

Northeastern Vermont Area Health Education Center

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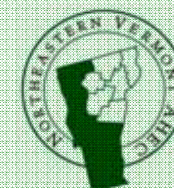
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NORTHEASTERN VERMONT AREA HEALTH EDUCATION CENTER

Serving Caledonia, Essex, Lamoille, Orange, Orleans and Washington Counties



Annual Report 2010

Promoting excellence in our rural health care systems by
Connecting students to careers,
Professionals to communities, and
Communities to better health.

NORTHEASTERN VERMONT AHEC

ACKNOWLEDGEMENTS

NORTHEASTERN VERMONT AHEC

LETTER FROM THE DIRECTOR

Our Funders

DECEMBER, 2010

Our Community Hospitals



The State of Vermont



Vermont Department of Education

Federal Funders



The National Women's Health Information Center
U.S. Department of Health and Human Services
Office on Women's Health



AHEC Program Support



Freeman Medical
Scholars Program

Our Collaborators

Health and allied health professionals in northeast and central VT
Public and private secondary schools in northeast and central VT
State of Vermont Department of Education
Community College of Vermont
Vermont Technical College
Springfield College
Lyndon State College
Vermont Student Assistance Corporation
Area Agency on Aging for Northeastern Vermont
Association of Women's Health, Obstetric and Neonatal Nursing (AWHONN)
BAART Programs
COVE (Community of Vermont Elders)
Dartmouth Medical School
Hospice and Palliative Care Council of Vermont
North Country Health Consortium
Norris Cotton Cancer Center
Vermont Ethics Network

Affiliations

Bi-State Primary Care Association
National AHEC Organization
National Health Service Corps
National Rural Health Association
New England Consortium of Academic Coordinators of Clinical Education
New England Rural Health Round Table
New Hampshire Medical Society
Northeast Kingdom Chamber of Commerce
VT Alcohol and Drug Abuse Certification Board
Vermont Chapter of the National Association of Social Workers
Vermont State Nurses' Association
Youth Health Service Corps

The Northeastern Vermont AHEC, since 1997, has worked to strengthen recruitment and retention efforts throughout the six counties of northeast and central Vermont. We call our continuum of programs and projects the health care workforce pipeline, and our mission is to improve the system of health care for rural residents.

Typically, the phrase 'rural health care' implies challenges: too few resources, far distances, greater isolation and poorer outcomes. In rural areas, health care systems in general experience greater professional shortages, lower reimbursements for the same services, and patient populations that are sicker, poorer, and less likely to be insured than in urban areas. In 2010, more than half (55%) of primary care physicians in our region reported that they are not accepting, or limiting, new patients to their practice. This is a tough environment in which to attract a highly-qualified primary care workforce.

But rural primary care, just like rural living, offers simple and unexpected rewards. Our system of care consistently exceeds expectations by putting patients first, by fostering respect and teamwork among health professionals, by making the best use of the available resources, and by innovating for better outcomes wherever possible. While generalities about rural disparities are born out in our region of Vermont, the positive attributes that make rural health care work are also present here. Factors that make rural health care greater than the sum of its parts stem from willingness to collaborate, trust, leadership, vision, and effective communication.

While recruitment of all disciplines of health professionals to the northeast and central counties of Vermont is challenging, Northeastern Vermont AHEC interacts regularly with individuals who revel in the complexities and the uncommon virtues of a rural practice. In 2011, Northeastern Vermont AHEC will seek to capture these unique benefits in the words of those that experience them first hand, as a way to better communicate with students and professionals that 'rural' is a quality of life, not a barrier to quality care.

The staff of the Northeastern Vermont AHEC expresses our sincerest appreciation to Thomas A. E. "Mike" Moseley, M.D., who devoted more than 13 years as a director of our Board. Dr. Moseley embodies the best qualities of rural primary care and continues to be a champion of the AHEC mission through his work and his example. We also want to acknowledge and thank former Board members Dennis Straight and Jeff Hunsburger. We appreciate all your work on behalf of our organization!

With Good Cheer,

Nicole LaPointe, Executive Director

NORTHEASTERN VERMONT AHEC

YEAR IN PICTURES



The annual School Nurses' Forum focused on eating disorders and self-esteem in January, 2010.



The 2010 Rural Health Symposium celebrated rural primary care at Karme Choling in Barnet, Vermont.



In September, 2009, NEVAHEC participated in a discussion on health care workforce with the NEK Collaborative.



Dr. Steve Genereaux and Bob Swartz explore the free resources available from the UVM Dana Medical Library to community faculty preceptors.



Students practice clinical skills on a patient simulator during MedQuest, 2010.



Vermont AHEC Play Day
July 8, 2010

In July, staff of the three regional centers and the program office met at Boulder Beach State Park.

UVM COM '13 student Emily Keller with Jenny Nelson share a dinner of local foods at the Barton Senior Meals Site during the SEARCH summer project "Linking Elders to Local Food."



2010 Staff and Board Strategic Retreat
June 8, 2010

NORTHEASTERN VERMONT AHEC

OUR STAFF

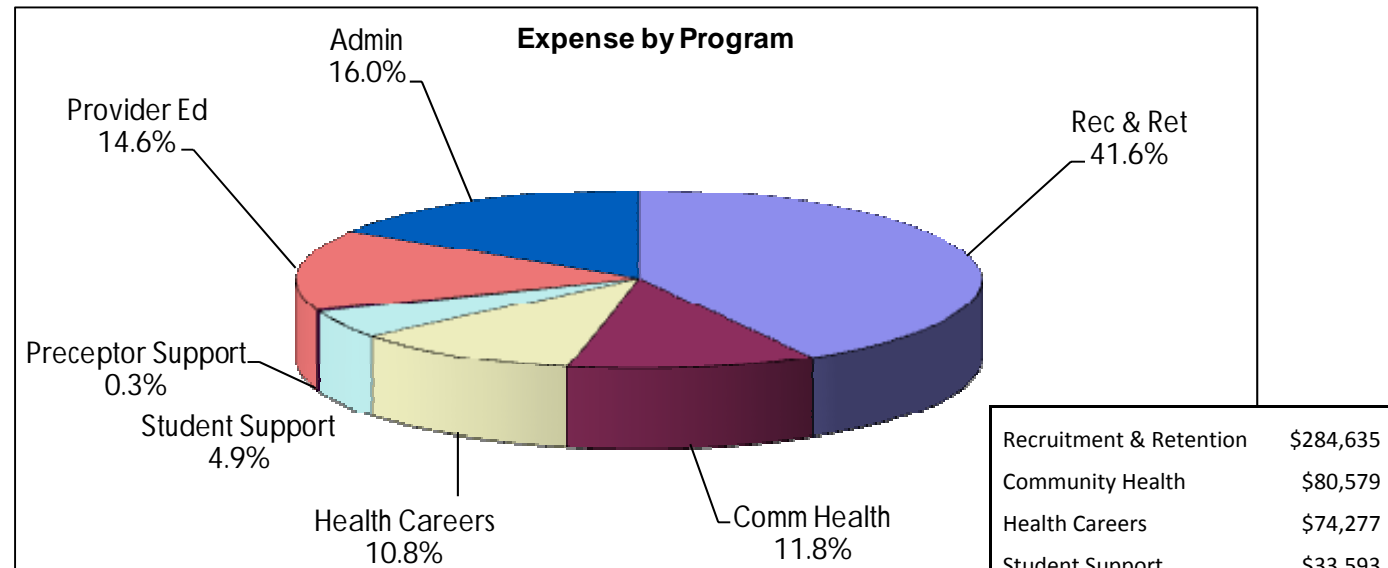
NICOLE LAPOINTE, EXECUTIVE DIRECTOR began working in the field of public health in 2000 as a community organizer to improve access to health and human services for the uninsured. She received a Master's Degree in Social Work in 2001 from the University of New Hampshire. Nicole worked with the Northern NH AHEC from 2005 until she joined the Northeastern VT AHEC as Executive Director. She lives in West Burke with her husband and young son.

ROBERT SWARTZ, EDUCATION RESOURCE COORDINATOR has been at NEVAHEC since its first year, contributing program development skills and literature research skills developed during 35 years of teaching and administrating. Bob is part-time, and enjoys planning and implementing continuing education activities, as well as promoting the benefits of living and working in a northern Vermont community. He and his wife live in St. Johnsbury and have 3 grown daughters and 6 fast-growing grandchildren.

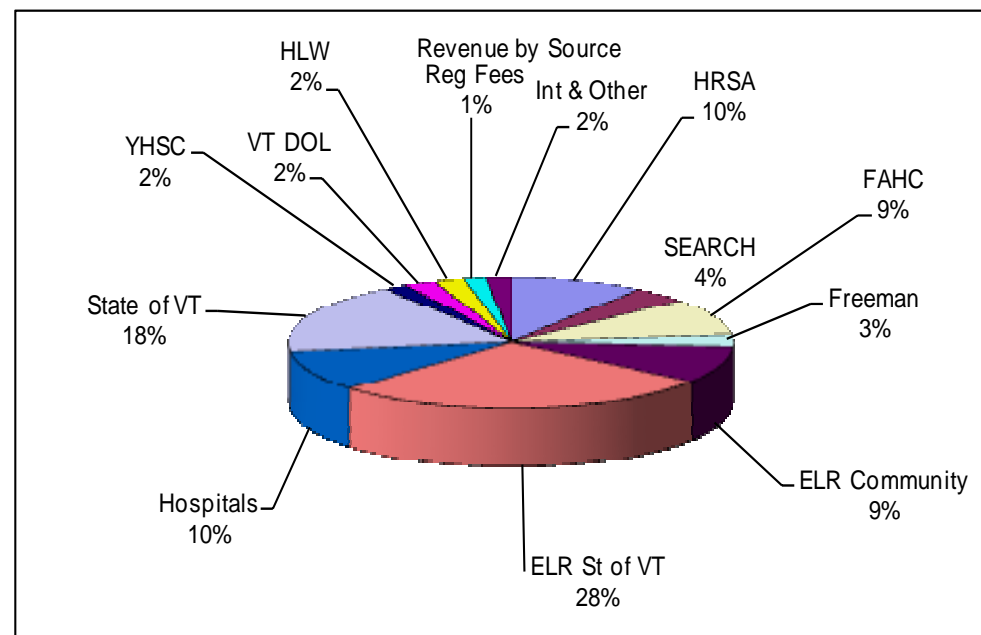
MARY E. FLECK, BUSINESS MANAGER joined the AHEC staff in 1998, following ten years working at a pediatric practice in Newport. Before coming to Vermont in 1987, Mary worked in the finance department of a large teaching hospital in New Jersey. Her interests include writing, research, IT and graphic design. She is a cantor at the Conversion of St. Paul Church and lives in a chalet in Barton with her three cats, Pinky, Pipsqueak & Lily and her part-time dog, Sadie. *Hidden talent:* Mary is a professional vocalist and lyricist, performing with such groups as the Metro Lyric Opera Company and the musical comedy group, Wing-it Music Unlimited.

MARY ANN NUTE, ADMINISTRATIVE ASSISTANT has an Associates Degree in Graphic Design and worked in publishing for 15 years in Boston. Before joining Northeastern Vermont AHEC in 2002, Mary Ann worked in Massachusetts for a law office, stockbrokerage company, mental health insurance company, and most recently superintendent of schools office in Vermont. Mary Ann continually develops her artistic interests with jewelry design, sculpting, fiber art, painting, and illustration.

LAURA REMICK, HEALTH RESOURCE COORDINATOR has her Masters in Education and is a certified health education specialist. She has over 20 years of experience working with non-profits in rural New Hampshire and Vermont. Before joining NEVAHEC in 2008, Laura worked at the North Country Health Consortium, NH, where she coordinated the community substance abuse prevention coalition. Additionally Laura has experience in teaching nutrition and health education classes at local community colleges. *Hidden talent:* Laura was an aerobics instructor in her early adulthood years.



Recruitment & Retention	\$284,635
Community Health	\$80,579
Health Careers	\$74,277
Student Support	\$33,593
Preceptor Support	\$2,105
Provider Education	\$69,994
Community Systems	\$17,766
Development	\$12,349
Admin	\$109,401
TOTAL	\$684,699



HRSA	\$69,701
SEARCH	\$29,973
FAHC	\$65,000
Freeman	\$21,552
Education Loan Repayment	\$261,958
Hospitals	\$69,732
State of VT	\$125,866
YHSC	\$12,500
VT DOL	\$16,036
HLW	\$15,390
Registration Fees	\$11,287
Interest & Other	\$13,143
TOTAL	\$712,139

This year, our staff members and Board worked together to hone statements of mission and vision, and to craft goals that will guide our work in the years to come. The fruit of this labor is not in the words that we put on paper, but in the shared sense of purpose and direction that emerged as we worked together.

Our VISION: We envision a system of health care that works optimally for patients and practitioners alike.

Our MISSION: Our mission is to promote excellence in our rural health care systems by connecting students to careers, professionals to communities, and communities to better health.

Our GOALS: In the six counties of Caledonia, Essex, Lamoille, Orange, Orleans and Washington, in collaboration with UVM and the statewide AHEC Network, the Northeastern Vermont AHEC works to:

1. Attract and retain adequate numbers of well-trained professionals in the health care workforce.
2. Guide adults and students to enter a health care profession, or to advance within their health career.
3. Provide health professionals and health care decision-makers with the information, education and resources required to improve the system for patients and practitioners.
4. Improve community health and well-being through education, leadership development, and partnerships.
5. Sustain Vermont AHEC's capacity to deliver high-quality, timely and effective programs to meet our mission.

Recruitment and Retention

Goal #1: Attract & retain adequate numbers of well-trained professionals in the health care workforce

Education Loan Repayment

“Thank you so much for this loan repayment award! Over the years AHEC has helped tremendously in reducing my loan burden. I hope the program continues to thrive and provide for many more primary care practitioners.”
NP, Lamoille County

\$261,958 in education loan repayment grants were accepted by primary care practitioners in 2010. Of this amount, \$199,458 was funding from the State of Vermont and \$62,500 was provided by a community match award. These awards were distributed to:

- 13 physicians, who received \$193,958 in educational loan repayment.
- Nine physician assistants, who received \$42,000 in educational loan repayment.
- Five nurse practitioners, who received \$23,500 in educational loan repayment.
- Three certified nurse midwives, who received \$6,000 in educational loan repayment.

\$45,000 in recruitment awards were made to new primary care providers entering practice in our region. These awards were a mix of funding from the State of Vermont, the Freeman Foundation, and community match awards. The practitioners recruited included:

- An internist in Orleans County.
- A pediatrician in Orange County.
- A family practice nurse practitioner in Orange County.

Preceptor, housing host, Education Loan Repayment committee member, and Board member — Fay Homan, MD



Gatherings like the Rural Health Symposium at Karma Choling Meditation Retreat provide opportunities for medical students and practitioners to share current knowledge and best practices in rural primary care.



One University of Vermont medical student and one UVM Social Work graduate student elected to familiarize themselves with the workings of a rural Vermont community by doing a Summer Project here.

16 Students were provided housing while on rural clinical rotations in our region.

What students say :

“Hosts were kind, generous, respectful, and also understanding of my schedule. We had a couple of dinners together, but I was also comfortable cooking on my own in their kitchen. Overall, they were great and I enjoyed my time there.”

“I felt like I was a part of their family. They are wonderful people: very nice, understanding, accommodating, and helpful. Everything was good.”

“It was wonderful! Thank you thank you! Eleanor was so nice and I had a wonderful, comfortable place to stay! Had a great time on the rotation!”

Planning is underway to bring the following projects to the six counties in our region in 2011. Programs in geriatrics, behavioral health, substance abuse, and community health planning have been identified as high need areas through survey and assessment of regional practitioners and allied health professionals. Opportunities targeting direct care professionals have also been identified as a priority.

Initiative to support seniors in the community.

1. Expand *Linking Seniors to Local Foods* project into Orleans County.
 - Develop evaluation measures that relate local, fresh foods to better health outcomes for seniors.
 - Work with diverse partners to create new food distribution systems to vulnerable seniors.
2. Join the collaboration to enhance coordination of care through the SASH (Seniors Aging Safely at Home) pilot in the northeast.

Support health and allied health professionals working in home health and residential care settings.

1. Provide continuing education programs for LNAs working in the home health setting.
2. Provide professional education to PCAs (personal care attendant).
3. Create opportunities for activities directors at residential care facilities to network and share best practices.

Identify collaborative solutions to the complex issues relating to substance abuse and chronic pain.

1. Provide continuing education for primary care practitioners, mental health and substance abuse treatment providers, social service providers and pharmacists in interdisciplinary settings.
2. Sponsor and facilitate community forums with health professionals, behavioral health specialists, substance abuse treatment providers, pharmacists and law enforcement to identify key issues and potential collaborative solutions.

Offer consultation services to not-for-profits and community groups in assessment, coalition development, grant writing and evaluation.

Initiate a fundraising campaign to support advanced health career exploration programs for underserved youth in northeast and central Vermont.

Support rural rotations for more health professions students.

1. Coordinate to expand rural rotations for advanced practice nursing students in collaboration with the UVM Department of Nursing.
2. Develop systems to provide housing coordination to students on rotation from institutions other than UVM.

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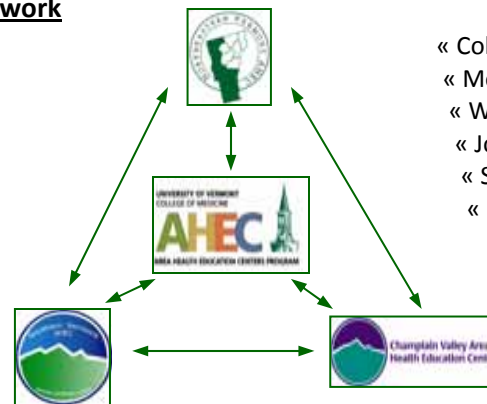
OUR ACCOMPLISHMENTS

Sustainability

Goal #5. Sustain Vermont AHEC's capacity to deliver high-quality, timely and effective programs to meet our shared mission.

The Vermont AHEC Network

The University of Vermont AHEC provides a conduit to students, medical faculty, and the resources of a teaching hospital. Through the regional centers, this learning flows into Vermont's rural communities and primary care practices.



- « Collaborative fund development
- « Monthly coordination meetings
- « Weekly phone conferences
- « Joint Planning
- « Shared expertise
- « Leveraged resources

Financial Goals set for 2011

1. Increase and diversify sources of funding
2. Increase amount of revenue from fees for service
3. Increase unrestricted funds as a percentage of total revenue
4. Increase year-end revenue over expenses

Current

- FY 2010 total revenue: \$644,791
- Year end revenue over expenses: \$19,797
- Unrestricted revenue as percentage of total budget: 24%
- Percentage of funds from sources within the region: 12.6%

2010 Board Accomplishments

1. Hired a new Executive Director
2. Reviewed and amended Bylaws
3. Restructured Board committees
4. Updated personnel policies
5. Adopted a revised mission
6. Adopted vision and values statements
7. Reviewed and adopted revised goals
8. Conducted an analysis of Strengths, Weaknesses, Opportunities and Threats
9. Developed Performance Measurements
10. Conducted a market needs assessment for community health planning services
11. Adopted a 2 year strategic plan

NORTHEASTERN VERMONT AHEC

OUR ACCOMPLISHMENTS

Students into Health Professions

Goal # 2: Guide adults and students to enter a health care profession, or to advance within their health career.

- ★ Almost 2000 students were reached at workshops and exhibits at five career fairs.
- ★ Health Career presentations were made at ten middle & high schools reaching 400 students.



- ★ **88%** of MedQuest graduates report going on to college for health career preparation.
- ★ **Nineteen high school students** from six counties participated in MedQuest 2010.
- ★ Four UVM medical students received \$1,200 each toward their educational expenses as assistant directors at MedQuest 2010

"MedQuest was a truly amazing experience!"
- NM MQ 2010

"I never thought about being a physical therapist until I shadowed one and loved it."
- JW MQ 2010



- ★ **Thirty-one students** from St. Johnsbury Academy and Lake Region Union High School participated in the Youth Health Service Corps program.



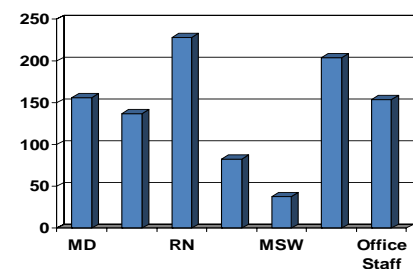
Resources for Quality Improvement

Goal #3. Provide health professionals and health care decision makers with the resources & information to improve the system for practitioners & patients

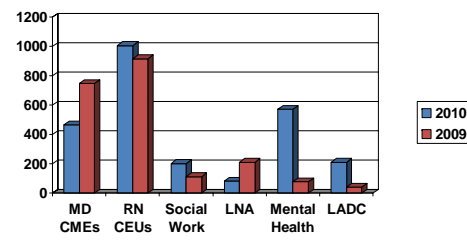
- 61 primary care practice sites in the northeastern Vermont region were surveyed to assess workforce needs by county and by discipline. The results of this survey contribute to the Northeastern Vermont AHEC 2009 Annual Primary Care Report and the Vermont Primary Care Workforce 2009 Snapshot published by the UVM College of Medicine Office of Primary Care.
- Northeastern Vermont AHEC is now authorized by national accrediting organizations to provide Continuing Education Credits to physicians (CMEs) and nurses (all levels) and we arrange with nine other professional boards of certification to provide professional education credits for other health care specialties.
- 908 health care professionals attended one or more professional education programs.
- 19 educational activities were conducted for health and allied health professionals.
- A total of 1,482 recertification credits were awarded to professionals in health care and allied health professions.
- Professional continuing education credits were provided to physicians, physician assistants, nurse practitioners, RNs, social workers, LADCs, LCMHCs, clinical psychologists and direct care providers.
- The following professional educational needs were identified in surveys of providers and addressed through educational programming: geriatric practice, mental health issues, and medical ethics.



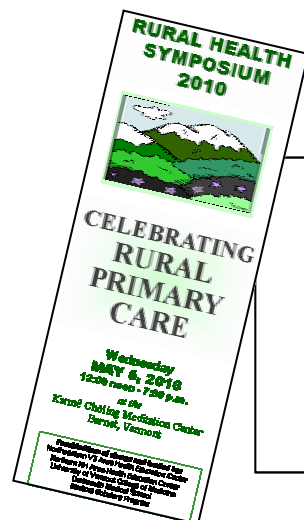
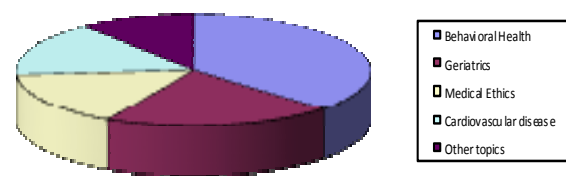
Participants by Profession



Credits Awarded 2009/2010



Continuing Education Topics



Community Health

Goal #4. Improve community health and well-being through education, leadership development, and partnerships.

- NEVAHEC worked with Copley Hospital and North Country Hospital to conduct nine 6-session Healthier Living Workshops in Lamoille and Orleans Counties, supporting 90 people living with a chronic illness.
- For the fourth consecutive year, Northeastern Vermont AHEC partnered with the Area Agency on Aging of Northeastern Vermont to provide an afternoon and evening of Relaxation, Rejuvenation and Self-Care to 29 local caregivers.
- As part of the Office of Women's Health Heart Truth Campaign, 160 health practitioners and allied health professionals were reached with updated guidelines on cardiovascular disease prevention, assessment, intervention and treatment.
- A grant from the Vermont Department of Education helped to bring Reducing the Risk: Building Skills to Prevent Pregnancy, HIV and STD to school nurses and school counselors from 7 schools.
- Through the federal SEARCH Program, an interdisciplinary student team found changes that could easily be made to the food system that would put more local foods on the plates of vulnerable seniors.
- In partnership with Northeastern Vermont Regional Hospital, the Summit on Dementia was presented to 51 health and allied health professionals.



New Enterprises. In June and July, Northeastern Vermont AHEC assessed the ways in which we could contribute to improving community health in our six-county area that match our capacity and skills. In 22 interviews, we asked what were the health and human service sector's greatest challenges, and how could NEVAHEC help. This is what we heard:

- Experienced providers of evaluation services were needed.
- Northeastern Vermont AHEC was considered a trustworthy and experienced resource for evaluation, community health planning, and grant writing, even among those without direct experience with AHEC in this capacity.
- Two requests for Northeastern Vermont AHEC to submit proposals for consulting contracts and 12 requests for follow-up developed as a result of conducting the market needs assessment.