

To: Governor O'Malley and the General Assembly

From: Secretary of the Maryland Department of Veterans Affairs

Date: December 1, 2011

Re: Military Health Care Provider Transition Plan (required per HB 1353, 2010 Session)

MSAR# 8298 SB 1033/Ch. 511, 2010 and HB 1353/Ch. 512, 2010

Background

On May 20th, 2010, the Governor signed House Bill 1353 which requires the Maryland Department of Veterans Affairs (MDVA) to develop a Military Health Care Provider Transition Plan. The purpose of the plan is to increase the number of veterans with expertise in health care workforce shortage areas to transition into civilian health care provider positions. The bill called for MDVA to work with the following state offices in preparing the plan ("the planning group"): Maryland Higher Education Commission, Department of Health and Mental Hygiene, Governor's Workforce Investment Board, the Department of Labor, Licensing and Regulation, and the Department of Housing and Community Development. The Dean of Education Programs for the U.S. Navy Medicine Manpower, Personnel, Training and Education Command has volunteered to assist in preparing this plan.

Planning Group

The MDVA Chief of Staff, Jerry Boden, has been working with the following individuals from state agencies on this plan:

- Paula Hollinger, Associate Director, Health Care Workforce, Department of Health and Mental Hygiene (DHMH)
- Mary O'Connor, Governor's Workforce Investment Board (GWIB)
- Gareth Murray, Director of Legislative Affairs, Maryland Higher Education Commission (MHEC)

A key advisor to our group is Jerral Behnke, Dean of Education Programs for the U.S. Navy Medicine Manpower, Personnel, Training and Education Command.

Health Care Workforce in Maryland

According to a recent press release from Lt. Governor Brown's office: since 2009, Maryland has added nearly 12,000 health care jobs, including 7,900 in ambulatory care, 2,350 in nursing and residential care and 1,700 in our hospitals. Health care is the second fastest growing industry in Maryland but it is not growing fast enough to meet the demands we will face when federal health care reform is fully implemented. To meet the growing demand spurred by aging baby boomers and an influx of nearly 400,000 newly insured individuals, Maryland needs to grow its health care workforce by as much as 25% before 2020.

At the present time, the shortages that do exist are for primary care providers (family and general physicians, nurse practitioners and physician assistants) willing to practice in lower socioeconomic areas and rural areas of the state. It is expected that Maryland will return to a serious nursing shortage once the economy recovers.

Actions Taken and Findings

The planning group has met with the following individuals to gain further insight on this issue:

- Stan Seidel, Director, Veterans Employment and Training, U.S. Department of Labor
- Daniel Nichols, Executive Director, Military to Medicine Program, Inova Health System (Virginia)
- Jeanne DeCosmo, Director of Workforce Activities, Maryland Hospital Association
- Colonel Corinne Ritter, Commander, 48th Combat Support Hospital, U.S. Army Reserves, Ft. Meade, MD
- Captain Hajja Sahid-Hicks, Commander, 224th Area Support Medical Company, Maryland Army National Guard
- Dennis Wilkie, Employer Partnership of the Armed Forces, Ft. Meade, MD
- Mike Wingfield, Associate Chief, Talent Management, VA Maryland Health Care System
- Ann Bloesl, Manager, Transition Assistance Program, Bethesda Naval Medical Center
- Ed Cramer, Military Relations & Field Services Manager, US Family Health Plan, Johns Hopkins Hospital
- Christopher Gruttadauria, Manager of Recruiting for CVS Pharmacy Minute Clinics

The workgroup also reviewed the recommendations identified in the Report of the Department of Health and Mental Hygiene as required under Chapter 441 of the Acts of 2007, Identifying and Breaking Down Barriers: Easing the Transition from Active Duty to Civilian Health Care Provider, dated December 12, 2007.

After meeting with the individuals listed above, the planning group determined that most health care personnel coming out of the military have the national certification they need to obtain like employment in the civilian health care sector. The only exceptions to this are the U.S. Navy General Duty Corpsmen and U.S. Army Medics. These two groups have considerable clinical experience in their field; however they can only qualify for employment as a Certified Nursing Assistant (CNA) when they seek employment in the civilian health care sector. Since the CNA position is far below their skill level, these Corpsmen and Medics typically leave the medical field (and possibly the state of Maryland) to find a position that provides better pay. We would like to keep these skilled caregivers here in Maryland at an appropriate level of employment; if we do, the veterans may be more inclined to stay here and help address some of the health care staffing needs in Maryland. We believe that the appropriate level of employment for these veterans to target is the Licensed Practical Nurse (LPN) and/or Paramedic. As many LPNs/Paramedics often go on to become registered nurses, this approach would ease the anticipated shortage of nurses in the years to come. In our research, we were unable to find another state that has taken a proactive approach to helping Corpsmen/Medics transition to the civilian health care sector. So, we would be establishing a new and innovative program.

The Plan

The planning group agreed that the best way to keep the Corpsmen/Medics in Maryland would be to ensure that they obtain whatever credits possible toward completing and LPN/Paramedic Program, as well as assistance in finding employment while they are completing LPN course requirements. In order to attract Corpsmen/Medics to Maryland LPN/Paramedic programs, each school should have a veteran academic advisor that is familiar with the coursework and clinical experiences of our Corpsmen/Medics. This will not require any additional hires for the LPN/Paramedic programs; they already have counselors/advisors; they would just need to assign one to be the veteran advisor. By advertising that the school has a specialized advisor available specifically for former Corpsmen/Medics that want to continue their health care career in the private sector, veterans will be more inclined to visit the school since they will feel that they can speak with someone who "understands them."

Our approach to developing this plan further was as follows:

- Meet with the Director of each LPN program in the state (see attached list of LPN programs, as Exhibit 1) to obtain their buy-in for this initiative to assist these veterans
- Meet with a few large health care providers and urge them to participate with the LPN veteran academic advisor to provide employment while the veteran is pursuing LPN degree.

Expected results if this plan were implemented:

- Each LPN program in the state, and MIEMSS, will have trained an individual to become the Veteran LPN Advisor who will counsel former corpsmen/medics on what courses and clinical work they are eligible to receive credit for. The Maryland Department of Veterans Affairs will assist as necessary with the training of these individuals.
- Each LPN program in the state, and MIEMSS, will have prepared an advertisement (see sample attached, as Exhibit 2) with the contact information for the academic advisor that is prepared to assist veterans who were corpsmen/medics. The Maryland Department of Veterans Affairs will assist the program in outreach efforts. Outreach efforts will include advertising the new service to current veterans, as well as military personnel who are about to separate from military service (via the Transition Assistance Programs held at most military bases in Maryland).
- Health care providers will have signed MOU's with the local LPN/paramedic programs
 to provide jobs for former corpsmen/medics who need work while they complete LPN or
 paramedic program requirements. Understanding that the corpsmen/medics do not yet
 have any formal certifications, the health care providers will be asked to partner with us
 and "be creative" in establishing challenging job opportunities for the veterans who have
 varying degrees of health care and academic experience.

Progress to Date

The planning group has met with the following individuals at the following organizations to discuss our plan:

- Cecil College
 - o Christy Dryer Director of Nursing and Health Professions
- Maryland Institute for Emergency Medical Services Systems (MIEMSS)
 - o Dr. Robert Bass, Executive Director
- Howard Community College
 - o Georgene Butler Division Chair, Health Sciences
- The Community College of Baltimore County
 - o Shawn McNamara Nursing Program Administrator
- Prince George's Community College
 - o Cheryl Dover Chair, Department of Nursing
- Hagerstown Community College
 - o Jeffrey Leister Academic Advisor, Nursing Division
- Maryland Association of Associate Degree Nursing Directors
 - o All Associate Degree Nursing Directors in Maryland

A few of these meetings were also attended by representatives from the **State of Maryland Board of Nursing**, Shirley Devaris and Patricia Kennedy.

All organizations we met with seemed very supportive of our plan. The curriculum outlines for the Navy Corpsman and the Army Medic were share with everyone prior to the meetings. Here are the main points that came out of our meetings:

- The American Council on Education (ACE) does course exhibits and registry transcripts for Navy Corpsman and Army Medics, and these are very helpful tools for LPN programs to determine what courses the veterans could receive credit for. Attached are Exhibit 3 – ACE Course Exhibit for Army Medic (also called Health Care Specialist), and Exhibit 4 – ACE Course Exhibit for Navy Corpsman.
- A few schools felt that the curriculum for the Navy Corpsman is a closer match to the LPN program, and the curriculum for the Army Medic is a closer match to the Paramedic Program
- Dr. Bass at MIEMSS offered to provide individualized counseling for Corpsmen/Medics who are interested in becoming paramedics. The counselor would review the veteran's coursework and military experience to determine courses needed to complete the state authorized paramedic program. The counselor would then send their recommendation to the paramedic program the veteran wants to attend.
- A few schools stated that they already have similar programs that they can expand to include veterans. For example, Prince George's County conducts a "Lab Blitz" that enables students to demonstrate their skills. If they demonstrate ability to do a certain task, they can either test out or receive credit for that course or clinical requirement.
- Cecil College prepared a draft plan of what they intend to do for corpsmen/medics (attached as Exhibit 5)

RECOMMENDATION

Allow the planning group to continue to work under the direction of the Maryland Department of Veterans Affairs to achieve the expected results mentioned above.

Military Health Care Provider Transition Plan

Exhibit 1

Higher Education Institutions in Maryland that have Licensed Practical Nurse (LPN) Programs

Allegany College of Maryland

Anne Arundel Community College

Baltimore City Community College

Carroll Community College

The Community College of Baltimore County

Cecil College

College of Southern Maryland

Frederick Community College

Hagerstown Community College

Harford Community College

Howard Community College

Prince George's Community College

Sojourner-Douglass College

Washington Adventist University

Wor-Wic Community College

ATTENTION MILITARY VETERANS WHO SERVED AS NAVY CORPSMEN OR ARMY MEDICS

Are you interested in applying the skills you acquired as a corpsman/medic toward a career in the civilian health care industry in Maryland?



If the answer is yes, then we would like to speak with you about our Licensed Practical Nurse (LPN) Program!

XXX Community College has a Veteran LPN Academic Advisor ready to meet with you to discuss your options. The Veteran LPN Academic Advisor is familiar with the educational and military experience of Navy Corpsmen and Army Medics.

Our Veteran LPN Advisor will sit down with you to review your military coursework and clinical experience, then tell you what courses/clinical work you can receive credit for toward our LPN program.

Our Veteran LPN Advisor will also assist you in finding employment at local health care facilities while you are completing the LPN course requirements.

Contact our Veteran LPN Advisor today, so that you can get started toward your career in the Maryland health care industry!

John Doe Veteran LPN Advisor XXX Community College Phone: (xxx) ccc-vvvv E-mail: xxxx@mmmm.edu

Course Exhibit

NV-0703-0008

Basic Hospital Corps School (Basic Hospital Corps) (Hospital Corpsman, Basic)

Course Number: Version 1: B-300-0010. Version 2: B-300-0010.

Location: Version 1: School of Health Sciences, San Diego, CA; Hospital Corps School, Great Lakes, IL. Version 2: Naval Hospital Corps School, Great Lakes, IL.

Length: Version 1: 14 weeks (470–560 hours). Version 2: 14 weeks (560 hours).

Exhibit Dates: Version 1: 1/89-4/06. Version 2: 5/06-Present.

Learning Outcomes: Version 1: Upon completion of the course, the student will be able to perform as an entry-level provider of basic and emergency patient care. Version 2: Upon completion of the course, the student will be able to perform duties as general service hospital corpsmen and perform emergency medical and nursing care procedures.

Instruction: Version 1: Lectures cover anatomy and physiology; first aid; minor surgery; hygiene and sanitation; pharmacology; toxicology; medical laboratory; patient care techniques and principles; nuclear, biological, and chemical safety; and trauma management and treatment. Course includes very limited clinical training. Version 2: Practical exercises, laboratory, lecture, performance checklist, and clinical. Topics include anatomy and physiology, nutrition, cardiopulmonary resuscitation (CPR), medical legal/ethical issues, behavioral emergencies, patient assessment trauma injuries, medical decision making, nursing procedures, medication administration, parenteral and intravenous medication and administration, pre- and post-op nursing care, nursing clinical experience, health assessment, and clinical laboratory procedures.

Credit Recommendation: Version 1: In the vocational certificate category, 4 semester hours in emergency care, 7 in basic patient care procedures, and 1 in pharmacology. In the lower-division baccalaureate/associate degree category, 3 semester hours in anatomy and physiology (5/98)(12/03). Version 2: In the lower-division baccalaureate/associate degree category, 3 semester hours in nursing fundamentals, 1 in anatomy and physiology, 3 in nursing (clinical practicum), 2 in pharmacology, 1 in management (of behavior emergencies), 2 in management (of trauma injuries), 1 in physical assessment, and 1 in patient care (in a contaminated environment) (10/06) (10/06).

THIS EXHIBIT WAS LAST UPDATED ON 9/24/2010

Course Exhibit

AR-0709-0065

HEALTH CARE SPECIALIST

Course Number: Version 1: 300-91W10. Version 2: 300-91W10. Version 3: 300-68W10. Version 4: 300-68W10.

Location: Version 1: Academy of Health Sciences, Fort Sam Houston, TX. Version 2: Academy of Health Sciences, Fort Sam Houston, TX. Version 3: Medical Department Center and School, Fort Sam Houston, TX. Version 4: Medical Department Center and School, Fort Sam Houston, TX.

Length: Version 1: 16 weeks (910 hours). Version 2: 16 weeks (1046 hours). Version 3: 16 weeks (1034 hours). Version 4: 16 weeks (662 hours).

Exhibit Dates: Version 1: 1/01-4/03. Version 2: 5/03-9/06. Version 3: 10/06-9/07. Version 4: 10/07-Present.

Learning Outcomes: Version 1: Upon completion of the course the student will be able to measure and assess vital signs, complete and maintain records, perform CPR, administer oxygen, manage a patient with artificial airways, manage wounds, administer injections and immunizations, treat chemical injuries, initiate measures to prevent spread of communicable diseases, perform basic field sanitation procedures, and perform emergency and evacuation care. Version 2: Upon completion of the course the student will be able to measure and assess vital signs, complete and maintain records, perform CPR, administer oxygen, manage a patient with artificial airways, manage wounds, administer injections and immunizations, treat chemical injuries, initiate measures to prevent spread of communicable diseases, perform basic field sanitation procedures, and perform emergency and evacuation care. Version 3: Upon completion of the course, the student will be able to provide emergency medical treatment, limited primary care treatment, force health protection and evacuation in a variety of operational and clinical settings; and understand the continuum of military healthcare for the injured patient, from the battlefield to the medical treatment facility (MTF). Version 4: Upon completion of the course, the student will be able to provide basic emergency medical care for critical and emergency patients, consistent with the 1998 Department of Transportation National Standard curriculum for EMT: exercise standard curriculum for EMT: exercise standard precautions; understand basic principles of anatomy and physiology; perform basic patient assessment; assess the critical trauma patient; intervene on life threats; utilize basic EMS equipment; access emergency resources; and prepare and package patients for transport.

Instruction: Version 1: Laboratory, audiovisual materials, case studies, discussion, classroom exercise, practical exercises, lecture, learner presentation. Topics include emergency and evacuation care, minor acute care, in-patient basic care procedures, outpatient care, casualty triage and processing, EMT-basic, health protection, supportive care, combat trauma, NBRC, and clinical experiences in ambulance outpatient and hospital settings. Version 2: Laboratory, audio visual materials, case studies, discussion, classroom exercise, practical exercises, lecture, learner presentation. Topics include emergency and evacuation care, minor acute care, in-patient basic care procedures, outpatient care, casualty triage and processing, EMT-basic, health protection, supportive care, combat trauma, NBRC, and clinical experiences in ambulance outpatient and hospital settings. Version 3: Audiovisual materials, practical exercises, discussion, learner presentations, classroom exercises, laboratory, lecture, and clinical. Topics include administration of emergency medical treatment; evacuation of

casualties; force health protection; routine patient care; managing patient care on the battlefield and in medical treatment facilities; CPR (cardio pulmonary resuscitation); treatment of CBRNE (chemical, biological, radiological / nuclear, and explosions) casualties; invasive procedures; and combat trauma and evacuation. Version 4: Audiovisual materials, practical exercises, discussion, case studies, classroom exercises, laboratory, lecture, and computer-based training. General course topics include standard precautions, patient assessment, IV theory, basic pharmacology, trauma treatment and transport according to Pre-Hospital Trauma Life Support (PHTLS), perform duties as a field or clinical EMT, and airway management from basic through intermediate (King LT).

Credit Recommendation: Version 1: In the lower-division baccalaureate/associate degree category, 1 semester hour in basic life support, 3 in advanced first aid, 4 in human anatomy and physiology (no laboratory), 3 in medical terminology, 7 in basic emergency medical technology (theory and clinical), 2 in advanced EMT (theory and clinical), 3 in pharmacology, and 4 in patient care procedures (6/02)(6/02). Version 2: In the lower-division baccalaureate/associate degree category, 1 semester hour in basic life support, 6 in anatomy and physiology (no lab), 4 in terminology, 7 in emergency medical technician theory, 9 in advanced EMT, 6 in patient care procedures, and 15 in clinical practicum (11/03)(11/03). Version 3: In the lower-division baccalaureate/associate degree category, 15 semester hours in emergency medical technician (EMT), 3 in medical surgical nursing, 3 in medical/surgical clinical, 1 in cardiopulmonary resuscitation (CPR) and 3 in pharmacology. In the upper-division baccalaureate category, 3 semester hours in chemical, biological, radiological/nuclear, and explosions (CBRNE) (2/08)(2/08). Version 4: In the lower-division baccalaureate/associate degree category, 16 semester hours in emergency medical technician basic, 2 in basic pharmacology, 3 in Pre-Hospital Trauma Life Support, 1 in clinical internship, 3 in field experience, 3 in primary care and prevention, and 1 in cardiopulmonary resuscitation (CPR) (5/10)(5/10).

Related Occupations: 91W.

THIS EXHIBIT WAS LAST UPDATED ON 5/24/2011

Military Health Care Provider Transition Cecil College DRAFT

Navy Corpsman

Navy Corpsmen are uniquely positioned to transition into the LPN program at Cecil College. Based on the version completed by the corpsman, ACE (American Counsel for Education) approved courses may be transferred to meet requirements in anatomy and physiology and/or nursing fundamentals based on the version of corpsman education completed:

Version 1:

Emergency care, basic patient care procedures and pharmacology: credit for NUR 104, Nursing Fundamentals Theory (5 credits).

Anatomy and Physiology: credit for BIO 208, Human Anatomy and Physiology (3 credits, still need 1 credit lab, BIO 218)

Version 2:

Nursing fundamentals, pharmacology, management of behavioral emergencies and management of trauma injuries, physical assessment, and patient care in a contaminated environment: Credit for NUR 104, Nursing Fundamentals Theory (5 credits).

Nursing clinical practicum: NUR 114, Clinical Lab I, Nursing Fundamentals (2 credits)

Requirements for the practical nursing program at Cecil College can be completed in just 12 months with the graduate then eligible to sit for the NLCEX-PN for any state in the United States. For a complete listing of required courses and information on the application process, please go to cecil.edu (link to LPN web site). Interested individuals are encouraged to contact Joellen Brackin (x554) for further information.

All students who successfully complete LPN program requirements and ADN prerequisites are then eligible to continue their studies towards an Associate of Science in Nursing.

Army Medic

Army Medics are uniquely positioned to transition into the paramedic program at Cecil College. As a current EMT-B and based on the version completed by the medic, ACE approved courses may be transferred to meet not only paramedic program entry requirements but also may meet course requirements towards an Associate of Applied Science in Emergency Medical Technology-Paramedic or an Associate of Science in Healthcare Sciences based on the version completed by the medic:

Version I

Human Anatomy and Physiology: credit for BIO 208, Human Anatomy and Physiology (3 credits, still need 1 credit lab, BIO 218)

Additional courses that are not degree specific:

Basic life support and advanced first aid: credit for PED 135 First Aid and CPR (3 credits)

Medical Terminology: credit for HCD 120 Medical Terminology (3 credits)

Version II

Human Anatomy and Physiology: credit for BIO 208, Human Anatomy and Physiology (3 credits, still need 1 credit lab, BIO 218) and BIO 209, Human Anatomy and Physiology (3 credits, still need 1 credit lab, BIO 219)

Additional courses that are not degree specific:

Medical Terminology: credit for HCD 120 Medical Terminology (3 credits)

EMT and basic life support: credit for PED 135 First Aid and CPR (3 credits)

Version III

Courses that are not degree specific:

EMT and basic life support: credit for PED 135 First Aid and CPR (3 credits)

Version IV

Courses that are not degree specific:

Basic life support and advanced first aid: credit for PED 135 First Aid and CPR (3 credits)

Medical Terminology: credit for HCD 120 Medical Terminology (3 credits)

For a complete listing of required courses and information on the application process, please go to www.cecil.edu. Interested individuals are encouraged to contact Joellen Brackin 410-287-6060(x554) the academic advisor for Nursing and Health Professions for further information.

All students who successfully meet paramedic program requirements are then eligible to continue their studies towards an Associate of Science in Nursing.