

IHS FACT SHEET

Indian Health Service Partnerships with other Federal Agencies to Recruit Health Providers

The Secretary of the U.S. Department of Health & Human Services (HHS) created the Executive Council on Quality Care at Indian Health Service Facilities in order to identify and facilitate collaborative, action-oriented approaches using resources from across HHS to address issues that relate to or may affect the quality of care provided at Indian Health Service (IHS) facilities. One of the principles that the Executive Council uses to guide its operations is to work to identify and facilitate collaborative, action-oriented approaches, using resources from across HHS, to address issues that relate to or may affect the quality of care provided in Tribal communities.

Along these lines, the Executive Council's health care workforce arm – composed of leadership from IHS, the Health Resources and Services Administration (HRSA), and other HHS agencies – aims to build a framework for long-term sustainable strategies that will ultimately ensure adequate clinician and facility leadership staffing at IHS facilities and a competent, qualified, workforce that is sustainable over time. Fundamental to this are considerations on how to best build or strengthen pathways to encourage and support American Indian youth to enter health care careers as providers or in administration.

Hence, partnership between IHS and other HHS component agencies for this work has sought to optimize interagency alignment with key IHS agency objectives to strengthen mid- and long-term strategies to build up the IHS health workforce. Below are some key examples of how this collaboration is being developed and has already begun to demonstrate value to IHS:

Partnerships with HRSA

- A new policy for HRSA's National Health Service Corps (NHSC) program is forthcoming, which was developed collaboratively with IHS and that will expand NHSC eligibility to include IHS hospitals as sites able to sponsor clinicians. Previously only IHS outpatient clinics were eligible to host NHSC clinicians.
- The online "NHSC Jobs Center" (www.nhscjobs.hrsa.gov) has been modified to allow cross-posting for IHS open positions.
- HRSA and IHS have begun to collaborate on marketing, outreach, and social media campaigns for IHS open positions.
- A review of NHSC providers was performed to identify any providers who were in need of a clinical site at which to fulfill their NHSC obligations (related to scholarships or loan repayment), and to identify their interest in doing so at an IHS clinical site. A similar effort was utilized to match RNs and APRNs NURSE Corps to sponsoring IHS clinical sites.
- HRSA's National Health Service Corps program has provided IHS guidance, based on its extensive experience in leveraging health care providers to provide care in underserved communities, in order to strengthen IHS's own recruitment and retention programs/initiatives.
- To help build up workforce pathways to IHS and Tribal sites, Tribes are eligible to apply for some of HRSA's competitive funding opportunities, such as the Teaching Health

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Center Graduate Medical Education grant program and the Area Health Education Center (AHEC) Program.

- HRSA regional directors/staff were connected with IHS Area Directors/staff to optimize sharing of promising practices for recruitment and retention and to collaboratively work on building health education pathways for American Indian youth.

Partnerships with other HHS and Federal agencies

- A number of Federal grant funding opportunities, within and outside HHS, have potential to help build up workforce pathways to careers at IHS and Tribal sites (programs for which Tribes are eligible to apply for funding). These opportunities can be found on the Grants.gov website.
- Other Federal initiatives are aimed at these same goals, including:
 - The White House Initiative on American Indian and Alaska Native Education.
 - The White House Initiative on Tribal Colleges and Universities.
 - The White House "Generation Indigenous" Initiative.
- The Assistant Secretary for Planning and Evaluation (ASPE) is the HHS lead for policy development, coordination, and research. ASPE has some health policy research capacity to study and ultimately help strengthen the Tribal-serving health workforce.
- A number of relevant opportunities to build the health workforce are supported through initiatives of the Office of Minority Health (Training, Guides, and Resources).
- Initial discussions are being held between IHS and the CMS Innovation Center to determine if there are opportunities to partner together and develop novel payment reform initiatives and care models which can strengthen the ability of IHS Service Units to serve their patient populations. Such models might incentivize providers to be recruited to or retained at IHS service units.
- The National Institute on Minority Health and Health Disparities (NIMHD), one of the 27 Institutes and Centers of the National Institutes of Health (NIH), has some limited opportunities to strengthen provider recruitment and retention through incentives (such as their loan repayment program, Research Endowment Program, and NRSA grants). While these programs primarily serve to recruit and retain the biomedical research workforce (not the clinical workforce), there is notably a "halo effect" from these initiatives – by building up a university's research Department, it tends to strengthen the education of other students who do ultimately select clinical health careers. A gateway to professional school training (MD, NP, etc.) is often research experience.

Partnerships with Peace Corps

- IHS has been collaborating with the Peace Corps volunteer reintroduction team to develop an outreach and marketing strategy to help recruit returning volunteers with a background in health care to IHS careers.