

DSRIP Statewide Investments: Family Nurse Practitioner (NP) Residency Training
Frequently Asked Questions

1. When are the applications due?

Answer: September 28, 2018.

2. Since the Family Medicine Residency Training deadline was extended, will the NP deadline also be extended?

Answer: No.

3. Is there a maximum number of residency slots per community health center (CHC)?

Answer: No, but you should clearly demonstrate you have the resources available to support the number of slots being requested.

4. Is the funding preference for new programs or new slots?

Answer: New slots.

5. Does the CHC get to interview resident candidates to determine fit with the program and organization?

Answer: Yes, it will be the CHC's choice as to who fills the residency slot(s).

6. If the CHC's needs are met by an Adult Nurse Practitioner (ANP), can an ANP be considered for residency?

Answer: Yes.

7. Can the program director be an ANP, not a Family NP?

Answer: Yes.

8. Can the residency also include physician assistants or is it limited only to nurse practitioners?

Answer: The residency is limited to nurse practitioners.

9. How many awards do you anticipate to make/total residency slots do you anticipate to fund through this initiative?

Answer: There have been 12 slots budgeted for this cycle, however the exact number will depend on the number and quality of applications to this program and to the Family Medicine Residency Program.

10. When do you expect CHCs to be notified if they received the award?

Answer: The intention is to notify applicants before the end of 2018.

11. Can the residency program start in September 2019? We think July/August is too early.

Answer: Yes, the residency program can start in September 2019. Please be sure to justify this start date in the application.

12. Would preceptor time be covered within the \$85,000 intended for salaries and training or within the administrative portion of the budget?

Answer: The use of salaries/training budget or administrative budget for preceptor time is up to the CHC.

13. Can we actually hire an NP and use this as part of their residency salary and training?

Answer: Yes.

14. If we are awarded this year, for 2019, would we be able to apply again the following year?

Answer: Yes, if there is a second round of funding through the DSRIP Statewide Investments NP Residency Training program. While we anticipate there will be, it has not been confirmed at this time.

15. Is there a pathway to other funding to continue the NP residency program after this first year of funding?

Answer: Funding for the overall continuation of a CHC's residency program, beyond what's being offered through this one year NP Residency Training Program, is not available through DSRIP Statewide Investments.

16. Are two-year residencies preferred?

Answer: Due to the potential benefit of a second year by improving retention and increasing competency, two-year programs are desirable.

17. Our NP residency is a two-year program, in which second year residents serve as mentors to first year residents. Could we support mentor time with these funds?

Answer: As long as the \$85,000 is used to support the salary and benefits of the first-year resident, the remaining funds are at the applicant's discretion. Please be sure to identify this use of funds in the budget and provide narrative justification.

18. Is it helpful to have an academic affiliation?

Answer: The merit of an academic affiliation would be assessed within the broader context of the proposed program/application. We do not require that programs include an academic affiliation.

19. Will NPs be involved in reviewing and selecting awardees?

Answer: Yes.

20. Will you disclose the names of the reviewers?

Answer: No.

21. What will the process be for the CHCs to interview the candidates?

Answer: The candidate interview process is up to the CHC.

22. We think it is highly unlikely that new grads will be fully licensed by the Aug-Sept 2019 start date, as it is taking about 4-5 months to get the MA Controlled Substances Registration (MCSR). Could residents start who are not yet fully licensed?

Answer: Yes, residents can start; however, they should be expected to obtain their MCSR at the earliest possible date.

23. Can the second year be a "transition to practice year" where we increase the residents' independence by allowing them to see patients and pulling back on didactics?

Answer: Yes, we would hope that by the end of the first year residents would be seeing patients independently with some consultation. Note, however, that funding from this program may only be used to support the first year of the residency program.

24. Is there any issue with residents doing rotations in an Ob/women's health training program even though it is not a CHC?

Answer: There is no issue with residents doing rotations in an Ob/women's health training program. Having external partnerships are encouraged.

25. What are the expectations around patient panels for the NP residents?

Answer: This program does not set specific expectations around patient panels. Patient panels are expected to be adequate in terms of volume, clinical diversity, and patient diversity to ensure a robust training experience.