2023 Current Fiscal Year Report: National Advisory Council on the **National Health Service Corps**

Report Run Date: 03/29/2024 08:30:00 AM

2. Fiscal Year 1. Department or Agency

Department of Health and Human Services 2023

3b. GSA

3. Committee or Subcommittee Committee

No.

National Advisory Council on the National

Health Service Corps

950

14c.

4. Is this New During 5. Current 6. Expected 7. Expected

Fiscal Year? Renewal Date Term Date Charter

No 10/30/1996

8b. Specific 8a. Was Terminated During 8c. Actual **Termination** FiscalYear? **Term Date**

Authority

No

9. Agency 10b. 10a. Legislation

Recommendation for Next Legislation Reg to Terminate? Pending? **FiscalYear**

Continue Not Applicable Not Applicable

11. Establishment Authority Statutory (Congress Created)

12. Specific 13. 14

Establishment Effective Commitee Presidential?

Authority Type Date

42 U.S.C. 254i 10/01/1977 Continuing No

15. Description of Committee National Policy Issue Advisory

Board

16a. Total Number of Reports 2

16b. Report Report Title

Date

The National Health Service Corps

12/01/2022 at 50: Accomplishments,

Adaptations, and Aspirations

Letter of Recommendation for

Funding the Fiscal Year 2024 05/01/2023

National Health Service Corps Loan Repayment Scholarship Program

Number of Committee Reports Listed: 2

3 17b. Closed 0 17c. Partially Closed 0 Other Activities 0 17d. Total 3

Meetings and Dates

Purpose Start End

NACNHSC will engage in conversations to raise awareness of the health care impact of caregiver burden; the emerging relevance for guidance on navigating caregivers support

networks; collaboration that supports

coordination of team-based care;

opportunities to enhance academic training;

HRSA policy updates; and NACNHSC future

priorities.

NACNHSC will develop a letter to support

the critical need to continue National Health

Service Corps funding and discuss future

priorities.

NACNHSC members will receive HRSA

Division of National Health Service Corps

updates and discuss innovative projects that connect underserved communities with much needed health care services in

non-traditional ways.

06/27/2023 - 06/28/2023

03/21/2023 - 03/21/2023

11/15/2022 - 11/16/2022

Number of Committee Meetings Listed: 3

Current FY Next FY

18a(1). Personnel

Pmts to Non-Federal \$8,750.00 \$22,500.00

Members

18a(2). Personnel

Pmts to Federal \$0.00 \$0.00

Members

18a(3). Personnel

\$245,021.00 \$261,831.00

Pmts to Federal Staff

18a(4). Personnel

Pmts to Non-Member \$1,656.00 \$4,240.00

Consultants

18b(1). Travel and Per

Diem to Non-Federal \$0.00 \$29,085.00

Members

18b(2). Travel and Per		
Diem to Federal	\$0.00	\$0.00
Members		
18b(3). Travel and Per	\$0.00	\$0.00
Diem to Federal Staff	φυ.υυ	φυ.υυ
18b(4). Travel and Per		
Diem to Non-member	\$0.00	\$0.00
Consultants		
18c. Other(rents,user		
charges, graphics,	\$52,659.00	\$54,589.00
printing, mail, etc.)		
18d. Total	\$308,086.00	\$372,245.00
19. Federal Staff	1.25	1.25
Support Years (FTE)	1.25	1.20

20a. How does the Committee accomplish its purpose?

The Council has been providing feedback on the Agency's endeavors to reshape the National Health Service Corps (NHSC) as outlined in HHS Priorities through their meetings up to 4 times per year or more as needed. The Council provides direct feedback to the NHSC Director, HRSA Administrator, and HHS Secretary. In FY 2023, the Council focused on clinician burnout and resiliency; increased support in the NHSC workforce via data analysis efforts for future forecasting, continued discussions on future development and use of telehealth opportunities in rural areas. The Council discussed health equity and the role of the healthcare workforce in delivering quality care and reducing health disparities in rural and underserved communities; and creating a NHSC 50th Anniversary White Paper with an overview of the NHSC history, current impact the NHSC has made in communities and the future aspirations of the NHSC. The Council met three times in FY 2023.

20b. How does the Committee balance its membership?

Council members are primary health care professionals with a broad range of experience: as active clinicians, NHSC alumni, participants in health care delivery systems, academics, site administrators, and members of state-based and professional organizations. There is also a continual balance of minority and female members on the Council. Members bring to the Council first-hand and policy level expertise on meeting the needs of the urban and rural underserved through an interdisciplinary model of care that is community responsive and culturally competent.

20c. How frequent and relevant are the Committee Meetings?

The Council can meet up to a minimum of four times per year or more as needed (in person and virtually) to provide advice and guidance to the NHSC regarding those issues which have an impact on the NHSC's ability to meet its mission. The Council's contribution is crucial to the continuation of the NHSC's effectiveness as the only federal program which directly addresses the problem of maldistribution of clinicians in the nation. It is this problem which is the root cause of underservice and has become increasingly critical due to the rapid changes in the health care environment in recent years.

20d. Why can't the advice or information this committee provides be obtained elsewhere?

This Council is the sole source of objective program and policy guidance to the Secretary regarding the function of the NHSC in addressing the needs of the underserved. The NHSC program is a unique program that works directly with individuals rather than institutions, input from

those persons directly impacted by the program are critical to its success. In addition, Council members' experience and commitment to the mission provide to the Director of the NHSC, the HRSA Administrator, and the health professional shortage designation program a unique resource that informs their daily operations and long range planning.

20e. Why is it necessary to close and/or partially closed committee meetings?

21. Remarks

One funding recommendation in the May 2023 letter submitted to the Secretary of Health and Human Services.

Designated Federal Officer

Diane O. Fabiyi-King DFO, NAC on NHSC

Committee Members	Start	End	Occupation	Member Designation
Anderson, Aaron	09/24/2023	09/23/2026	Toppenish Medical-Dental Clinic	Special Government Employee (SGE)
Anderson, Andrea	06/20/2021	06/21/2024	Physician	Member Special Government Employee (SGE) Member
Brandner, Tara	06/20/2021	06/21/2024	Nurse Practitioner	Special Government Employee (SGE) Member
Callins, Keisha	08/18/2019	02/15/2023	Physician	Special Government Employee (SGE) Member
Chan, Charmaine	08/01/2021	08/02/2024	Physician	Special Government Employee (SGE) Member

Daniels, Sheri-Ann	09/24/2023	09/23/2026	Executive Director of Papa Ola Lokahi	Special Government Employee (SGE) Member
Doss, Jihan	09/24/2023	09/23/2026	Dentist and Faculty Member, Prairie State University and Midwestern University, College of Dental Medicine	Special Government Employee (SGE) Member
Fletcher-Blake, Debbian	03/26/2023	03/25/2026	CEO, Vocational Instruction Project Community Services, Inc.	Special Government Employee (SGE) Member
Garbely-Kerkovich, Sandra	08/01/2021	08/02/2024	Dentist	Special Government Employee (SGE) Member
Gracia, Deborah	03/26/2023	03/25/2026	Chief Medical Officer, Osteopathic Medical Education for Borinquen Health Care Center, Inc.	Special Government Employee (SGE) Member
Khozaim, Kareem	08/01/2021	08/02/2024	Physician	Special Government Employee (SGE) Member
McMillen, Shawn	09/24/2023	09/23/2026	Executive Director of First Step House	Special Government Employee (SGE) Member
Schmitz, David	08/18/2019	02/15/2023	Professor and Chair	Special Government Employee (SGE) Member
Sheen, Edward	03/26/2023	03/25/2026	Chief Population Health Officer and Senior Vice President at Health Catalyst	Employee

				Special
Toylor Dooir			Chief Medical	Government
Taylor-Desir, Monica	08/18/2019	02/15/2023	Officer and	Employee
Monica			Psychiatrist	(SGE)
				Member
				Special
Villareal, Elias	08/01/2021	08/02/2024	Physician	Government
			Physician Assistant	Employee
				(SGE)
				Member

Special

Number of Committee Members Listed: 16

Narrative Description

The National Advisory Council on the National Health Service Corps (NACNHSC) fully supports the agency's mission and strategic plan in many ways. NACNHSC gathers national leaders who are actively providing primary care to the underserved and allows them to advise the NHSC Program and Agency on the optimal way to reach the underserved from their perspective. In addition, NACNHSC fields comments and concerns from organizations and clinicians currently in service to the underserved in order to improve operations on all levels within the federal government.

What are the most significant program outcomes associated with this committee?

	Checked if	
	Applies	
mprovements to health or safety		
Trust in government		
Major policy changes		✓
Advance in scientific research		
Effective grant making		
mproved service delivery		✓
ncreased customer satisfaction		✓
mplementation of laws or regulatory		1
requirements		(X .)
Other		

Outcome Comments

What are the cost savings associated with this committee?

	Checked if Applies
None	
Unable to Determine	✓
Under \$100,000	
\$100,000 - \$500,000	
\$500,001 - \$1,000,000	
\$1,000,001 - \$5,000,000	
\$5,000,001 - \$10,000,000	
Over \$10,000,000	
Cost Savings Other	

Cost Savings Comments

unknown

What is the approximate <u>Number</u> of recommendations produced by this committee for the life of the committee?

75

Number of Recommendations Comments

The Council serves as a forum to identify the priorities for the NHSC and bring forward and anticipate future program issues and concerns. This work is done through ongoing communication with program staff, professional organizations, communities and program participants. The Council functions as a sounding board for proposed policy changes by using the varying levels of expertise represented on the Council to advise on specific program areas. The Council can develop and distribute white papers, briefs and letters of recommendations that clearly state issues and/or concerns relating to the NHSC with specific recommendations for necessary policy revisions. Currently, recommendations are being made to improve program operations and policies as well as to direct future program, and the HRSA Administrator.

What is the approximate <u>Percentage</u> of these recommendations that have been or will be <u>Fully</u> implemented by the agency?

80%

% of Recommendations Fully Implemented Comments

The most recent recommendations for FY 2023 are still under review for implementation.

What is the approximate <u>Percentage</u> of these will be <u>Partially</u> implemented by the agency?	
% of Recommendations Partially Implemente	ed Comments
We have received response from The Secretary	to thank the Council for the Letter of
Support for National Health Service Corps.	
Does the agency provide the committee with	
implement recommendations or advice offer	ed?
Yes No Not Applicable	
Agency Feedback Comments	
Any recommendations made by the Council are	noted in the minutes and responded to at
the Council's next meeting through an update by	y the Director of the NHSC. Public can find
feedback on Council website	
https://www.hrsa.gov/advisory-committees/natio	onal-health-service-corps.
What other actions has the agency taken as	a result of the committee's advice or
recommendation?	
	Checked if Applies
Reorganized Priorities	✓
Reallocated resources	✓
Issued new regulation	✓
Proposed legislation	
Approved grants or other payments	
Other	
Action Comments	
Not Applicable	
Is the Committee engaged in the review of a	oplications for grants?
No	
Grant Review Comments	
NA	

How is access provided to the information for the Committee's documentation?

Checked if Applies
✓
✓
✓
✓

Access Comments

N/A