

Memorandum

To: House and Senate Joint Legislative Oversight Committee on Health and Human Services
House and Senate Joint Legislative Oversight Committee on Education
From: Hugh H Tilson, Jr., JD, MPH, Executive Director, NC AHEC Program
(919) 961-6242
hugh_tilson@ncahec.net
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Subj: Annual Report – Rural Interprofessional Teaching Hubs

This memorandum serves as the Interim Report required by SECTION 8.4.(b) of SL 2023-134 hereafter referred to as the preceptor study.

BACKGROUND

The provision requires NC AHEC to study:

- (1) the availability of community preceptors in North Carolina and nearby states and
- (2) the demand for those preceptors, including factors that influence the supply and barriers that community-based outpatient clinicians face in teaching healthcare professional students.

The provision further specifies that NC AHEC must do at least the following as part of its study:

- (1) Survey other states to identify the best innovative and effective approaches to address preceptor shortages for medical students, nurse practitioner students, physician assistant students, and prelicensure nursing students.
- (2) Research and report on the current approaches to identifying, engaging, financing, and evaluating clinical training sites and how schools use tuition funding to cover their students' costs related to clinical placements and training. As part of this component of the study, NC AHEC shall consult with the Board of Governors of The University of North Carolina, the State Board of Community Colleges, and the North Carolina Independent Colleges and Universities.
- (3) Assess the capacity of North Carolina and nearby states for clinical training sites, in consultation with the North Carolina Healthcare Association (NCHA), the North Carolina Community Health Center Association, and clinically integrated networks, including the following information:

- a. The number and percentage of independent and health system practices that are currently clinical training sites in this State.
- b. The number and percentage of independent and health system practices that could become clinical training sites in this State.
- c. The impacts on the efficiency of clinical practices when or if they become clinical training sites.
- d. The financial impact on an independent or health system practice if it precepts students in clinical rotations.

In addition to the consultation described in (2) above, the provision requires NC AHEC to consult with other healthcare professional organizations and boards, including, but not limited to, the North Carolina Nurses Association, the North Carolina Academy of Family Physicians, the North Carolina Academy of Physician Assistants, the North Carolina Healthcare Association, the North Carolina Independent Colleges and Universities, the North Carolina Medical Society, the North Carolina Pediatric Society, The University of North Carolina, the North Carolina Board of Nursing, and the North Carolina Medical Board.

DISCUSSION

We are grateful for the General Assembly's commitment to the education of our future healthcare workforce and for entrusting NC AHEC with this important study.

Due to limited internal capacity at NC AHEC and the specified timeframe of the study, we attempted to contract the study to external entities that might have the technical and substantive expertise as well as the capacity to undertake the study. We were unable to find an external entity. We have reassigned capacity within NC AHEC and will conduct the study ourselves.

As a result, we request an extension of the due date of the study from September 1, 2024 to February 1, 2025.

To ensure we conduct the study effectively, timely and in compliance with the requirements of the provisions, we are establishing two advisory committees - one to advise on practice and educational considerations and one to advise on scientific/research considerations. These advisory committees will be made up of experts, practitioners, and association leaders from across the state. We have nearly finalized the membership of both committees. We plan to schedule the first meeting of both committees by the end of April and expect the committees to meet approximately every other month for a total of four meetings.

We are working to create two temporary positions within NC AHEC to support the work of the preceptor study. We believe this capacity will be sufficient when combined with the reassigned existing capacity to successfully and timely complete the study.

We have begun a literature review to better understand the perspectives of experts in the field. We expect this to be completed by the end of May.

We have begun mapping out the process by which we will conduct the study including which of the stakeholders specified in the provision we will partner with to gather the required information. These partnerships, especially with the named governmental entities and associations, will be essential for successful completion of the study. Our plan is to complete data collection by the end of September and conduct analysis and draft the report in October, November and December.

Thank you, again, for entrusting NC AHEC with this important work and for considering our request to extend the due date of the study from September 1, 2024 to February 1, 2025.

Please let me know if you have any questions or would like any additional information.