

Title VII of the Public Health Service Act: Increasing Participation Among the U. S. Colleges and Schools of Pharmacy

"This money[SDS] has become a significant portion of the financial aid package of our pharmacy students. It particularly helps in summer semester when aid availability is lower. We have about half our students going to medically underserved areas to practice and about half of them have received a scholarship from this fund."

Lori Morin, MBA
Assistant Dean Student Affairs
U of MT School of Pharmacy

"I should mention that there have been other interdisciplinary grants which intersect with RIGEC [Rhode Island Geriatric Education Center] and I think in large part have been successful because of the center bringing together diverse faculty."

Anne Hume, Pharm.D.
Professor
University of Rhode Island College of Pharmacy

"AHEC is central to the education of pharmacy, nursing, medicine, and dentistry students at Carolina. We would not be able to deliver our curriculum without AHEC support."

William Campbell, PhD
Professor
UNC School of Pharmacy

"My financial aid officer stated: "Do not allow Congress to permit these programs to go under. To do so would hurt higher education and ultimately the health care of our country." I would add that even what Congress might consider a small amount would have tremendous impact on the education of pharmacy students."

Bobby Bryant, PharmD, MS
Dean
Ohio Northern University College of Pharmacy

Through loans, loan guarantees, and scholarships to students, and grants and contracts to institutions, the Title VII and VIII health professions programs are designed to:

- Meet the nation's needs to increase the supply of primary medical and dental care providers, public health and allied health professionals, and nurses;
- Educate and train more health professionals in fields experiencing shortages, such as the current shortages in nursing, pharmacy, dentistry, public health, and allied health;
- Improve the geographic distribution of health professionals and nurses;
- Increase access to health care for underserved populations; and
- Enhance minority representation in the practicing health professional workforce.

The Bureau of Health Professions within the Health Resources and Services Administration (HRSA) administers these programs. The Health Professions Education Partnerships Act of 1998 [Public Law 105-392] consolidated the Title VII and VIII programs into seven categories:

- Minority and Disadvantaged Health Professions
- Primary Care Medicine and Dentistry
- Interdisciplinary, Community-Based Linkages
- Health Professions Workforce Information and Analysis
- Public Health Workforce Development
- Nursing Education Act
- Student Financial Assistance

Colleges and schools of pharmacy are explicitly authorized to participate in the "diversity programs" cluster of Title VII of the Public Health Service Act (42USC 292(q)-292(y) and 42USC 293- 293(b). Colleges and schools of pharmacy are able to participate in a partnership role with medical schools in programs included in the "interdisciplinary programs" cluster. These include the Area Health Education Centers (AHEC), Geriatric Education Centers (GEC), and the Quentin Burdick program for rural interdisciplinary training (42USC 294- 294(f)).

DIVERSITY PROGRAMS

Colleges and schools of pharmacy are explicitly eligible to participate in the minority and disadvantaged health professions programs. These programs provide support for health professions schools that have demonstrated the greatest commitment to and success in training minorities for health professions careers. Scholarship support also is provided for disadvantaged and minority students who attend health professions or nursing schools. The FY04 appropriation for Diversity Programs was \$118.6 million.

"Healthy People 2010: National Health Promotion and Disease Prevention Objectives", by the United States Department of Health and Human Services, states, "...increasing the number of minority health professionals is viewed as a partial solution to improving access to care. Several studies have shown that underrepresented minority health profession graduates are more likely to enter primary care specialties and to voluntarily practice in or near designated primary care health workforce shortage areas."

HEALTH CAREERS OPPORTUNITY PROGRAM (HCOP)

"Health Careers Opportunity Program (HCOP) grants increase the number of individuals from disadvantaged backgrounds in the health and allied health professions. A more diverse health workforce is needed to meet the needs of underserved populations. HCOP enhances the academic skills of students from disadvantaged backgrounds and supports them in successfully competing, entering and graduating from health professions training programs." (From HRSA website)

The FY04 appropriation for HCOP was \$35.9 million

*Since 1990, 31 students from the **West Virginia University School of Pharmacy** have participated in the pharmacy component of HCOP. These students are from disadvantaged backgrounds and the program provides enrichment opportunities to enhance their pre-professional education as well as prepare them for the rigors of the admissions process. Since 1996 all HCOP students have been involved with three months of experiential learning activities in rural settings.*

CENTERS OF EXCELLNCE PROGRAM (COE)

"Centers of Excellence grants assist health professions schools to support programs of excellence in health professions education for minority individuals in allopathic and osteopathic medicine, dentistry and pharmacy and graduate programs in behavioral or mental health (clinical and counseling psychology, clinical social work, marriage and family therapy). COE strengthens the national capacity to train students from minority groups that are under-represented in these health professions and build a more diverse health care workforce." (From HRSA website)

The FY04 appropriation for COE was \$33.9 million

Seven colleges and schools of pharmacy received funding in FY03 to support their COE programs. The schools that are COE program participants are: University of Colorado; University of Montana; University of Tennessee; Howard University School of Pharmacy; Xavier University College of Pharmacy; and Florida A&M College of Pharmacy.

*The **University of Montana School of Pharmacy's** diversity programs include *The Native American Center of Excellence (NACOE)*, and the *Health Careers Opportunity Program (HCOP)*. The NACOE at our school is the only one out of the four COE programs at schools of pharmacy in the nation that will train American Indians to become faculty members. The NACOE grant will provide three faculty trainee fellowships for clinical instructors and one faculty trainee fellowship for a campus-based instructor. This will be of considerable importance nationally because at the moment there are very few American Indian faculty in schools of pharmacy. The grant will also help introduce culturally relevant materials in the curriculum and help develop an AI/AN clerkship pathway. As the grant progresses a goal will be to have **students complete an American Indian Pathway program where they take relevant classes, complete research projects and clinical experiences that will help them become well-rounded practitioners.***

*The **Hispanic Center of Excellence (HCOE)** in the **University of Texas at Austin College of Pharmacy** will improve the academic performance of Hispanic pharmacy students by offering pre-matriculation programs and enhancing academic support and enrichment programs. The Academic Career Path for pharmacy students along with a faculty development program for current and future Hispanic junior faculty will focus on the development, recruitment and retention of Hispanics in academic pharmacy. The HCOE will serve as a focus for the development in cultural proficiency by conducting a comprehensive assessment, expanding library resources, initiating a Multicultural Health Lecture Series, hosting cultural workshops at faculty and preceptor meetings, and expanding existing service-learning experiences. Engaging Hispanic students in research opportunities throughout their pre-pharmacy and professional programs of study will be supported by the HCOE. The College will enhance community-based*

experiential training by developing new clerkship sties in Community Health Centers in South Texas and along the Texas-Mexico border. The HCOE will strengthen its current student applicant pool through expanding and enhancing the academic support in the cooperative pharmacy programs, and through partnering with other HCOEs in Texas.

SCHOLARSHIPS FOR DISADVANTAGED STUDENTS (SDS)

The Scholarship for Disadvantaged Students program was established to make scholarship funds available to eligible students from disadvantaged backgrounds that are enrolled (or accepted for enrollment) as full-time students. To be eligible for funding, a school must have in place a program to recruit and retain students from disadvantaged backgrounds, including racial and ethnic minorities, and demonstrate that the program has achieved success, based on the number or percentage of disadvantaged students who graduate from the school. **The FY04 appropriation for SDS was \$47.5 million.**

*During 2003, the **University of Montana School of Pharmacy** was granted \$351,484. This allowed the school to award 100 scholarships ranging from \$1000 to \$5000.*

*"This money has become a significant portion of the financial aid package of our pharmacy students. It particularly helps in summer semester when aid availability is lower. We have about half our students going to medically underserved areas to practice and about half of them have received a scholarship from this fund." **Lori Morin, U of MT School of Pharmacy***

INTERDISCIPLINARY PROGRAMS

These programs provide support to enhance the community-based training of various health professionals, including pharmacist, in rural and urban underserved areas.

GERIATRIC EDUCATION CENTERS

Within a defined geographic area, GECs provide services to and foster relationships among organizations or institutions that sponsor geriatric educational programs for health care professionals. Since its inception, the GEC program has successfully trained over 350,000 health professionals in the unique health issues of an aging population, with just over half of this number currently in the workforce. The program has resulted in more effective diagnosis and intervention, leading to decreased rates of early institutionalization and significant cost savings for both public and private health and long-term payers. **The FY04 appropriation for GECs was \$31.8 million.**

*The **Virginia Geriatrics Education Center (VGEC)** was established in 1985. This center is an interdisciplinary effort involving cooperation with the Schools of Allied Health Professions, Arts, Business, Dentistry, Education, Medicine, Nursing, Pharmacy, Social Work, and the College of Humanities and Sciences at Virginia Commonwealth University. In addition, the Virginia Center on Aging is integral to the work of the VGEC. The major focus of the VGEC is to promote education in geriatrics and gerontological health care. Since its inception, the VGEC has educated over 43,000 health professionals. The School of Pharmacy has partnered with the VGEC since the VGEC began in 1985. Pharmacy faculty have been responsible for providing drug therapy perspectives in many of the VGEC's educational programs. Current funding for the VGEC (funded 2000 - 2005) provides geriatric training to support the following initiatives:*

Development and implementation of a Geriatrics Health Professional Mentoring Program. One pharmacy faculty member is serving as a mentor.

Development and implementation of a Geriatric Case Management Initiative targeted to the training and career development of Certified Nursing Assistants and Licensed Practical Nurses. Pharmacy faculty will be providing guidance and teaching as it relates to issues in drug therapy.

Development and implementation of a statewide Alzheimer's and related dementia training program. The school of pharmacy faculty will be involved in providing educational instruction and materials on drug therapy of Alzheimer's disease and other dementias.

Development and dissemination of new educational materials using on-line instruction emphasizing critical areas identified in Healthy People 2000, including tobacco use, pressure ulcers, diabetes, dementia, and others. Where appropriate, pharmacy faculty will be contributing to this initiative.

Training for faculty in the area of grantsmanship targeted to the aging population. One junior faculty member in pharmacy is being mentored in this program.

Development and implementation of a "Kids Into Health Careers" program. Pharmacy faculty are involved in this program, discussing the roles of the pharmacist in senior care.

The Rhode Island Geriatric Education Center (RIGEC) at the University of Rhode Island was founded in 1996. RIGEC now serves southeastern New England from mid Connecticut to Cape Cod. The goals include:

*continued development and refinement of the interdisciplinary core curriculum in geriatrics (which leads to a Certificate in Interdisciplinary Practice in Geriatrics);
development and expansion of partnerships with provider networks to improve clinical practice through customized education and training;
development of partnerships with Indian Health Service sites including the Mashucket Pequots (of the casino fame) in CT, the Wampanoags in MA and the Narragansetts in RI;
fostering the development of career interest in geriatrics and gerontology programs among high school students (we did some work in the area over several summers);
promoting interdisciplinary geriatric teamwork training at clinical sites for students in the health professions;
increasing faculty interest and professional development certificate programs in gerontology and geriatrics;
increasing access to diverse information and educational resources;
promoting partnerships and linkages with other programs thematically addressing issues important in the care of older adults such as end-of-life care.*

AREA HEALTH EDUCATION CENTERS

Area Health Education Centers (AHEC) are designed to improve the supply and distribution of health care professionals with an emphasis on primary care and to increase access to quality health care through community/academic educational partnerships. AHECs provide clinical training opportunities to health professions and nursing students in rural settings and communities in need of health care by extending the resources of academic health centers to these areas. Through this linkage, AHEC programs, which eventually become self- or state-supported, form networks of health-related institutions to provide educational services to students, faculty, and practitioners. AHECs are an essential component of the federal/state partnership in addressing health care delivery in rural, underserved areas.

The FY04 appropriation for AHECs was \$29.2 million.

Texas Tech University of Health Sciences was awarded \$2.5 million in FY2003 to start an area health education center.

The North Carolina AHEC Program plays a very active role in the pharmacy profession. It provides educational opportunities for students and professionals, and the AHEC faculty and staff constantly work to meet the Program goal of improving recruitment, retention, and distribution of pharmacy professionals. NC AHEC pharmacy programs include support for community-based instruction of pharmacy students, pharmacy practitioners, pharmacy technicians, and other health care professionals. Pharmacy student experiential education is achieved through clinical rotations at ambulatory and institutional sites in the NC AHEC regions, where the students learn first-hand about the practice of pharmacy in community settings. Each of the nine AHECs has one to four pharmacists who hold faculty appointments at UNC-CH or Campbell University Schools of Pharmacy. Overall, the program boasts 22 AHEC pharmacy faculty and over 500 volunteer preceptors who teach pharmacy students from the UNC-CH and Campbell University.

AHEC Pharmacy Programs:

*Serve practicing pharmacists, pharmacy technicians, undergraduate and graduate pharmacy students, residents and fellows, medical residents, physician extenders and physicians.
Provide continuing education for healthcare professionals through collaborative program planning.
Provide disease state management certificate programs for pharmacists looking to advance their practices.
Identify and monitor pharmacist training sites and faculty preceptors.
Facilitate career development and pharmacy practice advancement through regional advisory boards.*

Continuing Pharmacy Education

Continuing pharmacy education is required by legislation as a condition for re-licensure. Increased involvement by practicing pharmacists has had an impact on the demand for accessible, high-quality continuing education. The AHECs have been and will continue to be responsive to the educational needs of practicing pharmacists in their regions. In collaboration with the UNC-CH School of Pharmacy, the AHECs have doubled their CE offerings over the last 10 years. AHEC pharmacy programs will continue to offer a comprehensive selection of educational programs and information services, including curricular offerings, certificate programs, and short-term experiential programs (e.g., mini-residencies).