

## Testimony

**Joint Legislative Public Hearing  
2018-2019 Budget  
Health/Medicaid**

**February 12, 2018**

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*Leadership for the New York State AHEC System is provided by community-based centers, the Statewide Office at the University at Buffalo and regional offices at Upstate Medical University, Albany Medical College and The Institute for Family Health.*

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My name is Leishia Smallwood. I am the Director of the New York State Area Health Education Center System, commonly referred to as AHEC.

Thank you for your continued support of the New York State Area Health Education Center (NYS AHEC) System, a dedicated healthcare workforce development initiative with the primary mission of improving and enhancing access to diverse and qualified healthcare professionals, particularly from medically disadvantaged communities. Serving the entirety of the state, the NYS AHEC System is comprised on nine local centers, three regional offices, and one statewide office. Since its inception in 1998, your support of the NYS AHEC System has helped:

- 240,000 students (K-12 and College) receive healthcare career exposure through our pipeline programs
- 37,000 health professions students receive over 3.65 million hours of education and clinical training
- 190,000 healthcare professionals participate in continuing education programs

While we are grateful for your continued support, ***last year's 20% reduction in state funding created significant challenges for the NYS AHEC System.*** We made painful cuts by eliminating programs and available resources at the local, regional and statewide levels. As a result, we served fewer members of *your* community – fewer students and job seekers were a part of the AHEC “grow our own” strategy, less clinical rotations were coordinated in underserved areas limiting recruitment opportunities, and education and training opportunities for health professionals were reduced.

***The 2018-2019 State Budget currently proposes additional funding reductions for the services and expenses falling under the healthcare workforce category, of which NYS AHEC is included.*** This new budget cut, on top of our previous year's reduction, will result in drastic changes, including the *potential elimination of the NYS AHEC System.* Should this proposed funding reduction occur, the NYS AHEC System would face the following repercussions:

- Decreased programming opportunities in already-limited rural and underserved areas
- Destroy vital connections for pipeline students to post-secondary healthcare education programs across the state via the elimination of AHEC Regional Offices
- Jeopardized federal funding, as matching funds from the state are required for continued federal dollars

I am excitingly relieved that programming to provide education and training initiatives in the medically underserved and underrepresented communities, of which the NYS AHEC System is structured to provide, will continue to be supported; however, the uncertain stability and viability of the NYS AHEC System due to further funding reductions is gravely concerning. Additionally, the excitement of the New York State AHEC System to have support through the consideration of continued level funding is overshadowed by the concern of the proposed consolidation funding for all programming, with combined and reduced grant buckets. Therefore, I am humbly seeking the same effort for us to remain as a separate sole source funded program, as awarded in last year's budget proposal. As always, we want to thank the New York State Assembly and Senate for your continuing support of sole source funding for the New York State AHEC System to support our health career exposure and exploration programs.

State funds not only help our nine centers, three regional offices and the Statewide Office recruit and help train the next generation of health professionals to work in underserved rural and urban communities, state funds serve as the required match to our federal funding. State funding is an excellent return on investment – our funding consists of approximately one-third State dollars, one-third federal funds and one-third Grants/Other.

While we are grateful for level funding, it would be incorrect to tell you that we have enough funding to reverse New York's shortage of primary care providers. Since 2008, state funding to the NYS AHEC System has decreased by 17% while at the same time inflation has risen by 13%. We realize that the budget process is a tough time when legislators choose priorities from a state full of worthy programs. We believe expanding efforts to “Grow Our Own” professionals to provide critical health services – professionals like doctors, nurse practitioners and nurses, physician assistants, social workers, dentists and pharmacists – is worthy of additional investment. “Grow Our Own” programs for secondary and post-

secondary students are a long-term solution to primary care shortages and increase the diversity of the health care sector in New York State.

We are all aware that there is a transformation underway in New York and across the country in the way we expect the health system to deliver patient-centered care with increased efficiency. There is no way to accomplish the goals of DSRIP - Delivery System Reform Incentive Payment Program; PHIP – Population Health Improvement Program and SHIP – State Health Innovation Plan without an adequate supply of well-trained medical and allied health professionals. The workforce is the most important part of the health care infrastructure and it needs adequate investment.

The New York State AHEC System is deeply involved in all of the Department of Health initiatives mentioned above and is a consistent voice emphasizing that these programs must include recruiting and training of future health professionals who will carry on health system transformation. As neutral brokers with more than fifteen years of health workforce development, AHECs work with students at all age levels and convene community-based collaborations with health professions schools and health institutions to improve access to care.

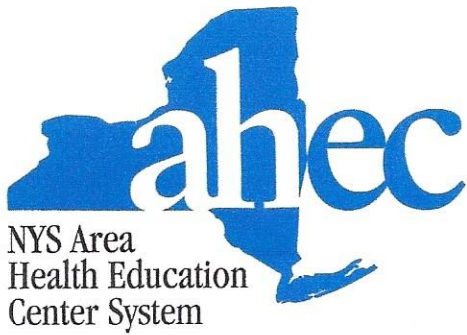
Last year, the New York State AHEC System continued our impressive outreach to students and professionals statewide through partnerships between the health workforce supply side (secondary schools and post-secondary academic institutions) and demand side (health care employers and communities).

- Roughly 1,600 elementary and middle school students, nearly 5,500 high school students and approximately 1,300 college students participated in health careers programs.
- Over 2,800 rotations were completed by medical, nursing and health professions students with over 400 preceptors/faculty at AHEC-sponsored community-based sites (e.g., community health centers, hospitals, clinics and private practices) with an emphasis on underserved communities. Faculty were provided professional development opportunities to improve teaching skills.
- Nearly 15,000 health professionals received continuing education training via 230 work-shops, seminars, conferences and distance learning programs/series. Retraining initiatives provided health professions training for adult career-changers, displaced and re-entry workers.

In addition to these numbers, our short-term, intermediate and long-term successes are described our 2016-17 Annual Report, included within your packet. By tracking students into college and beyond to a health career, we have evidence that demonstrates AHEC programs make a difference.

The best way to understand the true impact of AHEC is to talk to our students and hear firsthand how AHEC changed their lives by providing support, mentorship and hands-on experiences that led to or is leading to a health career and a focus on underserved populations. I would be happy to set up an opportunity for you to talk with AHEC participants back in your districts.

Thank you for this opportunity to speak about the New York State Area Health Education Center System (AHEC) and thank you for your continued support.



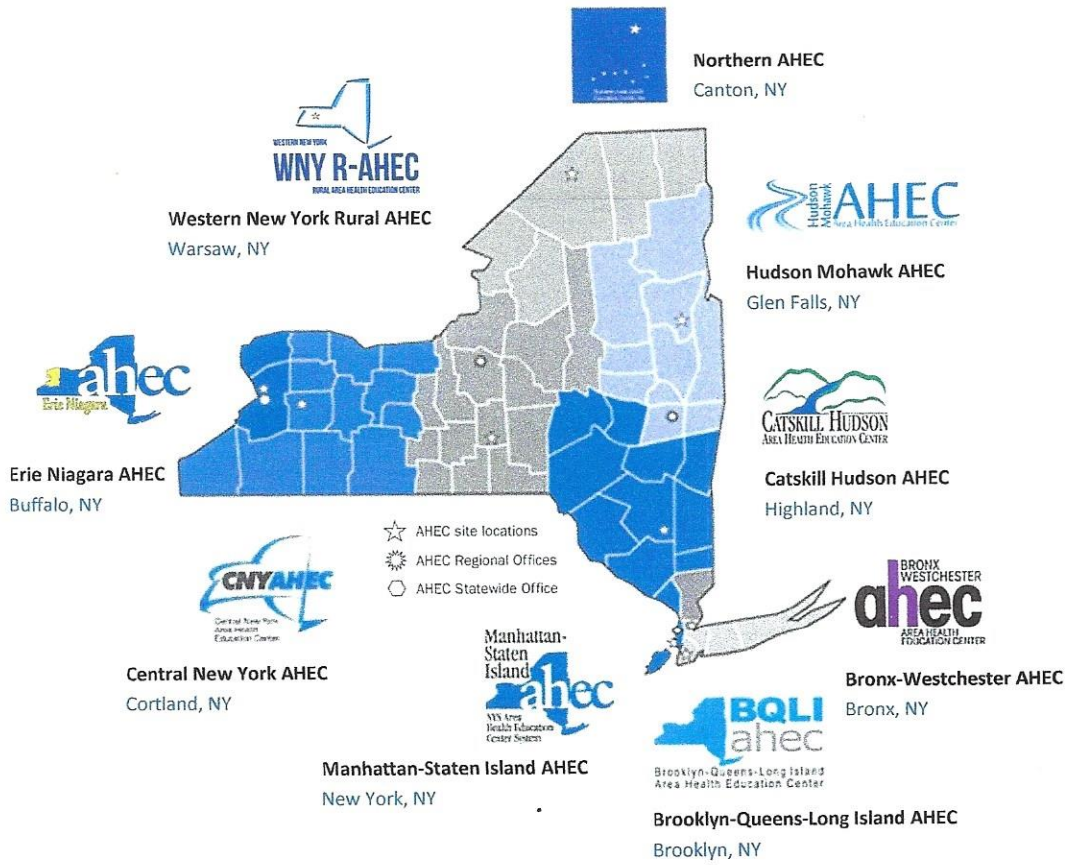
# Project Objectives/Summary of Accomplishments July 1, 2016 through June 30, 2017

## NEW YORK STATE AHEC SYSTEM

**“Connecting Students to Careers, Professionals to Communities, and Communities to Better Health”**

### 2016-17 Year in Review

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*The New York State AHEC System, comprised of nine AHECs, three regional offices and the Statewide Office, implements community-based strategies that cultivate a more diverse health workforce, address health workforce shortages — particularly primary care, and improve access to quality health care for all New Yorkers.*

# Project Objectives/Summary of Accomplishments

## July 1, 2016 through June 30, 2017

### Mission:

The New York State AHEC System focuses on strategies to enhance access to quality health care and improve health care outcomes by addressing the health workforce needs of medically disadvantaged communities and populations through partnerships between institutions that train health professionals and communities that need them most.

## Recruitment, Training and Retention Strategies

- ◆ Develop clinical training opportunities for future health professionals in medically underserved areas; recruit faculty committed to working with them.
- ◆ Encourage young people, especially from underrepresented and disadvantaged backgrounds, to pursue health careers.
- ◆ Provide continuing education and professional support to practitioners, develop career ladders and promote workforce re-entry programs.

## Objectives

- 1) Expand/support health professions training programs and community-based training experiences for medical students, health professions students and post secondary students.
- 2) Increase quantity, quality and diversity of health professions faculty committed to working with medical, health professions and post-secondary students in medically underserved areas.
- 3) Enhance local health care workforce through continuing education programs for medical and health care professionals, development and support for career ladders and promotion of programs that support re-entry workers.
- 4) Increase elementary, secondary, community college and college students' knowledge and awareness of health careers through pipeline programs that promote medicine and health professions as viable options, particularly for students from disadvantaged and underrepresented minority backgrounds, in order to promote a culturally diverse workforce.
- 5) Assess and respond to the health workforce needs of New York State at the regional, county, and where possible, at the sub-county level.
- 6) Enhance statewide support for centers and regions and dynamic statewide needs-based Area Health Education Center System.



## Purpose/Need

According to 2017 HRSA data, there are approximately 3.95 million New Yorkers identified as residing in areas designated as "underserved" throughout New York's nearly 488 Health Professional Shortage Areas (HPSAs).<sup>[1]</sup> It would require over 1,250 additional healthcare practitioners in these areas to remove the shortage status. Moreover, the NYS Department of Labor projects that the healthcare sector will account for one of the largest areas of growth, roughly 20.8% of all employees, within the next decade.<sup>[2]</sup> As such, the NYS AHEC System's recruitment, training and retention strategies are solutions to current and future workforce needs.

[1] Designated Health Professional Shortage Areas Statistics. (2017). [Chart]. Bureau of Health Workforce, Health Resources and Services Administration, U.S. Department of Health and Human Services. Retrieved from <http://datawarehouse.hrsa.gov/topics/shortageAreas.aspx>

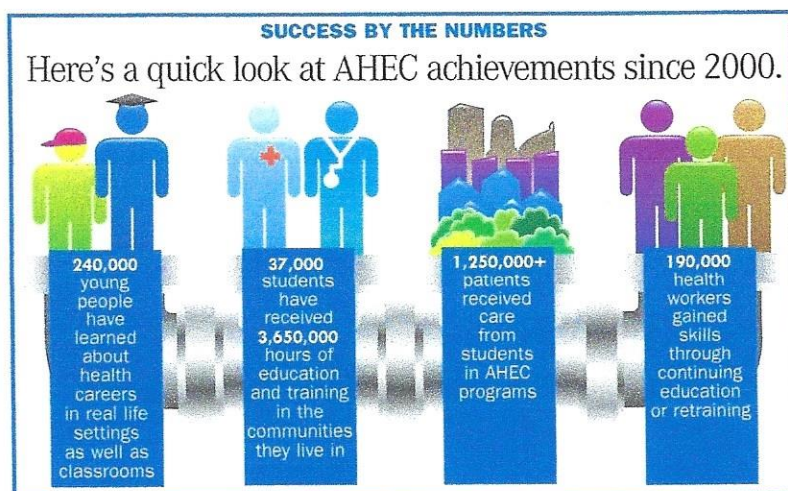
[2] New York State Department of Labor: Long Term Industry Employment Projections, 2012-2022. [Chart]. Retrieved from <https://www.labor.ny.gov/stats/lproj.shtm>.

# Project Objectives/Summary of Accomplishments

## July 1, 2016 through June 30, 2017

### Overview: Outreach 2016-2017

- ◆ Roughly 1,600 elementary and middle school students, nearly 5,500 high school students and approximately 1,300 college students participated in health careers programs.
- ◆ Over 2,800 rotations were completed by medical, nursing and health professions students with over 400 preceptors/faculty at AHEC-sponsored community-based sites (e.g., community health centers, hospitals, clinics and private practices) with an emphasis on underserved communities. Faculty were provided professional development opportunities to improve teaching skills.
- ◆ Nearly 15,000 health professionals received continuing education training via 230 workshops, seminars, conferences and distance learning programs/series. Retraining initiatives provided health professions training for adult career-changers, displaced and re-entry workers.



Note: These are round numbers. Please call the Statewide Office for detailed statistics.

### Alignment with NYS Department of Health Priorities

- ◆ Since August of 2012, the New York State AHEC System has been monitoring, responding to and making recommendations to the New York State Department of Health about the \$6.2 billion Medicaid Waiver now referred to as the Delivery System Reform Incentive Payment (DSRIP) Program. Interventions include increasing access to primary care services and the necessary workforce training and re-training for these initiatives. Total funds expected for DSRIP related work and consultant services, including but not limited to programmatic activities, data tracking, and survey development, across multiple centers exceeds \$832,000 for the next two fiscal years.
- ◆ The New York State AHEC System continued its representation on the statewide Delivery System Reform Incentive Payment (DSRIP) Program/ State Health Innovation Plan (SHIP) Workforce Workgroup regarding DSRIP workforce transformation, MRT Workforce Workgroup recommendations, Rural Residency Program, telehealth and care coordination.
- ◆ R-AHEC was awarded a Health Workforce Retraining Initiative (HWRI) grant totaling \$607,616. The project period runs from January 1, 2017 through December 31, 2018.

### Making all of New York state a Campus:

*The New York State AHEC System has established affiliation agreements, participating school agreements and/or collaborative partnerships (to support training, pipeline and/or continuing education programs) with:*

- 115 academic institutions;*
- 223 elementary/secondary schools;*
- 342 hospitals/health care systems/clinics/networks; and*
- 237 community and professional organizations/government agencies/businesses.*

# Project Objectives/Summary of Accomplishments

## July 1, 2016 through June 30, 2017

*"Through AHEC, I had my first opportunity to work in a physical therapy office (which I returned to on my own the next summer). I applied and was accepted to a variety of graduate Doctor of Physical Therapy programs and am now enrolled in Stony Brook University."*

BW AHEC participant

*"Going to MedQuest opened my eyes to all the careers in health care and helped me to decide that it is what I want to go into."*

CNYAHEC participant

*"With AHEC I was able to experience working with professionals [in bioinformatics], an opportunity that inspired my future."*

ENAHEC participant

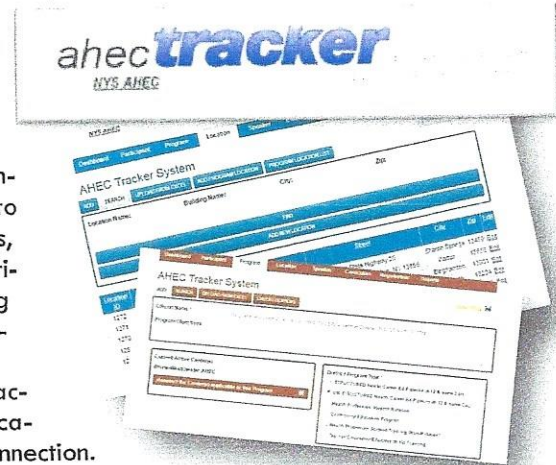
*"The internship with AHEC greatly helped to solidify my desire to pursue a career in medicine. I will be starting medical school in the fall at the New York Institute of Technology-College of Osteopathic Medicine."*

MSI AHEC participant

## Evaluation

### Data collected by the NYS AHEC System

The NYS AHEC System utilizes a cloud-based data management system called AHEC Tracker. Tracker provides the entire System with a data management and participant tracking system. Each Center and Regional Office utilizes Tracker to report on all Pipeline programs, Rotations, Health Professions Student Training, Practicums/Field Placements, and/or Continuing Education programs that the AHECs facilitate throughout NYS. This database provides the NYS AHEC System with secure access for authorized users from multiple locations and is accessible with an internet connection.



Individual-level data is collected from all AHEC participants enrolled in pipeline programs, rotations/field placements, health profession student training and continuing education programs that are 4 or more hours. This includes demographics, socioeconomic data, previous exposure to math/science enrichment programs, residence, career plans and perception of the program. Health professions rotation participants provide AHEC's with intended practice location upon completion (NYS, underserved, rural/urban/suburban, etc.). Each participant is provided a unique identification/tracking number in the cloud-based database. This information is accessible in real time across the state for modifications, updates, reports, etc. Through the database and standardized evaluation instruments, the New York State AHEC System provides the required information on workforce recruitment, training activities, retention, intended practice location, and trainee characteristics, such as disadvantaged background, race and ethnic diversity.

### Intermediate and Long Term Outcomes

The New York State AHEC System Statewide Office continues to implement longitudinal tracking via the National Student Clearinghouse (NSC) to ascertain college enrollment rates for past AHEC middle/high school students, now age 18 and older. The NSC is partnered with more than 3,500 colleges (2 and 4 year colleges as well as universities), representing 98% of US college students, and provides details on college enrollment, degrees received, and often includes college major or concentration.

Of 10,000 past New York State AHEC System Pipeline participants enrolled in pipeline programs anytime between 2002—2016, who were between the ages of 18 – 32 years at the time of the NSC data pull in November 2016, for whom the New York State AHEC System had adequate identifiable information, the NSC indicated that 74.6% (n=7,460) of them attended at least some college. This rate of college enrollment exceeds that in NYS (51%) and the US population (41%) (US Department of Education, 2016). Furthermore, 34.5% (n=3,455) of AHEC participants graduated with a degree or certification, with 2,075 of those participants earning two or more degrees/certifications. Of the degrees earned: 21% were Associate's, 46% Bachelor, 7.8% Master's and 3.5% Doctoral. Most notable, of all the degrees/certifications earned 43% were within the Health Professions or a STEM-related field of study. The two most common Majors associated with a degree/certification were: "Biological Sciences" and "Nursing."

# Project Objectives/Summary of Accomplishments

## July 1, 2016 through June 30, 2017

### Health Professions Students

- ◆ **Rotation sites included community health centers, ambulatory care sites, hospitals and veterans affairs health care offices** including NY Metropolitan Region Office/Institute for Family Health (IFH) medical student rotations at ECHO Free Clinic (Einstein) and NYC Free Clinic (NYU), social work placements at IFH Psychosocial Program and Eastern Region Office/Albany Medical College (AMC) with Hudson Valley Community College team-based training for medical students and nurses at AMC's simulation center.
- ◆ During the summer of 2016, NY Metropolitan Region AHECs provided 10 NY Institute of Technology College of Osteopathic Medicine (NYITCOM) students with a **six week Community Health Experience (CHE)**. Students served in diverse community health settings and gained exposure to intercultural concerns and dynamics. CHE, in existence since 2005, has past NYITCOM evaluations showing CHE students were more likely to specialize in primary care in medically underserved communities.
- ◆ Western NY Rural AHEC (R-AHEC) manages a Hospitality House, conveniently located next to Wyoming County Community Hospital, to support current health professions students and professionals in the area. A total of 32 medical/health professions students received **housing support**.
- ◆ Northern AHEC and Catskill-Hudson AHEC (CNYAHEC) continued their **Rural Immersion Programs**. Medical students spend five days shadowing providers at hospitals and community agencies while exploring rural community life and identifying public health issues, including health care access. Local partners include Wells College, SUNY Upstate, River Hospital, Canton-Potsdam Hospital, and Oswego Hospital to provide training sites in various communities.
- ◆ Each NYS AHEC System center and regional office have staff who are **National Health Service Corps NHSC Ambassadors**. Each ambassador assists with increasing placements at sites with NHSC providers and informs students of scholarship/loan repayment options.
- ◆ NAHEC and CNYAHEC continue to use EXXAT to **facilitate clinical rotation placements** and integrate with MyHealthCareer®, social media, HWApps and InService Solutions.
- ◆ **Family medicine/public health elective** at Central Region Office (CRO)/Upstate Medical University enrolled roughly 10 students in 2016-2017. The MPH/MD course combines standardized patient case with clinical training and didactics, focused on social determinants and bio psychosocial care of disadvantaged, multi-morbid patients.
- ◆ **Health professions and health-related students trained by AHEC staff:** NYS AHEC System Director of Evaluation taught Understanding Statistical Research to graduate University at Buffalo Rehabilitation Counseling students; NAHEC/CNYAHEC CEO taught Medical Anthropology, Foundations of Interprofessional Education, Healthcare Professionalism, and Evolutionary Medicine classes at SUNY Potsdam and Clarkson University; and Erie Niagara AHEC staff provided cultural competency training to University at Buffalo nursing students.
- ◆ **Health professions student scholarships:** CNYAHEC's L. Thomas Wolff (\$1,000), NAHEC's Bruce Potter Memorial (\$1,000) and HMAHEC's Health Career Scholarships: ten at \$1,000 and ten at \$500.

### Ongoing Summer Programs

- ◆ Hosted by MSI AHEC and BW AHEC, the **Health Career Internship Program (HCIP)** has 11 enrollees, and will run throughout July 2017.
- ◆ A collaboration effort of the three NY Metro AHECs, the **Community Health Experience (CHE)** program has eight enrollees, and will run throughout July 2017. Similarly, the **Summer Health Internship Program** has approximately 60 enrollees, and will run July-August.
- ◆ Presented by MSI AHEC, the **Health Career Summer Club** will host 15 high school and college students, running the month of July.

### Objective #1:

**Expand and support health professions training programs and community-based training experiences in underserved areas for medical students, health professions students and post-secondary students, particularly those from New York State high schools and post-secondary schools.**

*A total of 2,823 rotations were completed by medical, nursing and other health professions students, totaling 213,893 hours of community-based training with over 400 preceptors. A total of 51 residents completed 97,920 hours of community-based training, and a total of 642 health professions students received 38,904 hours in non-rotation and/or didactic training programs.*



# Project Objectives/Summary of Accomplishments

## July 1, 2016 through June 30, 2017

### Health Professions Student Program Spotlight— Rural Health Immersion

During the month of June, CNYAHEC and NAHEC partnered with SUNY Upstate Medical University to host four separate rural immersion programs for a total of 20 first year medical students. Participants immersed themselves in the small town life of Canton, Ogdensburg, Lowville, and Oswego, NY, taking part in local activities such as mentoring high school students and volunteering at the Farmer's Market. Students also actively participated in the local healthcare system by shadowing providers at the hospital and patient clinic, and discussing healthcare topics with local practitioners throughout the week. Program evaluations indicate students thoroughly enjoyed the opportunity to experience the benefits and challenges of rural life, with 100% of participants rating their experience as either excellent or very good. Moreover, 80% of students significantly improved their knowledge about medical professions as they relate to the community, as well as the varying roles and responsibilities of rural physicians compared to urban practitioners. When asked to provide comments on the program, students responded:

- ◆ "A rural community offers future practitioners the ability to practice medicine in a manner more aligned with their vision of how patient care should be."
- ◆ "Providers are able to build more meaningful and lasting relationships with generations of patients...establishing mutual trust."
- ◆ "It's much easier to feel engaged when you know that it matters. I got to be reminded of why it matters this week."

### Faculty Development

- ◆ The Statewide Office/UB School of Medicine and Biomedical Sciences and NY Metropolitan Region/Institute for Family Health (IFH) were leaders in **faculty development/grand rounds sessions on primary care, behavioral health, interdisciplinary training, health disparities, clinical practice information, health promotion and disease prevention and health reform/issues**. IFH coordinates Grand Rounds at Beth Israel (27 participants) and Family Health Center of Harlem (29 participants) and provides over 75 trainings for social work interns (150+ participants) and their preceptors.
- ◆ CRO/Upstate preceptors are offered **subscriptions to "The Teaching**

**Physician," clinical faculty appointments, library privileges** and free registration for the annual Family Medicine Teaching Days. Eastern Region/Albany Medical College preceptors receive access to AMC library and are annually awarded 20 AAFP CME hours.

- ◆ The Family Medicine faculty development program at CRO/Upstate continued to **focus on scholarly projects, grants and curricular innovations/ evaluations** to improve educational activities and increase chances for promotion and tenure. This group includes CRO Director, Vice Chair for Research and CRO Medical Director/ Department Chair and six faculty at rank of assistant professor or instructor.

### Admission Policy Change

In 2008, the Central Region Office (CRO)/Upstate Medical University changed admissions policies to be more advantageous to New York State residents, particularly those from rural/urban underserved areas to recruiting those more likely to return to similar communities. Since then, the CRO Medical Director and other Upstate Family Medicine faculty continued supplemental interviews of applicants with rural career interests and identified those from rural areas. They also actively participate in the Multiple Mini-Interview process administered to all Upstate MD program applicants. In 2016, the Rural Medical Education program coordinator, partially supported by AHEC, also served on the Admissions Committee. This change in admission policy and continued AHEC involvement has resulted in the majority of matriculated MD students being recruited from New York State, with a large sub percentage of those students from rural areas.

### Objective #2:

**Increase quantity, quality and diversity of health professions faculty committed to working with medical, health professions and post-secondary students in medically underserved areas.**

*To meet faculty education needs and improve clinical trainee instruction, regional offices and the NYS AHEC System Statewide Office/University at Buffalo provided over 75 faculty development programs and other support activities. (These numbers are also reflected in Objective #3.)*

# Project Objectives/Summary of Accomplishments

## July 1, 2016 through June 30, 2017

### Continuing Education Programs

- ◆ First responders received CE via AHEC programming. Catskill Hudson (CHAHEC) AHEC hosted two Columbia-Greene **EMS Education Days** serving nearly 90 emergency services and emergency room professionals.
- ◆ Central New York AHEC (CNYAHEC) continued to add **InService Solutions** (ISS) clients. Over 5,100 individuals completed roughly 27,200 hours of training over 17 modules, averaging 5.25 hours of training per person. Other AHECs collaborated with CNYAHEC to market ISS and HWApps to institutions and health care facilities to allow staff/students to stay current on required regulations and certifications.
- ◆ CHAHEC co-sponsored: Twin Lakes Medical Associates' **Cardiovascular Teaching Day** (77 participants) and **Annual Nursing Summit** (76 attendees). Participants received 5.25 Nursing CE credits.
- ◆ Several NYS AHEC System Centers provided **Cultural Competency and Awareness Training** to current and aspiring healthcare professionals. Western NY Rural AHEC trained 46 clinical and non-clinical staff. Northern AHEC trained over 340 faculty and health professions students. Catskill-Hudson AHEC hosted two conferences with a total of 225 health professionals in attendance.
- ◆ Health Workforce Retraining Initiative (HWRI) activities **support career ladders and workforce re-entry**. NY Metropolitan Region Office/Institute for Family Health (IFH) trained over 3,000 clinical and nonclinical staff to implement team-based coordinated care. Western NY Rural AHEC (R-AHEC) offered Basic Computer Skills, LPN Training, Nurse Leadership and Data Analytics to over 315 staff.
- ◆ CHAHEC collaborated with Touro College of Medicine and local provider offices to present "**Cultural Competencies and Best Practices when Working with the LGBTQ Population.**" The 8 hour conference was attended by over 110 participants, and received tremendously positive reviews.
- ◆ The Central Region Office (CRO)/Upstate Medical University is implementing a NYS DOH-sponsored program to **increase colorectal, breast and cervical cancer screening** in community practices through CME-carrying Academic Detailing and Practice Facilitation activities. Contracted by Health Research, Inc. CRO will partner with University of Rochester, University at Buffalo and several AHECs.

### Objective #3:

**Enhance the local health care workforce through continuing education programs for medical and health care professionals, development and support for career ladders and promotion of programs that support re-entry workers.**

*A total of 14,899 professionals representing medicine, nursing, allied health, pharmacy, social work, management, education and other disciplines, attended 229 programs. Programs were offered via employer and academic institution collaborations using workplace-based workshops and seminars, video conferences and distance learning.*

### Selected Continuing Education/Faculty Development Programs

Topic	No. of Programs	No. of Participants
Alcohol and Substance Abuse	19	582
Behavioral Health	76	1,178
Cultural Competency/Health Disparities	14	4,318
Health Information Technology	214	768
Interprofessional education/ Integrated models of care	49	745
Leadership and Management Training	7	138
Prevention/Primary Care	47	1,136
Public Health	7	139
Quality Improvement and Patient Safety	12	283
Workforce/Professional Development	26	308

# Project Objectives/Summary of Accomplishments

## July 1, 2016 through June 30, 2017

### Continuing Education Spotlight – Health Professions Seminars

#### Nursing Summit

On December 2, CHAHEC held their annual Nursing Summit at Marist College in Poughkeepsie, NY. The program awarded 5.25 nursing continuing education credits, and hosted over 85 participants. Presentations focused on the advancing role of nurses in population health. Presentation topics included: cultural competency, diversity in the health workforce among patient populations, mental health services, and care navigation for people facing opioid-use challenges. Speakers included: Patrick Coonan, EdD, MEd, MPA, Dean of the College of Nursing and Public Health at Adelphi University; Carol Wanyo, RN, MA, Director of Public Health Nursing at the Dutchess County Department of Behavioral and Community Health; Kenya Beard, EdD, GNP-BC, NP-C, ACNP-BC, CNE, Association Vice President for Curriculum and Instruction at Jersey College; Anita Daniels, RN-BC, MS, Executive Director for the Bronx Psychiatric Center; Ann Marie Guntlow, RN, BSN, CEN, Chief Nursing Officer at Ellenville Regional Hospital; and Maria Gonzalez, RN, CEN, Manager of Emergency Services at Ellenville Regional Hospital. Overall, past participants have rated the program positively with many participants expressing the alignment of information taught with applicable clinical practice skills. Participants further identified the overall teaching strategies as either excellent or good. When asked to provide comments on the program, prior participants said:

- ◆ *“Excellent program. Highlighted the realities of today’s healthcare environment in New York State as well as national.”*
- ◆ *“This is my second year attending AHEC’s Nursing Summit. I am impressed with the balance of public health technology, clinical practice topics, and presenters.”*

#### Cultural Competency and Health Literacy

As part of a multi-year contract with Millennium PPS, Erie Niagara AHEC (ENAHEC) is responsible for facilitating cultural competency and health literacy trainings to over 150 partner organizations and approximately 100 community-based organizations throughout eight counties (Erie, Niagara, Chautauqua, Cattaraugus, Allegany, Genesee, Wyoming and Orleans) of Western New York. Training formats include in-class presentations, webinars, and online courses. Within the last year, over 3,500 health professions employees in primary care, behavioral health, skilled nursing, and home healthcare have received training. When asked to provide comments on the program, participants stated:

- ◆ *“[This training] will increase my understanding and ability to communicate with my patients. It has made me more aware of my biases and values.”*
- ◆ *“This is a good reminder of the need to understand our humanity. I better understand the elements of cultural competency, including the need for integration in all levels of an organization.”*

#### Opioid and Heroin: A Public Health Crisis

As part of the New York State Association for Rural Health (NYSARH) Annual Conference, CHAHEC co-sponsored a presentation on “Opioid and Heroin: A Public Health Crisis”. The conference was held at the Harbor Hotel in Clayton, NY, with over 125 healthcare professionals and students in attendance. The purpose of this presentation was to: educate current health professionals about the rampant opioid epidemic both locally and statewide; identify best practices; network with peers to determine alternative treatment plans; and review available resources healthcare providers. Attendees collaborated with their peers, found resources for assisting patients, learned about institutions with opioid response programs, and discussed future training opportunities they might want to participate in or organize. The NYSARH Annual Conference continues to be a prominent professional development event for healthcare professionals throughout academia, public health, government, aging services, behavioral health services, the private and non-profit sector, and the health care industry with past participants and current members identifying the need for ongoing discussions related to the integration of primary care and behavioral health, as well as the need for continuing education concerning the prevention of substance abuse.

#### Objective #3:

**Enhance the local health care workforce through continuing education programs for medical and health care professionals, development and support for career ladders and promotion of programs that support re-entry workers.**

# Project Objectives/Summary of Accomplishments

## July 1, 2016 through June 30, 2017

### Objective #4:

Increase elementary, secondary, community college and college students' knowledge and awareness of health careers through pipeline programs that promote medicine and health professions as viable options, particularly for students from disadvantaged and underrepresented minority backgrounds, in order to promote a culturally diverse workforce.

*A total of 13,543 students (4,818 grades K-8 students, 8,186 grades 9-12 students and 539 college students participated in health careers programs.*

### Health Careers Multi-Session Programs:

- ◆ Central NY AHEC (CNYAHEC), Northern (NAHEC), Catskill Hudson (CHAHEC), Brooklyn-Queens-Long Island AHEC (BQLI AHEC), and WNY Rural AHEC (R-AHEC) hosted **MASH, MedQuest, HealthQuest and/or Summer Camps** serving over 440 middle/high school students with exposure to health careers and brief job shadows.
- ◆ AHECs provided **internships, mentoring and job shadows**. BQLI AHEC, Bronx-Westchester AHEC (BW AHEC), Central NY AHEC (CNYAHEC), NAHEC and Manhattan-Staten Island AHEC (MSI AHEC) conducted Summer Scholar/ Health Internship, mentoring and/or multi-session job shadow programs for 160 high school/college students.
- ◆ R-AHEC's **PULSE Academy** provided 5 school districts and over 400 high school students with healthcare career awareness and exploration activities.
- ◆ MSI AHEC's **Collegiate Health Service Corps (CHSC)** engaged 30 CUNY City College juniors in service learning projects within medically underserved areas. The program also provided training in CPR/first aid, health disparities and cultural competency.
- ◆ **College and Health facility tours**. BQLI AHEC, Erie-Niagara (ENAHEC), MSI AHEC, NAHEC, and WNY R-AHEC provided over 200 middle/high school students with facility tours of local colleges, hospitals, nursing homes, and provider offices. By exposing students to local facilities, NYS AHEC encourages area development and retention.
- ◆ CHAHEC conducted **Scrubs Club (SC)** with 100+ high school students at 3 schools and SUNY New Paltz. Developed by CHAHEC, SC lessons can be incorporated into a curriculum or utilized as a 3-year, longitudinal, afterschool program. Scrubs Clubs was the **recipient of the Outstanding Rural Health Program of the Year award** at the 2016 Annual Conference for the New York State Association of Rural Health held in Clayton, NY.

### Health Careers Awareness Programs

- ◆ Nearly **5.400** K-8, 9-12 and college students attended **single session awareness programs** via career fairs, presentations and trips/tours.
- ◆ 1,240 students completed guided **web exploration of myhealthcareer.org** (MHC) which links middle/high/college students online to CNYAHEC and NAHEC. MHC offers career information/exploration; skill assessment; budgeting tools; scholarships/tuition assistance and portfolio development. MHC links to HWapps, an online health workforce platform connecting students, career seekers and professionals with employers, educators, tools, programs and opportunities that support users as they plan for their future in health care.
- ◆ CNYAHEC and NAHEC continued their joint **collaboration with NY's Health Occupations Students of America (HOSA)** to recruit HOSA chapters and expand into their current regions. HMAHEC, CNYAHEC and NAHEC also participated in the HOSA Fall and Spring Leadership Conferences, which served over 150 students.



# Project Objectives/Summary of Accomplishments

## July 1, 2016 through June 30, 2017

### Pipeline Program Spotlight– Scholarship Activity

The New York State AHEC System is proud to offer scholarships to high school and/or college students who demonstrate an interest in pursuing a career in the health field.



- ♦ **L. Thomas Wolff, M.D. Scholarship** (CNYAHEC): This year, Katherine D. , a Cortland resident and prior MASH Camp participant, was awarded a scholarship in the amount of \$1,000. Katherine is currently studying Occupational Therapy at D'Youville College, and plans to pursue employment in Cortland after her graduation.
- ♦ **Bruce C. Potter Memorial Scholarship** (NAHEC): This year, Anola S., a Clayton resident and prior Rural Health Immersion participant, was awarded a scholarship in the amount of \$1,000. Anola is currently in her third year of medical school at SUNY Upstate, and credits her past experiences with medical professionals for her interest in the health field.
- ♦ **Health Career Scholarship** (HMAHEC): A total of 10 high school students, representing each of the ten counties in HMAHEC's catchment area, were awarded a scholarship in the amount of \$500. All recipients demonstrated proof of college acceptance, with plans to pursue careers in Nursing, Dentistry, Physical Therapy, Physician Assistant, Oncology, Radiology, and Orthopedics.

### Pipeline Program Spotlight-PULSE Academy

Funded by the Community Foundation for Greater Buffalo William F. Thiel Grant, **Providing Unique Learning and Shadowing Experiences (PULSE) Academy** is a health career exploration program developed by Western New York Rural Area Health Education Center (R-AHEC). Designed to introduce high school students to health careers through engaging, hands-on activities, meaningful field trips and real-life experiences with local health professionals, PULSE Academy begins with a series of classroom presentations highlighting healthcare careers and pathways. Students who express an interest in the health field participate in the



PULSE Academy

second component of the program which involves exploration tours at a number of local colleges. Depending on the college, students have the opportunity to visit clinical simulation centers and laboratories, lecture halls, and meet with admissions team to learn more about entry requirements. During the last phase of the program, students have the ability to job shadow local healthcare professionals to learn more about the daily job requirements and the availability of local careers. To date, PULSE Academy has been implemented in 5 area school districts throughout Wyoming County. Over 400 high school students have participated in

PULSE Academy. Overall, past participants have rated the program positively with many participants indicating an increased interest in health careers. When asked to provide comments on the program, prior participants said:

- ♦ "It helped you get a better understanding of the health careers and open your mind to how many health professions are out there."
- ♦ "I enjoyed the one-on-one interaction we were able to have with the healthcare workers. It was cool to separate from the group to make the experience more realistic."
- ♦ "I liked that we rotated where we shadowed so that we could see more. The instructors were very interactive, and took time to explain and show things to me."

### Objective #4:

Increase elementary, secondary, community college and college students' knowledge and awareness of health careers through pipeline programs that promote medicine and health professions as viable options, particularly for students from disadvantaged and underrepresented minority backgrounds, in order to promote a culturally diverse workforce.

*"Connecting students to careers, professionals to communities, and communities to better health."*

# Project Objectives/Summary of Accomplishments

## July 1, 2016 through June 30, 2017

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### AHEC State and National Leadership

Governor appointments to **NYS Rural Health Council** [Catskill Hudson AHEC (CHAHEC) and Western NY Rural AHEC (R-AHEC)]; **Mid-Hudson Rural Integrated Delivery System Provider Network Board** and **Eastern Dutchess Rural Health Network Advisory Board** (CHAHEC); **Board of Trustees to Erie Community College** [Erie-Niagara AHEC (ENAHEC)]; **Community Care of Brooklyn Community Engagement Committee** and Chair, **NYC DOE Healthcare Industry Commission** [Brooklyn-Queens-Long Island AHEC (BQLI AHEC)]; **Oswego County RHN** and **SUNY Binghamton's Experiential Education Advisory Council** [Central New York AHEC(CNYAHEC)]; **State Workforce Advisory Group** [(Statewide Office, Hudson-Mohawk AHEC (HMAHEC), and Northern AHEC (NAHEC)]; **National AHEC Organization (NAO) Center Director Constituency Group Representative** and Chair, **NAO Diversity Committee** [Manhattan-Staten Island AHEC (MSI AHEC)]; Vice Chair, **Resource Center for Accessible Living of Ulster County Board of Directors** (CHAHEC) and **NYS Health Innovation Plan** (NYS AHEC System Director); **DSRIP/SHIP Workforce Workgroups, Planning and Advisory Committees.**

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### Presentations/Posters

- ◆ Carrie Roseamelia, PhD, Central Region Director. National Rural Health Association, **"Adaptability & Collaboration: Our Student & Community Centered Approach to Program Sustainability"** presented at Minneapolis, MN: May 2016.
  - ◆ Bridget Forshee, MS, Sr. Statewide Program Coordinator, and Ashleigh McGowan, MS, CNYAHEC Executive Director. Primary Care Workforce Initiatives Forum, **"Introduction to NYS AHEC"** presented at Tarrytown, NY: December 2016.
  - ◆ Shannon Carlin-Menter, PhD, NYS AHEC System Director of Evaluation. NIH (National Institutes of Health) SciEd 2017, **"Western New York Genetics in Research Partnership"** presented at Washington, D.C.: May 2017.
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### Academic & Research Highlights

- Ancker, J. S., Mauer, E., Hauser, D., & **Calman, N.** (2016). Expanding access to high-quality plain-language patient education information through context-specific hyperlinks. *AMIA Annual Symposium Proceedings*, 277–284.
- Ancker, J., Nosal, S., Hauser, D., Way, C., & **Calman, N.** (2017). Access policy and the digital divide in patient access to medical records. *Health Policy and Technology*, 6(1): 3-11.
- Bibbins-Domingo K., Whitlock E., Wolff T., Ngo-Metzger Q.,...**Epling, J.W.**, et al. (2017). Developing recommendations for evidence-based clinical preventive services for diverse populations: Methods of the U.S. preventive services task force. *Annals of Internal Medicine*, 166:565-571.
- Elkins C., Plante K.P., Germain L.J., **Morley C.P.** (2017). Burnout and depression in MS1 & MS3 years: A comparison of cohorts at one medical school. *Family Medicine*, 49(6):456-459.
- McIntosh E.W., and **Morley, C.P.** (2016). Family medicine or primary care residency selection: Effects of family medicine interest groups, MD/MPH dual degrees, and rural medical education. *Family Medicine*, 48(5):385-388.
- Morley, C.P.**, Rosas, S.R., Mishori, R., Jordan, W., & Jarris, Y.S., et al. (2017). Essential public health competencies for medical students: Establishing a consensus in family medicine. *Teaching and Learning in Medicine*, 29: 1-13
- Wolff M., **Pohl H.**, and Jacoby, L. (2016). Self-reported competencies related to end of life care among residents and attending physicians. *AMEE MedEdPublish*, 5(2): 47.

### Objective #5:

Assess and respond to the health workforce needs of New York State at the regional, county and where possible, at the sub-county level.

# Project Objectives/Summary of Accomplishments

## July 1, 2016 through June 30, 2017

### Objective #6:

Enhance statewide support for centers and regions and dynamic needs-based Area Health Education Center System.

*The \$2,077,000 in 2016-17 state funding to the New York State AHEC System leveraged a workforce development initiative projected at approximately \$6 million (through federal, local, community and private foundation funding) invested in training programs, services and jobs in medically underserved rural and urban communities.*

### Leveraging NYS Investment

- ◆ “Western NY Genetics in Research Partnership” Year 4 activities were completed by students under the \$1.1 million National Science Foundation grant involving the Statewide Office (Department of Family Medicine, University at Buffalo (UB) School of Medicine and Biomedical Sciences), Erie Niagara AHEC (ENAHEC) and Western NY Rural AHEC (R-AHEC). The program was designed to promote STEM careers to local high school students for jobs at the growing University at Buffalo NYS Center of Excellence in Bioinformatics and Life Sciences (CBLS) and improve genomic competencies of local science teachers. The AHECs successfully reached a total of 829 students and helped the teachers to recruit over 230 students to participate in the research study: 120 of the students were randomized into a treatment group and 117 students were randomized into the control group. In May, a Capstone Symposium was held (in Buffalo and Batavia), providing participating students and teachers the opportunity to present their projects and network with researchers and employers. A brief video was produced for the project which showcased both teachers and students in the program (<https://vimeo.com/164441141>).
- ◆ R-AHEC continued operation of the **Western New York Rural Broadband Healthcare Network (WNY RBHN)**. As the network administrator and consortium lead, R-AHEC assists eligible non-profit healthcare organizations throughout Western and Central New York to access funds for subsidized broadband services and equipment through the Federal Communication Commission’s Healthcare Connect Fund. The network consists of a consortium of post-secondary academic facilities providing medical education, rural and urban hospitals, community health centers, Federally Qualified Healthcare Centers and skilled nursing facilities. Through the network, members are able to expand use of telemedicine, clinical mentoring, collaboration, and training over a secure, high speed IP Network with scalable bandwidth to support telemedicine and distance-learning applications. There are over 125 healthcare and healthcare administrative facilities on the network. The program expands broadband accessibility in medically underserved and rural areas.
- ◆ Brooklyn-Queens-Long Island AHEC received a subcontract award in the amount of \$25,000 from the Academy of Health Careers High School to conduct a series of career exploration activities and internship placements for their students.
- ◆ CNYAHEC renewed a \$38,825 contract with the **Bassett Healthcare Network** to assist in their recruitment efforts for Medical Technologists. Program activities are currently underway with outreach and recruitment.
- ◆ In November, MSI AHEC’s annual **Champions of Diversity Reception** raised over \$11,500 which will support general operations.



# Project Objectives/Summary of Accomplishments

## July 1, 2016 through June 30, 2017

### Objective #6:

**Enhance statewide support for centers and regions and dynamic needs-based Area Health Education Center System.**

*The NYS AHEC System Statewide Office held a series of strategic planning meetings focusing on the submission of a proposal to the new HRSA FRP. The NYS AHEC System proposal was submitted in March, with an anticipated award date of September 2017. The proposal addressed the following priorities areas:*

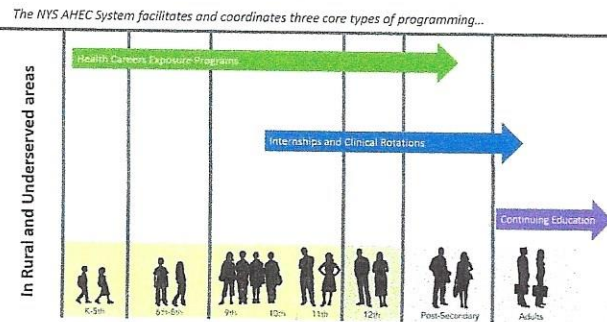
1. *Distribution of Health Professionals*
2. *Diversity of Health Professionals*
3. *Practice Transformation*

### NEW: NYS AHEC System Website

To meet the overarching NYS AHEC goals of increased awareness and retention, the statewide office has been promoting an increased and positive online presence. In June, the NYS AHEC System launched its new and completely renovated website ([www.nysahec.org](http://www.nysahec.org)), which provides users with improved menu navigation, more concise and visually appealing front pages, and responsive page designs for alternative web access via mobile devices. The new website includes pages that identify additional resources with links to external information, such as governmental sites, professional associations, and our Health Professions Education Guide (a comprehensive guide of all health-related career programs offered at colleges and other educational institutions throughout NYS). The new website also highlights current pipeline, continuing education, rotation, and internship programs throughout the NYS AHEC System. A statewide program calendar



is regularly updated, and details the activities, locations, and dates of upcoming programs across each of the nine centers and four regional offices. In addition to the above user-friendly changes, the new website facilitates back-end development, including simplified update capabilities, easier content development, and improved web analytics and tracking.



### NYS AHEC System Online Activities

The NYS AHEC System Statewide Office also utilizes social media platforms such as Facebook, Twitter, and LinkedIn. By implementing these social media platforms, NYS AHEC aims to grow our overall following, increase active engagement, and encourage brand evangelism via the construction of relationships with similar groups, current affiliations, and the healthcare and education industries. Platforms are regularly maintained, monitored, and updated, with previous posts including: Current trends/reports (employment trends, salary growth, attendance/graduation information); Links to healthcare-related news (National, state, or local articles/videos/conferences); Upcoming deadlines/events/activities (including but not limited to NYS AHEC programs, sponsored events, local enrollments; and National Health Service Corps applications); and Upcoming healthcare-related holidays/celebrations (e.g. National Nurses Week, Thank a Doctor Day, etc.

