group is:

“To ensure New Mexico has a sustainable physician workforce by using [value-based] data to strategically expand primary care and psychiatry GME positions in support of underserved and primary care shortage communities.”

(31 words)
VISION: WHAT DOES THE FUTURE LOOK LIKE?

▪ Aspirational description of what an organization would like to achieve in the mid-term or long-term future.
▪ Clear guide for choosing current and future courses of action.

▪ “A vision is not just a picture of what could be; it is an appeal to our better selves, a call to become something more.”

Rosabeth Moss Kanter
WHAT FIVE KEY WORDS/CONCEPTS COME TO MIND WHEN YOU ENVISION THE VISION OF THE BOARD?

- healthier communities
- expand and develop excellence in the education of physicians, especially in rural NM.
- develop highly skilled, culturally competent primary care physicians in rural NM communities
- fill the needs gap of primary care physicians in NM
- Improving the health of all New Mexicans
- Serving rural and underserved populations
- Growing the physician workforce
- High-quality, accredited training
- Move the state forward in developing programs that support primary care and promote the retention of primary care physicians in the state
- Primary care access for all New Mexicans
- a robust network of primary care residencies
- sustainable GME collaboration
- intentionally-planned and community driven
- Become the overarching entity for GME in New Mexico which promotes quality, innovation, development of new residency programs to provide an adequate physician supply for the state.
- Road map for the state
- A robust future for primary care in NM
- Resources to support that vision
- Increased access for patients state-wide.
- Collaborative Effort to Increase Primary Care Training towards improving access and improving quality of care for all of New Mexico.
- Access
- leverage resources
- Effective
- Prompt
- comprehensive statewide GME network
- inclusive of communities throughout the state
- leaders in GME
- most sought after GME programs
- Credibility
- Innovation
- Opportunity
- Designer Community
- Resources
- Preparing
- Engaging
- Change
- Outcome
- think of unique ways to increase training slots
- look at new sources of educational opportunities
- can we do all that is required in 5 years?
- how do we keep funding post 5 years
- Expansion of primary care graduate medical education training programs to rural and underserved portions of the State of New Mexico.
- Access
- Sustainability
- Flexibility (community partners)
- Bend the Curve
- Comprehensive Primary and Behavioral Health
- Expertise
- mission
- training
- leadership

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DRAFT IDEAS FOR VISION

- Increased access to care statewide
- Serving rural and underserved populations
- Growing physician workforce
- Primary Care and Behavioral Health
- Culturally competent
- Training
“Rural and underserved populations in New Mexico have [adequate, excellent] access to culturally competent Primary Care and Behavioral Health services statewide, through growth of our own graduate medical education training programs.”

(30 words)
GOALS

- Goals are broad and highest-level outcomes towards which effort and actions are directed.
  - They are "what's", not "how’s."
  - Normally they contain a verb.
  - No measurement in goal definition
  - Time frame: 2-5 years
Reflecting on HB 480 and the Board's Charge, Please Outline 3-5 Goals of the Board.

- 1. Ensure the fiscal responsibility of the expenditure of funds awarded to grant recipients.
- 2. Assist the Secretary of Human Services to develop and implement a comprehensive Strategic Plan for the successful development of new and expansion of existing graduate medical education programs in NM.
- 3. Review grant applications
- Expanding graduate medical education by growing high-quality, accredited training programs.
- Improving the health of New Mexicans by expanding the physician workforce, particularly in primary care and other needed specialties.
- Reaching rural and underserved communities with physician providers.
- Identifying areas where more GME slots specifically for primary care can be supported.
- Identifying oversight to ensure that the expanded positions are being utilized in order to increase the training of primary care physicians.
- 1. Take stock of the medical needs of NM by specialty
- 2. Help institutions start new GME programs
- 3. Help programs with capacity to expand do so.
- 4. Ensure sustainability of community-based programs.
- Promote policy development that encourage development of high quality residency training programs.
- Review current understanding of physician workforce needs for the state of New Mexico.
- Provide support for innovation training models for rural and underserved areas of the state.
- Create a comprehensive plan for GME expansion state-wide.
- Recommend direction for GME in the state.
- Provide insight into funding needs state-wide.
- Develop a road map for distributing fund to best meet the identified needs and priorities.

- 1. Define primary care for New Mexico which will direct funding.
- 2. Discuss innovative primary care training models.
- 3. Implement strategic training investments.
- Improve access to GME programs (location, funds, programs).
- Encourage higher quality preparation and greater participation.
- Incentivize rural practitioners.
- 1) In the first year the Board will conduct needs/readiness assessment to identify communities for expanded GME programs.
- 2) In the first year, the Board will develop required components of RFP in collaboration with PED and HSD.
- 3) The Board will work collaboratively with an Advisory Committee as evidenced by regular (at least quarterly) meetings/opportunity for advisory committee input.
- Providing future physician leaders for communities.
- Focus on improving health of people.
- Sharing resources with all communities.
- Fiscal responsibility for grant funding.
- Look at all residency slots available and target specific areas for increased funding or increased educational opportunity.
- Improve standards/curriculum to accelerate education.
- Make sure all areas and deficiencies around the state are addressed.
- Increase the distribution of primary care training programs.
- Double the number of Family Physicians graduating each year.
- Ensure equity in Medicaid GME funds.
- Reduce New Mexico’s primary care physician shortage.
- Identify potential GME locations.
- Support program growth publicly, legislatively.
- Significantly increase training (double family medicine, 50% increase in Psych and plan Peds and IM growth in 4 years --- add other disciplines and specialties).
- Train providers to treat behavioral Health in NM.
DRAFT IDEAS FOR GOALS

BOARD AND ADVISORS

1. Review current understanding of NM physician workforce needs.
2. In first year, conduct needs/readiness assessment to identify communities for expanded GME programs.
3. In first year, develop required components of RFP in collaboration with PED and HSD.
4. Create comprehensive plan for state-wide expansion.
5. Provide support for innovation training models for rural and underserved areas of the state.

STATUTE (HB 480)

1. Develop state strategic plan for expanding GME training programs;
   I. statement describing objectives and goals of the Board, strategies by which those goals will be achieved and a time line;
   II. summary of current GME training programs in NM;
   III. 5-year plan for expanding GME training programs;
   IV. evaluation the standards and curriculum guidelines;
   V. ongoing evaluation process of funds distributed through the grant program overseen by Board; and
   VI. plan to ensure long-term sustainability.
2. review grant applications; and
3. review grants awarded pursuant to HB480
DRAFT GOALS

1. Develop an overview of New Mexico GME that includes:
   a. summary of current GME training programs;
   b. current understanding of physician workforce needs, and;
   c. identification of communities ready for new/expanded GME programs.

2. Create a comprehensive 8-year plan for GME expansion statewide to double the number of primary care training positions in 4 years.

3. Develop and implement a grant award process:
   a. required components of an RFP for judging applications;
   b. produce a grant application document;
   c. award grants; and,
   d. evaluation process.

4. Develop a model for financial sustainability and program expansion.
QUESTIONS