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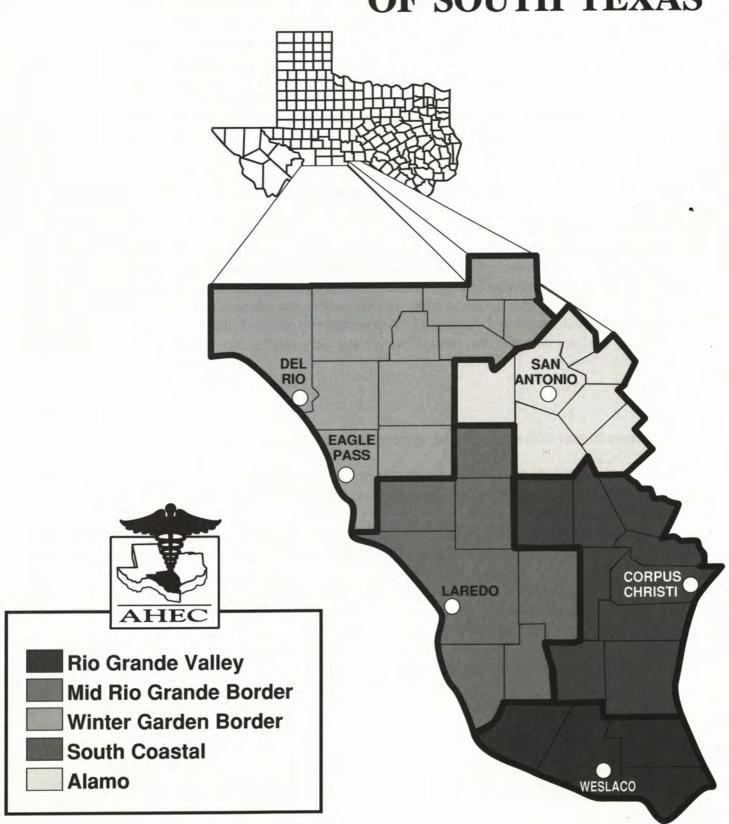
AREA HEALTH EDUCATION CENTER OF SOUTH TEXAS Fifth Year Operations Annual Report, 1994-95 The University of Texas Health Science Center at San Antonio

# MISSION

The mission of the South Texas AHEC program is to enhance the health status and, thus, the quality of life of residents in South Texas by:

- Improving the supply and distribution of health care professionals through the development of local clinical training sites and accessible health professional certification programs.
- Promoting the development and enhancement of the quality of primary health professions education through improved utilization of available academic resources.
- Increasing the locally-derived health professional pool and retention of more graduates of health professional schools within the targeted regions.
- Promoting cooperation and coordination among communities, local health care providers, educational institutions and health care organizations within the targeted area.
- Providing professional support and continuing educational resources to the practicing health care providers, and by assisting in the development of health education training/programs.

## AREA HEALTH EDUCATION CENTER OF SOUTH TEXAS

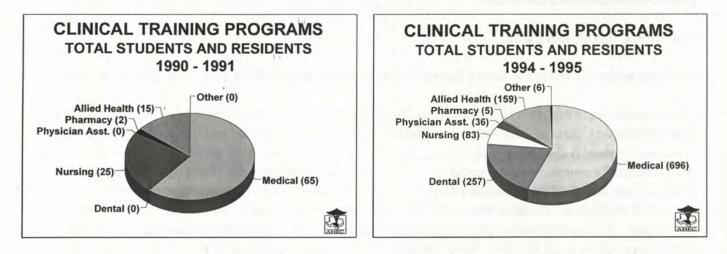


#### Executive Summary

AHEC Regions. The South Texas AHEC covers approximately 46,000 square miles in 38 counties and has a resident population of approximately 3.3 million individuals. There are now five AHEC regions, subdivided as follows: Lower Rio Grande Valley AHEC (Weslaco), Mid Rio Grande Border AHEC (Laredo), Winter Garden Border AHEC (Del Rio/Eagle Pass/Uvalde), South Coastal AHEC (Corpus Christi), and Alamo AHEC (San Antonio).

South Texas AHEC Process. During its brief five-year history, the Area Health Education Center of South Texas has established itself as an important entity in the development, recruitment, and retention of the primary care health professional workforce in South Texas. The South Texas AHEC has reached and surpassed its original goals and objectives through the creation and nurturing of collaborative health professional community/academic partnerships in its regions. In the case of each of its established Centers, education and training programs have been initiated and/or expanded according to a priority of needs developed by this partnership of community and academic leaders. Once needs were identified, programs were developed according to an established plan which has consistently included a strategy for self-sufficiency beyond the federal funding stage.

*Clinical Training Programs*. Over the past five years, the clinical training programs available to students and residents have grown from nine to sixteen, and the number of students and residents participating in these programs has grown from approximately 107 in 1990-91 to 1,242 in 1994-95.



Medical programs include family practice, pediatrics, pediatric subspecialties, geriatrics, psychiatry, and environmental medicine. Podiatry and ophthalmology are being added as medical services due to their critical need by the high numbers of diabetic patients in the Mexican-American population. AHEC has been instrumental in the development, accreditation, and implementation of a much-needed family practice residency program in the Lower Rio Grande Valley, and work is continuing to establish resident rotations in family practice, general medicine, and obstetrics/gynecology in additional locations along the Texas-Mexico border.

Currently, 25-30% of the family practice resident groups in each of the South Texas residency programs are graduates from UTHSCSA. During the last five years over 60% of the residents have remained near the area of their residency training, with over 70% remaining in South Texas. If this trend continues, it is anticipated that increasing the number of rotation opportunities in South Texas for both medical students and residents will, in return, increase the numbers of graduates remaining in the region to practice.

- Nursing programs include a Bachelor's and Master's program in the Lower Rio Grande Valley and a Family Nurse Practitioner program operated as a distance education program for students throughout South Texas. AHEC has also assisted a number of communities in establishing and/or continuing LVN programs and has provided training sites in South Texas for nursing students from other Texas universities. To date, there have been 13 BSN graduates and 19 MSN
   graduates from the nursing program in the Lower Rio Grande Valley. All of these graduates continue to live and work in the region.
- Dental programs include training experiences in clinical and preventive dental care for children, adults, and the elderly in a number of medically underserved sites in South Texas. In addition, dental public health residents provide dental health assessment and intervention strategies for targeted populations. In 1994-95, 257 dental students and residents participated in AHEC-sponsored training.
- Pharmacy programs give students an opportunity to train at pharmacies in rural and remote sites. To date, of the 23 students who completed their training at sites in the Rio Grande Valley and became licensed pharmacists, 56% accepted initial employment in the Valley, with 74% accepting employment in South Texas.
- Allied Health programs include dental hygiene, emergency medical services, clinical laboratory sciences, occupational therapy, physical therapy, and physical therapy assistant. The South Texas AHEC affiliates with a number of local colleges/universities, including Laredo Community College, The University of Texas-Pan American, Texas State Technical College, and Texas Southmost College to provide these much needed training programs. Students in these programs are now beginning to accept employment at their training site or in their home area in South Texas following graduation.
- Physician Assistant programs are offered in conjunction with Baylor College of Medicine, The University of Texas Medical Branch in Galveston, The University of Texas Health Science Center-Southwestern in Dallas, and The University of Texas-Pan American. In 1995-96, a new Physician Assistant program will begin at UTHSCSA in collaboration with the U.S. Army.

#### **Executive Summary**

**Collaborative Efforts to Build Educational Programs.** To help meet the prioritized needs expressed by South Texas communities, the South Texas AHEC has collaboratively supported the establishment of allied health and nursing programs at remote South Texas institutions of higher education. Various methodologies are utilized in initiating these new educational programs.

- In some instances, the South Texas AHEC and collaborating UTHSCSA Schools provide UTHSCSA-based faculty and temporarily extend their accreditation to assist a local institution in initiating a needed program, with the understanding that the host institution will gradually assume fiscal and academic responsibility for the program. Examples of this methodology are the BSN/MSN programs at The University of Texas at Brownsville, the Occupational Therapy Program at The University of Texas-Pan American, the Dental Hygiene Program at Texas State Technical College, and the Emergency Medical Technology Program at Texas Southmost College. This methodology is currently being expanded to the other AHEC regions.
- When a needed educational program is not available through UTHSCSA, the South Texas AHEC contacts other resources to find suitable programs. AHEC then assists these institutions in extending their educational programs to the targeted communities. An example of this methodology is the remote LVN program being implemented in Del Rio by Southwest Texas Junior College in Uvalde.

**Continuing Medical Education**. Continuing educational activities are provided to local health professionals in their communities, keeping them up-to-date with the latest developments in topics of interest and need. Five years ago, the number of activities accessible to health professionals in rural and remote regions of South Texas was minimal. During 1994-95, the number of participants in AHEC-sponsored community-based health professions activities exceeded 2,700.

Health Careers Opportunity Programs. Students in junior high and high school receive familiarization with health careers and guidance/support in completing their educations to enter these careers through a number of vehicles, including health careers information and guidance, academic enrichment opportunities, and outreach programs. The number of AHEC-sponsored students participating in these types of activities in South Texas has increased from six (6) in 1990-91 to more than 2,500 in 1994-95.

*Instructional Development*. Faculty development workshops are conducted at AHEC training sites to orient community practitioners to their role as community-based faculty and to train them in methods of student interaction, motivation, and evaluation. During the past five years, 25 courses have been held with 308 participants.

*Library Services*. Health professionals are assisted in gaining access to health information through the circuit library program, where a librarian utilizes a computer and modem to access up-to-date diagnostic and treatment information. In five years, 6,875 literature searches and 23,462 documents have been provided to participants in the Circuit Librarian Health Information Network.

Information Systems. A computer-based information management system, the Health Information Network (HINET), serves as a resource for access to reliable and updated information on health-related activities.

**Telecommunications.** An interactive telecommunications network has been installed at 10 remote affiliated clinical training sites in South Texas, the UTHSCSA campus, and the emergency room of the primary teaching hospital in San Antonio. The primary sites in this network are the community-based clinical training facilities established through the South Texas AHEC, allowing an additional methodology to contact, educate, and train students/residents and clinical faculty/preceptors. In addition to nursing and allied health use of this network to conduct student education and supervision, it was also used by approximately 363 participants in a variety of continuing education and other AHEC-related activities in 1994-95.

Self-Sustainment. To help further develop and sustain South Texas community-based health professional education and training programs, the South Texas AHEC assisted the development of the conceptual framework, detailed program plans, and budget projections for a "clinical campus" in the Lower Rio Grande Valley. These activities resulted in a significant appropriation from the 1995 Texas State Legislature to continue and expand the programs initiated by the South Texas AHEC in the Lower Rio Grande Valley, Mid Rio Grande Border, and South Coastal regions.

As part of its plan, the South Texas AHEC continues to collaborate with many agencies and programs interested in improving the training of current and future health care professionals. These cooperative relationships provide a mechanism to continuously leverage AHEC dollars in promoting additional activities to help meet the needs of the medically underserved communities in South Texas and building a sustained network supported at the local, state, and federal levels.

*The Future*. With dedicated leadership at both the community and university levels, the plan that began seven years ago has achieved a life of its own. The numbers of students, residents, community practitioners, and community residents who have been touched by the AHEC program are now far beyond what was imagined could be accommodated by the delicate medical and socioeconomic infrastructure in South Texas. Only through the strong support of the local communities, who saw the potential of the AHEC concept and embraced it completely, could such an undertaking have been accomplished in such a short period of time.

The communities in South Texas continue to experience a critical shortage of health professionals. Through their collaborative efforts with the South Texas AHEC, the communities are beginning to develop many of the tools needed to help meet the demand. With additional support from the State of Texas, in the form of the South Texas/Border Region Health Education Initiative, new programs targeting this historically medically underserved area will soon become available.

And so it goes. The goal is our future, and South Texas has a plan.

In addition to the above:

- Pediatric rotations through the Pediatric Subspecialty Clinics included: 20-23 medical students/residents; 3 Physician Asst. students; 3 nutrition students; and 12 nursing students.
- Nine psychiatry residents conducted weekend therapy groups in Los Fresnos, Texas under the supervision of psychiatry faculty.
- A total of 48 EMT personnel attended training sessions held in McAllen and Mission, Texas.
- A total of 23 nursing students were enrolled in either baccalaureate or master's level coursework at UT-Brownsville.

The primary affiliation for these rotations is UTHSCSA. In addition, students from other universities/medical centers such as The University of Texas Medical Branch (UTMB) at Galveston, UTHSC-Houston, North Texas State Health Science Center, Laredo Junior College, Brown • University, and New York State University completed rotations at LRGV clinical training sites.

- 2. Health Careers Opportunities Program. In addition to the Careers In Science Program at UT-Brownsville (17 student participants) and the Biomedical Program for students from the South Texas High School for the Health Professions (20 student participants), the Center's Health Careers Opportunities Program (HCOP) Coordinator has continued to implement a program to increase the awareness of careers in the health professions among students in junior high and high schools by:
  - Conducting Health Professions Career Day Academies and a Medical Applications of Science for Health Summer Program.
  - Making health careers presentations to science, career investigations, and health classes.
  - Participating in educational career fairs and career days.
  - Participating in Health Occupations Students of America (HOSA) activities.
  - Distributing a newsletter for the Health Careers Awareness Program, *Health Careers Update*, to appropriate persons in 32 school districts in the Rio Grande Valley.
  - Distributing information on health careers, health profession schools, financial aid, and scholarships to Valley students.
  - Maintaining databases to assist with the above activities.

LRGV AHEC Health Careers Opportunities Program Activities September 1994 - July 1995		
Activity	# of Students	
Health Professions Career Day Academies	274	
Health Occupations Students of America Activities	409	
Career Fairs/Career Days	1,199	
Medical Applications of Science for Health (M*A*S*H) Summer Program	27	
TOTAL -	1,909	
CUMULATIVE STUDENTS FROM MARCH 1994 TO JULY 1995	2,648	

#### Page 17

<u>Health Professions Career Day Academies</u>. Career Day Academies provide interested students with a full day of learning experiences about health careers. Activities include interacting with experienced health care professionals, participation in "hands-on" exercises, and hospital tours. Local health care professionals serving as faculty in these academies have included physicians, medical students, dentists, pharmacists, pharmacy interns, physician assistants, nurses, family nurse practitioners, and emergency medical technicians. Emphasis is placed on a strong background in Science and Mathematics. Students are also encouraged to practice in the LRGV once they've become health professionals.

Medical Applications of Science for Health (M\*A\*S\*H) Summer Program. The LRGV AHEC coordinated its first M\*A\*S\*H Summer Program in 1995. This summer enrichment program was funded by the Health Education Training Centers South Central and sponsored by the Brownsville Community Health Center, Brownsville I.S.D., Brownsville Medical Center, H.E.B. food stores, Texas Commerce Bank, UT-Brownsville, and Valley Regional Medical Center. Twenty-seven high school students from Brownsville I.S.D. attended the five-day program held in July 1995. Student selection was based on their application, a student essay, and teacher/counselor recommendations. Twenty females and 7 males were accepted, of whom 26 were Hispanic and one (1) was white. Students participated in presentations, interaction with health care professionals, educators, and tours of the local medical centers and UT-Brownsville's School of Health Sciences.

The M\*A\*S\*H Summer Program provided opportunities for the students to integrate science skills learned in the classroom with the health sciences in a professional setting. After completing the program students were expected to:

- Demonstrate an awareness of health careers and an understanding of medical terminology.
- Identify basic science theories in relation to medical diagnosis and treatment.
- Describe the correlation of each health care team member to medical diagnosis and treatment.
- Perform simple diagnostic procedures.
- Be certified in Basic Life Support and Adult Cardiopulmonary Resuscitation.
- Demonstrate awareness of teenage health issues, to support better informed decisions.

The M\*A\*S\*H Program utilized evaluative tools to measure program outcomes. By mastering the objectives of the M\*A\*S\*H Summer Program, it is anticipated the participating students will translate their acquired knowledge into career behavior that will be health oriented.

Additional Programming Needed to Meet the Needs of the Area. The significant amount of interaction between the LRGV AHEC and the region's school districts has resulted in an increased need to provide follow-up training and scheduled trips to UTHSCSA and other programs. These programs will be required to maintain a high level of interest in health careers at a time when many students are making career decisions. All school districts in the area have indicated interest in sending selected high school students to attend a science exposition and field trip to UTHSCSA. Sources of funding are being solicited to allow approximately 850 students to visit UTHSCSA. The impact of such trips has enormous potential to benefit the students and their career decisions.

#### Page 19

- 3. Continuing Education. To update and enhance the technical skills of practicing health professionals, the LRGV AHEC is taking increased responsibility in coordinating continuing medical education programs in this region. This role is being articulated and supported by the Continuing Education Review (CER) Committee which is composed of practicing physicians from across the Valley. During this year the CER Committee, with the active participation of the Center Director, convened a meeting and invited stakeholders to develop a central CME clearinghouse, with the Center serving in a coordinating capacity. Functions will include:
  - Develop and distribute a monthly calendar of CME activities.
  - Conduct surveys to determine continuing education needs.
  - Develop a database of clinicians and other health professionals in the Rio Grande Valley.
  - Develop CME seminars which address the health care issues of the community.
  - Promote CME seminars to clinicians practicing in the Rio Grande Valley.
  - Identify methods to increase access to CME resources, particularly those in rural areas.

Continuing Education courses held in the LRGV during 1994-95 included:

- Nine podiatry presentations, attended by approximately 232 community physicians, nurses, medical assistants, and community residents.
- Two pharmacy presentations in Brownsville and Rio Grande City, attended by approximately 50 physicians, nurses, physician assistants, and hospital and community pharmacists.
- Training sessions in EPSDT Screenings attended by 35 nurses.
- The 3rd Annual Pediatric Symposium, attended by 30 physicians and nurses.
- 4. *Faculty Development*. The LRGV AHEC has placed priority on improving the quality of training in community-based settings to improve the efficacy of clinical faculty/preceptors. To accomplish this goal, the Center has collaborated with the Educational Resources Department at UTHSCSA to:
  - Develop more effective approaches for preceptor training.
  - Attract additional resources to enhance the curriculum that uncovers the uniqueness of
    practicing in community-based settings, particularly in the Rio Grande Valley.

During 1994-95, eight (8) Instructional Development sessions were held in the LRGV, with 117 participants. The Center will be establishing a Committee that will revisit the curriculum now being used by C/MHCs and determine how to improve its content and relevance to the educational setting. Moreover, the Committee will develop a student evaluation system for C/MHC faculty.

5. Library and Information Services. Other support services for the practicing health professional include the ability to access library information from a location in the Rio Grande Valley. This service is provided by AHEC through the Circuit Library Health Information Network at UTHSCSA. The medical librarian assigned to the Rio Grande Valley is Graciela Reyna, and she is based at South Texas Hospital. Ms. Reyna visits outlying institutions on a weekly basis to provide consultation and technical assistance. The Center continues to support these activities.

**POINT #1:** *Program Coordination*. Identify and write affiliation agreements with health-related state and local entities to expand the LRGV AHEC's established role in the community as a primary educational coordinator. Areas of expertise could include program coordination, assistance in field studies and fact-finding projects involving health legislation, organization of community leaders with specific areas of expertise, database development, etc.

**POINT #2:** *First Aid and Prevention Programs*. Provide first responder/advanced first aid training programs for schools and rural/remote areas using a mobile vehicle or other transportable equipment. Develop a formal Preventive Service Program for employees of local businesses, to include training in CPR, fire safety, burn treatment, equipment safety, and how to reduce lost time due to injury, accidents, and chronic illness. Initial inquiries indicate that local businesses would pay for presentations of this type, which would provide program income.

**POINT #3:** Grant/Foundation Applications. Establish an organized review and submission process for grants and foundation work, to include categorizing of essential or specific requirements, submission dates, and funding limits, among others. Significant effort in this area will require a full-time equivalent (FTE) position for a grant writer due to the competitive environment and the limited number of annual grant and foundation awards.

**POINT #4:** Research Facilitation and Project Collaboration. Use existing AHEC office space, equipment, demographic knowledge, and community contacts as contributions in collaborative research studies and/or project implementation. Immediate benefit of research to the AHEC as a coordinating program is the receipt of current information that is relevant to the local area and conducted, evaluated, and implemented through the establishment of local professional partnerships. AHEC can provide project office space and allocate a portion of space cost to new projects that utilize AHEC office space. This is a cost effective way to house more projects in one location and operate in a coordinated manner.

**POINT #5:** *Health Careers Expansion*. Identify and affiliate with central Valley educational sites capable of providing fixed locations for coordinating M\*A\*S\*H and Academy programs. Secure funding to train designated professional instructors to conduct these projects who can maintain continuity and follow-up on these training programs between the AHEC and their institution. Efforts will be made to coordinate with all similar programs for the benefit of each program and avoid redundancy.

**POINT #6:** Community Development. Apply for cooperative funds to promote and implement seminars and continuing education courses through UT-Brownsville, UT-Pan American, Texas State Technical College, South Texas Community College, and South Texas ISD. Workshops will include MCAT, testing skills workshops, remedial or follow-up test preparation, GED, life management courses, and other courses tailored to high school students to improve their success rate in institutions of higher learning and to foster increased personal expectations. An AHEC program is currently being developed for school counselors and teachers to assist them in developing school programs relative to self-esteem and related issues for the purpose of motivating more local students to enter health careers.

**POINT #7:** Student Enrichment Programs. Affiliate with South Texas ISD to rotate M\*A\*S\*H and Health Career Day Academy students through a Saturday Science and Math audit program. Develop and disseminate educational materials specific to parents and their role in student motivation. Sponsor seminars for Health Career Day alumni, offering a selection of review workshops.

**POINT #8:** Dissemination. Actively promote community awareness of AHEC through local advertising, group discussion, presentations, and sponsorship of health programs. Advance the establishment of assets for this non-profit corporation to continue its operation and advancement. This will include fund-raising projects, as well as acquisition of donated property consistent with program goals to establish a permanent operating location capable of generating long-term program income for the AHEC.

**POINT #9:** *Health Professional Recruitment and Referral*. Secure demonstration funding and set up a recruiting and referral program to include database development, recruiter training, tracking and referral program, and formal agreements with local health care facilities. This plan must be proactive and one that competes well with the free market. To be cost and task effective, affiliations with state agencies charged with similar responsibilities should be identified and coordinated with to avoid duplication. Successful recruiting efforts will provide program income at a reduced rate to local facilities.

**POINT #10:** *Technological Advances*. AHEC will participate in making remote library services and telemedicine programs more accessible to professional health care providers. A hard look at the current status and required technical improvements will provide a baseline for future projects. In addition, programs to train individuals in using the newer technologies will need to be developed. Taking into consideration local provider and Board input, the AHEC should foster the expansion of a Telemedicine program throughout this region on a priority basis, making it more geographically accessible. Emphasis should be given to the coordination and dissemination of telemedicine technology that reduces or eliminates the need for patients to travel extended distances for necessary care in the most cost effective way.

## CONCLUSION

As a result of its efforts, the Rio Grande Valley AHEC has made important headway in being recognized as a leading community-based organization that plays an important role in the development and coordination of health professions training programs in South Texas. The Center staff is increasingly being asked to participate in meetings which address such issues as economic development, access to care for the medically underserved in the Valley, and the development and expansion of community-based health professions training programs.

## **RIO GRANDE VALLEY AREA HEALTH EDUCATION CENTER**

Ron Tupper, M.S.; Janie Luna; Mariza Saenz; and Sonia Gonzales

## PROJECT OVERVIEW

The Rio Grande Valley Area Health Education Center (AHEC) was established in October 1990 and incorporated as a 501(c)(3) organization in July 1992. Its primary mission is to improve the supply and distribution of primary health care personnel and the quality and scope of their education. The Center serves the four southernmost counties of Texas – Cameron, Hidalgo, Starr, and Willacy – in a region commonly referred to as the Lower Rio Grande Valley (LRGV). With an estimated population of 805,600, this area has a critical shortage of health care professionals, and many residents lack access to basic primary health care. These include the working poor who lack insurance or are underinsured, migrant and seasonal farm workers, the recently unemployed, and the poor who cannot find a physician willing to accept Medicaid or Medicare.

The Rio Grande Valley AHEC has played a key role in the coordination of health professional training programs in South Texas. Functioning under an operational contract with UTHSCSA, the LRGV AHEC, with its community and academic partnerships, is making a critical difference to increase the number of health care professionals in this historically medically underserved area.

## **OBJECTIVES FOR 1994-1995**

- 1. Continue the expansion of health professional training programs, continuing medical education, and health career opportunity programs in the LRGV.
- 2. Assume an increasing amount of fiscal responsibility and programmatic oversight of various health professional training programs in the LRGV.
- 3. Identify, pursue, and acquire non-AHEC funds targeting needed health professional training and health delivery activities in the LRGV.
- 4. Achieve increasingly higher recognition as a primary community-based organization, successfully bringing and coordinating health professional training programs affiliated with a variety of institutions of higher education into the LRGV.

## ACCOMPLISHMENTS IN 1994-1995

1. Community-Based Student and Resident Rotations. To attract and retain critically needed health professionals to this area, the LRGV AHEC has established linkages with various health care facilities. These partnerships have enabled AHEC to take medical, dental, physician assistant, nursing, pharmacy, and allied health students and primary care residents into the trenches to confront the real health problems of the community. It is through these clinical rotations in community-based settings that students experience a kind of medicine which is far removed from the institutionally based, technology intensive university medical center. This is accomplished by having the student/resident take part in and/or be exposed to one or more of the following: providing culturally relevant care, epidemiology of diseases in the Hispanic community, multi-disciplinary approaches to the delivery of primary care services, and the rather unique cases which are common in community-based clinical training sites. Training sites include:

- Programmatic discussions between faculty members, the Associate Dean, and numerous individuals throughout the region.
- Utilization of a toll-free number by nursing students to contact the School of Nursing in San Antonio.
- 2. Student Enrollment.

Family Nurse Practitioner Program New Student Enrollment			
	Fall 1994	Spring 1995	Fall 1995
LRGV	4	4	9
MRGB	0	1	7
Alamo	9	5	15
Winter Garden	0	2	3

LRGV students include two students who were projected for the Medical-Surgical Nursing major in Brownsville but have changed their major to FNP. They will complete their major on the San Antonio campus while living in Brownsville. During Fall 1994 and Spring 1995 semesters, there were a total of 25 students enrolled in the FNP program.

3. **Pediatric Nurse Practitioner Program: Preliminary Plans.** A Pediatric Nurse Practitioner (PNP) major is currently under consideration by the faculty of the School of Nursing. In April 1995 a needs assessment was undertaken that included surveys to 400 randomly selected pediatric nurses, 150 physicians (Family Practitioners and Pediatricians), and 50 clinical agencies from throughout South Texas to determine the demand for PNP education and practitioners. Individual nurses, physicians and clinical agencies in the MRGB AHEC Region were included in the surveys. These data are currently being analyzed.

## **OBJECTIVES FOR 1995-1996**

- Continue to recruit students from South Texas AHEC regions into the Family Nurse Practitioner program.
- 2. Select and enroll students into the FNP program at UTHSCSA during the 1995-96 academic year.
- 3. Promote the planning, coordination, and development of clinical programs and other health activities which provide quality teaching and education of health professional post graduates at AHEC sites.
- 4. Based on need assessment data analysis, pursue the plans for a PNP program at UTHSCSA that will include nurses from the outlying AHEC regions.

## HEALTH CAREERS OPPORTUNITY PROGRAMS UT-BROWNSVILLE CAREERS IN SCIENCE PROGRAM (CISP)

Dr. Miguel A. Bedolla; Suzanne Jackson; and Alfredo Muñoz

## **PROJECT OVERVIEW**

Upon entry into college, many minority science and pre-health majors find their high school preparation inadequate for the more difficult freshman courses such as math and chemistry. Many also have difficulty adjusting to the university environment and the academic demands of their course of study. A summer enrichment program, which could be duplicated in other South Texas communities, was implemented at UT-Brownsville in the LRGV AHEC region for incoming minority freshman students to address these needs.

## **OBJECTIVES FOR 1994-1995**

- 1. Provide an academic enhancement summer program for incoming freshmen science or pre-health majors at UT-Brownsville and retain them in the program.
- 2. Enhance the ability of the participants who complete the summer program to place out of remedial courses in chemistry, mathematics and communications.
- 3. Enhance the ability of enrolled participants to obtain a passing grade in their freshman biology, chemistry, algebra and English courses.
- Have the participants who complete their education receive a baccalaureate degree in a science or pre-health major.

## ACCOMPLISHMENTS IN 1994-1995

The program accepted 17 incoming freshmen at UT-Brownsville for a five week period from July 11 to August 10, 1995. The participants selected were all graduates from high schools in the Brownsville area and were selected based on their interest in science or a health career, grades, and recommendations from teachers or counselors. All 17 students were Hispanic, 8 were female, and 9 were male. Students attended freshman introductory review courses in general chemistry, mathematics, reading skills, and writing skills. All courses were taught in a formal classroom setting, and the chemistry course included laboratory experiences. Local and regional scientists and health professionals presented lectures and demonstrations in their fields as role-models for the students. All formal classroom and laboratory activities were conducted by UT-Brownsville faculty, and four student tutors were available to the students. The Program Director, faculty, and tutors were all Hispanic, providing role-models for the participants. UT-Brownsville provided funds for all the students to take a field trip to UTHSCSA, where students met with Hispanic medical, dental, allied health and nursing students, attended presentations, and toured the UTHSCSA facilities.

Program success is evaluated according to the following objectives:

1. **Program completion by 90% of the student participants**. 100% of the 17 students selected for the 1995 summer program completed the program.