

**Healthcare Workforce Development Division**

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**Members of the Commission**

William W. Henning, DO, **Vice Chair**  
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 Elizabeth Dolezal  
 Michael Farrell, DO  
 Katherine Flores, MD  
 Carol Jong, PhD, RD  
 Karyn Karp, CRNA, MS  
 Catherine Kennedy, RN  
 Laura Lopez  
 Ann MacKenzie, NP  
 Kathyann Marsh, PhD  
 Angelica Millan, RN, MSN, RNP, FAAN  
 Cathryn Nation, MD  
 Joseph Provenzano, DO  
 V. Katherine Townsend, PhD, MSN

**October 9, 2014  
 Meeting Minutes**

**CALIFORNIA HEALTHCARE WORKFORCE  
 POLICY COMMISSION (CHWPC)**

**New Slots (\$4M)  
 Task Force  
 Teleconference**

Four Points Sheraton - Sacramento  
 4900 Duckhorn Drive  
 Sacramento, CA 95834

OSHPD Director  
 Robert P. David

Executive Secretary  
 Lupe Alonzo-Diaz, MPAff

*Action may be taken on any  
 item listed on the agenda*

**Task Force Members Present:**

Rosslynn Byous, DPA, PA-C - Chair  
 Myles Abbott, MD  
 Chester Choi, MD  
 Jeremy Fish, MD  
 Katherine Flores, MD  
 Andrew Gersoff, MD  
 Elizabeth Griffiths  
 Kelly Jones, MD  
 Alexander Li, MD  
 Debra Lynn Lupeika, MD  
 Cathryn Nation, MD  
 Erin Quinn, PhD, MEd  
 Rob Warren, DO, MBA  
 Daniel West, MD  
 Ghia Xiong, PsyD

**Task Force Members Not Present:**

Anh Nguyen, MD

**Staff to Commission:**

Lupe Alonzo-Diaz, MPAff, Deputy Director  
 Senita Robinson, MS, Chief  
 Melissa Omand, Acting Staff Prgm Manager  
 Michelle Lehn, Program Administrator  
 Rachael Gastelum, Program Analyst  
 Tyfany Frazier, Program Coordinator

**Additional OSHPD Staff:**

Elizabeth Wied, Chief Legal Counsel

**Agenda Item 1: Call to Order**

Chair Rosslynn Byous, DPA, PA-C called the meeting to order.

**Agenda Items 2: Welcome and Introductions of PCR Task Force Members**

Task Force members and OSHPD staff introduced themselves.

**Agenda Item 3: Approval of Previous New Slots (\$4M) Task Force Meeting Minutes on September 30, 2014**

The minutes will be sent to the task force members via email and if they have any comments they will present them as public comment at the CHWPC Policy Meeting.

#### **Agenda Item 4: Review and Approve September 30, 2014 New Slots (\$4M) Task Force Recommendations to the 2014 New Slots (\$4M) Request for Application (RFA)**

The task force members reviewed the Proposed RFA

#### **Action Items:**

Motion to add a supplemental question that will be asked before the funding meeting, how many of the new resident positions will be filled by graduates from a California based medical school (Fish), Seconded (Abbott). Motion Adopted.

#### **Program Information:**

Motion to define:

1. Established Programs: A program that has received accreditation and has graduated at least one class by June 30, 2015
2. New Programs: A program that has received accreditation and will either enroll its first class by July 1, 2015 or will not have graduates as of July 1, 2015

(Abbott), Seconded (Gersoff). Motion Adopted.

#### **Statistics:**

Motion to add the previous table back in and:

1. Reword question one to read: What is the total number of first year positions available?
2. Reword question two to read: What is the number of first year positions filled?
3. Reword question three to read: What is the total number of R1-R3 ( R1-R4 for OB/GYN and Med-Peds) residents trained in your program

The current questions five and six will remain in table (West), Seconded (Nation). Motion Adopted.

Motion to change the years represented on the table to reflect the following four years: 2014/15, 2013/14, 2012/13, 2011/12 (Nation), Seconded (West). Motion Adopted.

Motion to add the following questions to the statistics table with the above edits:

1. Add a question four to read: Do you have a dedicated primary care track? If yes, then please answer the following:
2. Reword question five to read: what is the total number of first year positions dedicated to primary care?
3. Reword question six to read: what is the total number of first year positions dedicated to primary care that filled?
4. Add a question seven to read: what is the total number of R1-R3 primary care residents trained in your program?

(Nation), Seconded (Fish). Motion Adopted.

The current table will be amended, question one will be deleted and the academic year in questions 2, 3, and 4 will be replaced with the clarifying statement: Please answer the following questions about your current class of residents beginning July 1, 2014.

**Graduates Information:** Motion to collect three years of data, 2011/12, 2012/13, 2013/14 (Fish), Seconded (West). Motion Adopted.

### **Training in Areas of Unmet Need:**

Motion to:

1. Require the applicant to provide the percentage of the payer mix for Medicare/VA, Medical, Uninsured, Other
2. Add the question: Describe any other unique features of the patient population your training program serves (e.g. homeless, farm workers, Indian Health Service) (Nation), Seconded (West). Motion Adopted.

### **Faculty Qualifications:**

Motion to edit the question to read: Identify up to five members of your program's faculty and explain how each of them possess the knowledge, skills, and experience needed to deliver a primary care curriculum including elements of Patient Centered Medical Homes principles and health care disparities (Choi), Seconded (Nation). Motion Adopted.

### **Residency Training:**

Motion to:

1. Add the question: Estimate the percentage of time your residents spend on average in a continuity clinic. R1, R2, R3 (R4)
2. Add the question: Estimate the percentage of time your residents spend on average in ambulatory care settings (excluding continuity clinics) R1, R2, R3 (R4)
3. Edit current question three to read: Please describe the components of your curriculum that support primary care. In support of this question, please describe your primary care continuity clinic activities, including management of a panel of patients.
4. Edit question four by removing the word family.  
(Abbott), Seconded (West). Motion Adopted.

*The Final proposed New Slots (\$4M) RFA is hereby incorporated as Attachment A*

### **Agenda Item 5: Review and Approve September 30, 2014 New Slots (\$4M) Task Force Recommendations to the 2014 Evaluation Criteria for the New Slots (\$4M) RFA**

Melissa Omand led the discussion to develop and approve the evaluation criteria.

### **Action Items:**

Motion to recommend a separate scoring criteria for new programs (Abbott), Seconded (Nation). Motion Adopted.

Motion to retain Section 1 Statutory Criteria evaluations one, two, and three as presented for Family Medicine for a total of 71 points (West), Seconded (Nation), Oppose (Abbott). Motion Adopted.

Motion to retain an edited version of evaluation 3.b and to change point value to ten points (Nation), Seconded (West). Motion Adopted.

Motion to retain from the Primary Care Residencies (Expansion) the evaluation of Placement of graduates in primary care ambulatory settings, changing the point value to ten (Choi), Seconded (Lupeika). Motion Adopted.

Motion to award a maximum of six points for percentage of graduates and a maximum of four points for number of graduates as the point percentage breakdown (Choi), Seconded (Quinn). Motion Adopted.

Motion to retain the evaluation of the applicants plan and curriculum that promotes training in ambulatory and community settings with a point value of five points (West), Seconded (Choi). Motion Adopted.

Motion to add the 'Residency Training' section of the New Slots (\$4M) RFA as Section II 'Other Considerations' of the Evaluation Criteria. Evaluations one, two, four, five, six, and seven will have a point value of three points and evaluation question three will have a point value of five points (West), Seconded (Fish). Motion Adopted.

The Evaluation should be scored as follows:

Motion to score question one, how the program integrates or includes different education modalities into the learning delivery models as:

Zero points for no examples

One point for one example

Two points for two examples

Three points for three or more examples

(West), Seconded (Fish). Motion Adopted.

Motion to score question two, how the residency program or Patient Centered Medical Home (PCMH) structures primary care training to encourage graduates to practice as a health care team that includes inter-disciplinary providers as:

Zero points for no examples

One point for one example

Two points for two examples

Three points for three or more examples

(Choi), Seconded (West). Motion Adopted.

Motion to score question 3 the components of the curriculum that support primary care as:

Zero points for no examples

One point for one example

Two points for two examples

Three points for at least 2 examples, plus an example of patient management panel (Nation), Seconded (Fish). Motion Adopted.

Motion to score question 4, how practicing physicians from the local community are utilized in the training program as:

Zero points for no examples

One point for one example

Two points for two examples

Three points for three or more examples

(West), Seconded (Lupeika). Motion Adopted.

Motion to score question 5, the programs strategies used to promote training in ambulatory and community settings in underserved areas as:

Zero points for no examples

One point for one example

Two points for two examples

Three points for three or more examples  
(Nation), Seconded (Quinn). Motion Adopted.

Motion to score question 6, the percentage of time residents spend on average in a continuity clinic as:

Zero point: average 24% or less

One point: 25%-49%

Two points: 50%-74%

Three points: 75% or above

(Jones), Seconded (Abbott). Motion Adopted.

Motion to score question 7, the percentage of time your residents spend on average in ambulatory care settings as:

Zero point: average 24% or less

One point: 25%-49%

Two points: 50%-74%

Three points: 75% or above

(West), Seconded (Abbott). Motion Adopted.

Motion to retain the evaluation, 'Does the program faculty possess the knowledge skill and experience to deliver a primary care curriculum with an emphasis on health care disparities' with the scoring to be one point for each example up to three points (Nation), Seconded (Fish). Motion Adopted.

Motion to retain the evaluation, 'has the program developed coherent ties with medically underserved multi-cultural communities in lower socioeconomic neighborhoods as evidenced by letters of support' with the scoring to be one point for one letter, two points for two letters, and three points for quality letters (not form letters) that describe the relationship between the program and the community organization (West), Seconded (Fish). Motion Adopted.

*The Final proposed evaluation criteria is hereby incorporated as Attachment B*

#### **Agenda Item 6: Review and Approve New Slots (\$4M) Final Report Template**

Motion to adopt the final report template as presented (West), Seconded (Fish). Motion Adopted

*The New Slots (\$4M) Final Report Template is hereby incorporated as Attachment B*

#### **Agenda Item 7: Public Comment**

#### **Agenda Item 8: Next Steps**

#### **Agenda Item 9: Adjournment**

The meeting adjourned at 5:17pm

All the attachments mentioned in these minutes can be found under meeting materials at:  
[http://oshpd.ca.gov/General\\_Info/Public\\_Meetings.html](http://oshpd.ca.gov/General_Info/Public_Meetings.html)