

HRSA Area Health Education Consortium (AHEC) 2017 Competition

Applicant organization: OSU Center for Health Sciences

Due: March 29, 2017

Duration: 5 years (9/1/17 – 8/31/22)

Funding: Approximately \$187,500/Center per year, includes 8% indirect

- 100% match required, 25% in cash (see attached cost allocation document)

Purpose: Develop and enhance health professional education and training networks

AHEC supports 3 overarching goals *emphasizing rural and underserved areas and populations:*

1. **Diversity:** Prepare a representatively diverse, culturally competent primary care workforce
2. **Distribution:** Improve workforce distribution throughout the nation
3. **Practice Transformation:** Develop and maintain a health care workforce prepared to deliver high quality care in a transforming health care delivery system

Educational and Training Activities—

1. **AHEC Scholars Program:** Longitudinal, interdisciplinary curricula implementing clinical, didactic, and community-based training in rural/underserved areas. (see details on next page)
2. **Community-based Experiential Training:** Field placements and clinical rotations for health students outside of AHEC Scholars Program. Each training must be team-based and include a formal, didactic component addressing one or more Core Topic Areas.
3. **Core Topic Areas:** All educational and training activities must support the 6 Core Topic Areas (Youth Pipeline activities exempt.):
 - a. **Inter-professional Education** (i.e., interdisciplinary training) - coordinated, patient-centered model of care involving an understanding of contributions of multiple health professionals
 - b. **Behavioral Health Integration** - development of integrated primary and behavioral health services to better address the needs of individuals
 - c. **Social Determinants of Health** - 5 key areas [Economic Stability, Education, Social and Community Context, Health and Health Care, and Neighborhood and Built Environment]
 - d. **Cultural Competency** - improve individual and community health by training providers to recognize and address diverse cultures, languages, and health literacy
 - e. **Practice Transformation** – training activities for skills needed for quality improvement and patient-centered care, e.g., goal-setting, leadership, practice facilitation, workflow changes, measuring outcomes, adapting tools and processes to support team-based care
 - f. **Current and emerging health issues** (e.g., Zika virus, pandemic influenza, opioid abuse, geographically relevant health issues, etc.) may be proposed
4. **Pipeline Activities:** Recruitment, training, interactive, and/or didactic activities that expose for high school students (grades 9-12) to health careers, including public health. Use no more than 10 percent of the total award for these activities, which may include, but are not limited to -
 - a. Afterschool enrichment activities, community-based outreach and education, pre-college preparation, and pre-certification preparation activities.
5. **Continuing Education:** Recipients must support didactic and experiential training activities focused on the Core Topic Areas developed for currently practicing health professionals. Use no more than 10 percent of the total award for these activities.

AHEC Scholars Program—Requires:

- Collaborative development of curriculum by award recipient, Centers and community partners
- Stipends (max \$2K/student for program duration) to cover
 - living expenses, school supplies, travel/job supplies/needs, e.g., continuing education
- Cohorts of 15-25 new students per Center each academic year
 - Cohorts must be multi-disciplinary, e.g., medicine, allied health, nursing, etc.
- Formal application process with defined eligibility criteria to ensure diversity among Scholars
 - Acceptance should be congruent with existing health professions program requirements
- Cohorts last for minimum of 2 years (with exceptions for health professions programs < 2 years)
- Discipline-specific defined points of entry and exit
- Interdisciplinary learning objectives and outcomes
- Culminate in completion or graduation from a degree or certificate program
- One-year follow-up after graduation or completion of health program
- Strategic partnerships to support successful implementation
- Community-based, experiential, or clinical training in rural and/or underserved setting
 - Minimum of 40 hours must consist of team-based training
- Minimum 40 hours/year of didactic educ. (incl. innovative and/or interactive learning activities)
 - beyond health program requirements and focused on AHEC Core Topic Areas
- Collect and track individual-level data on AHEC Scholars

AHEC Cost Allocation between Centers and Program (Applicant)

HRSA AHEC 9/1/17 - 8/31/22				
PER YEAR		Max per Center	Min to Centers (75%)	Max to Applicant (25%)
Grant funds				
Direct costs		\$ 231,481	\$ 173,611	\$ 57,870
Indirect costs	8%	\$ 18,519	\$ 13,889	\$ 4,630
Grant Total		\$ 250,000	\$ 187,500	\$ 62,500
Match required	100%			
Cash required	25%	\$ 62,500	\$ 46,875	\$ 15,625
Non-cash acceptable	75%	\$ 187,500	\$ 140,625	\$ 46,875
Match Total		\$ 250,000	\$ 187,500	\$ 62,500
GRAND TOTAL		\$ 500,000	\$ 375,000	\$ 125,000

Notes:

1. Centers must have a minimum .75 FTE Center Director
2. In-kind match may include:
 - * in-kind time & effort
 - * unrecovered indirect costs
 - * allowable third-party donated items or services
 - * program income