

ATTACHMENT 1 – Performance Narrative

A. PROJECT IDENTIFIER INFORMATION:

Grant Number: U77HP16459
Project Title: New York State Area Health Education Center (AHEC) System
Grantee: Research Foundation for SUNY, University at Buffalo
Address: Department of Family Medicine, University at Buffalo,
77 Goodell St, Suite 220, Buffalo, NY 14203
Primary Contact: Leishia B. Smallwood, MPA, Director, 716-816-7225, leishias@buffalo.edu
Project Period: September 1, 2017 through April 30, 2018

B. WORK PLAN PROGRESS SUMMARY *Italics=changes from original proposal submission.*

1. Current staffing/Roles and Responsibilities:

a. Statewide Office Key Personnel

Leishia B. Smallwood, MPA, Director/PI (1.0 FTE). Leadership to assure federal/state funding goals consistent with mission and goals at community, regional, statewide and national levels. Facilitates statewide model for strategic planning and collaboration; encourages innovation to meet regional needs; markets AHEC accomplishments and assures evaluation strategy.

Shannon Carlin-Menter, PhD, Evaluation Director (0.50 FTE). Leads program and educational evaluation/research, needs assessment and scholarship initiatives. Co-PI, Western New York Genetics in Research and Health Care Partnership, SEPA, National Institutes of Health.

Daniel Morelli, MD, Medical Director (0.02 FTE In-kind). As Chair, Department of Family Medicine, provides leadership with regional medical directors regarding AHEC strategies to address state and national health care reform initiatives and academic training/admissions policies.

Ranjit Singh, MB BChir, MBA, AHEC Scholars Program Director (0.15 FTE). Oversees AHEC Scholars Program development; participates in medical education curriculum development.

b. Statewide Office/Other Personnel

Andrevia Solomon, Business Operations Manager (1.0 FTE). Oversees statewide budgetary needs and requests; facilitates collaboration with center personnel to ensure timely invoice processing.

Bridget Forshee, MS, Sr. Program Developer (0.60 FTE). Coordinates statewide and regional grant/fund development and required reporting to stakeholders; assist with evaluation of statewide program development and implementation.

Robin Schwartz, Program Specialist (1.0 FTE). Facilitates collaboration with local, regional and statewide community partners and stakeholders; organize organizational advocacy efforts; and coordinate logistical details for system-wide meetings and events.

John S. Taylor, MP, MBA, Development Director (0.15 FTE). Provides essential program start up assistance to the AHEC Scholars Program Director and pursues related external funding critical to the expansion and sustainment of the NYS AHEC System.

Bryan Cacciotti, MP, Fiscal Program Manager (0.15 FTE). Ensures statewide fiscal management, responsibilities, and compliance requirements for all funding sources.

c. Center Key Personnel

All nine NYS AHECs have an executive director at 0.75 FTE or greater who provides overall leadership and management (operations, fiscal, human resources and program); oversees strategic planning and goal setting for organization to fulfill federal/state AHEC requirements; responsible for fund development and sustainability to support existing and new initiatives; and is accountable to Board of Directors.

Bronx-Westchester AHEC: *Nicole Charles, MA, Executive Director (See Attachment 3 for biosketch.)*

Brooklyn-Queens-Long Island AHEC: *Gabrielle Kersaint, MSPH, Executive Director*

Catskill Hudson AHEC: *Robert Wingate, Executive Director*

Central New York AHEC: *Mandy Qualls, MS, CHES, Executive Director (See Attachment 3 for biosketch.)*

Erie Niagara AHEC: *Danise C. Wilson, MPH, Executive Director*

Hudson Mohawk AHEC: *Kathryn Stair, MS, Executive Director (See Attachment 3 for biosketch.)*

Manhattan-Staten Island AHEC: *Mary Mitchell, MPA, Executive Director*

Northern AHEC: *Karin Blackburn, Executive Director (See Attachment 3 for biosketch.)*

Western New York Rural AHEC: *Catherine Huff, CEO*

d. Regional Office Key Personnel

Central Region Office/Upstate Medical University: *Robert Ostrander, MD, Medical Director; Christopher Morley, PhD, Advisor; and Carrie Roseamelia, PhD, Director*

Eastern Region Office /Albany Medical College: *Henry Pohl, MD, Medical Director and Enid Geyer, MLS, MBA, Coordinator*

New York Metropolitan Region Office: *Neil Calman, MD, Medical Director and Maxine Golub, MPH, Director*

- 2. Operations:** There were no significant operational changes during the reporting period. Matching funds from New York State totaled \$1,620,000 for FY17-18 and was approved for upcoming FY18-19.

- 3. Plans for time remaining in current project period: Activities planned, progress expected and anticipated changes.**

Activities will continue as planned, with no anticipated changes. The NYS AHEC System is on target to meet or exceed all annual deliverables outlined in original proposal submission: 1,000 high school students will participate in pipeline activities designed to increase health career exposure; 270 current health professions students will complete community-based experiential learning, with an emphasis on medically underserved areas; 750 current health professionals will participate in continuing education opportunities; formalize and implement the NYS AHEC Scholars Program for current health professions students with a defined set of didactic and community-based training activities in rural and/or underserved areas; and develop and strengthen strategic partnerships to advance the work of the project, including but not limited to expanding diversity, distribution, and practice transformation efforts throughout the state.

- 4. Plans for Upcoming Budget Year/Project Plan with Projected Trainees & Milestones:**

On the following page, the detailed work plan outlines proposed project activities by objective, milestones, and evaluation methods for the upcoming budget year.

Objective 1: Pipeline Activities [Goal 1: Diversity]

To support recruitment of underrepresented minorities/underserved populations into health professions with exposure activities developed for high school students (grades 9-12). [Youth Exposure Programs grades 9 – 12]

Activities	Expected Outcomes	Time Frame	Responsible Party	Evaluation/ Tracking Method
<p>Obj. 1: Provide health career activities and tools to students (grades 9 – 12), targeted at underrepresented minorities and /or students from underserved populations through:</p> <p>a) Unstructured Pipeline Activities such as single exposure health career awareness programs.</p> <p>b) Structured Pipeline Activities such as sequenced and comprehensive health career awareness programs, clubs or camps.</p> <p>c) Pipeline Resources, Tools & Technical Assistance such as the marketing of health career exploration curriculum toolkits; assisting high schools with identifying health workforce gaps in their communities; coordinating summer health career programs; supporting job shadow and mentorship placements; identifying sites for worksite visits; assisting in the recruitment of students into health career related programs; and/or providing online tools for students and teachers.</p>	<p>a) 900 students will complete Unstructured Pipeline Activities.</p> <p>b) 100 students will complete Structured Pipeline Activities.</p> <p>c) Students and teachers will utilize AHEC developed health career related curriculum toolkits; high school students will be connected to job shadow and worksite visit opportunities, as well as mentorship placements; and students and teachers will utilize AHEC developed online health career related tools.</p>	Annually	<p>All Centers:</p> <p><i>Bronx-Westchester AHEC, Brooklyn-Queens-Long Island AHEC, Catskill Hudson AHEC, Central NY AHEC, Erie Niagara AHEC, Hudson Mohawk AHEC, Manhattan-Staten Island AHEC, Northern AHEC and Western NY Rural AHEC</i></p>	<p>Effectiveness Evaluation:</p> <ul style="list-style-type: none">• Baseline individual information and demographics• Reach (target population)• Utilization of curriculum or tools <p>Process Evaluation:</p> <ul style="list-style-type: none">• Continuous quality improvement plan <p>Longitudinal Tracking:</p> <ul style="list-style-type: none">• National Student Clearinghouse Data

Objective 2: Rotations and Community-based Experiential Training [Goal 2: Distribution]

To support community-based experiential training of health profession students in medically underserved communities through field placements and clinical rotations. *[IPE & focus on Core Topics in MUCs]*

Activities	Expected Outcomes	Time Frame	Responsible Party	Evaluation/ Tracking Method
<p>Obj. 2: Collaborate with partners to facilitate community-based experiential training through:</p> <ul style="list-style-type: none">a) Placement of students within Rotations or Internships in MUCs;b) Providing students within Rotations or Internships with a didactic component which covers one or more core topic areas* or Providing students with experiential classroom training that includes a didactic component which covers one or more core topic areas;c) Offering residential housing and/or travel incentives for <i>students</i>. <p><i>*Core Topic Areas include: Inter-professional Education; Behavioral Health Integration; Social Determinants of Health; Cultural Competency; Practice Transformation; and Current and emerging health issues.</i></p>	<ul style="list-style-type: none">a) Place 270 health professions students within field placements and/or clinical rotations.b) Place 125 health professions students within enhanced IPE rotation placements in MUCs that address core topic areas.c) Affordable housing provided to seven health professional students pursuing placements within a rural setting.	Annually	All Centers & Regional Offices (<i>Central: Upstate Medical University; Eastern: Albany Medical College; and NY Metropolitan: Institute for Family Health</i>)	<p>Effectiveness Evaluation:</p> <ul style="list-style-type: none">• Baseline individual information and demographics• Reach (target population)• Site placement demographics• Total Hours in placement and/or training• Training Content and Topics covered• Individual commitment to working in MUCs <p>Process Evaluation:</p> <ul style="list-style-type: none">• Continuous quality improvement plan <p>Longitudinal Tracking:</p> <ul style="list-style-type: none">• National Student Clearinghouse Data

Objective 3: Continuing Education [Goal 3: Practice Transformation]

To support training activities for currently practicing health professionals focused on core topic areas. *[Focus on Core Topic Areas]*

Activities	Expected Outcomes	Time Frame	Responsible Party	Evaluation/ Tracking Method
Obj. 3: Develop, implement or facilitate access to continuing education for current health professionals through workshops, summits, conferences, online modules, distance learning and/or web-based programs that focus on one or more core topic areas.	<ul style="list-style-type: none">• 750 current health professionals will complete CE training.• 150 health professionals will receive enhanced CE training with a focus on core topic areas.	Annually	All Centers & Regional Offices	Effectiveness Evaluation: <ul style="list-style-type: none">• Baseline individual information and demographics• Reach (target population)• Type of training received• Total Hours in training Process Evaluation: <ul style="list-style-type: none">• Continuous quality improvement plan

Objective 4: AHEC Scholars Program [Goals 1, 2 & 3: Diversity, Distribution & Practice Transformation]

To support the development and implementation of a two-year, interdisciplinary program curricula in core topic areas with a defined set of clinical, didactic, and community-based training activities in medically underserved communities for a cohort of inter professional students. [IPE, focus on core topic areas, in MUCs]

Activities	Expected Outcomes	Time Frame	Responsible Party	Evaluation/ Tracking Method
Obj. 4.1: Implement and sustain a two-year, interdisciplinary program curricula with a defined set of clinical, didactic, and community-based training activities in rural and/or underserved areas for a cohort of health profession students and strengthen the health care workforce by supporting an enhanced interprofessional education (IPE) model in MUCs for future healthcare providers to address diversity and distribution with a focus on core topic areas.	<ul style="list-style-type: none">For the 2nd Cohort: recruit 75 students (2 teams per AHEC center)	Student recruitment announced annually	Statewide Office (University at Buffalo) in collaboration with all Centers & Regional Offices	Effectiveness Evaluation: <ul style="list-style-type: none">Baseline individual information and demographicsReach (target population)Site placement demographicsTotal Hours in placement and trainingIndividual commitment to working in MUCs
Obj. 4.2: Develop and maintain strategic partnerships through agreements that define the role of partners, determine engagement strategies, and estimate resources required.	<ul style="list-style-type: none">Each Center will maintain at least six strategic partnerships with community-based health organizations in MUC settings.	Annually	All Centers. Regional Offices & Statewide Office	Effectiveness Evaluation: <ul style="list-style-type: none">Reach (target population)Total strategic partnerships established and maintainedLevel of Community Linkages and Partnerships established and maintained

Objective 5: Connecting Graduates to MUCs [Goal 2: Distribution]

To connect health professional graduates to vacancies in medically underserved communities and raise awareness of debt reduction incentive programs for MUC practice. [MUC Placement]

Activities	Expected Outcomes	Time Frame	Responsible Party	Evaluation/ Tracking Method
Obj. 5.1: Canvass strategic partner employers (FQHCs, other safety net organizations, hospitals) in rural and underserved communities to identify current and upcoming job vacancies that are critically needed.	<ul style="list-style-type: none">Each center will establish and maintain contact with at least 6 strategic partner employers in a MUC setting.	Annually	All Centers, Regional Offices & Statewide Office	Effectiveness Evaluation: <ul style="list-style-type: none">Reach Process Evaluation: <ul style="list-style-type: none">Continuous quality improvement plan
Obj. 5.2: Notify graduates via strategic partner health professional schools (physician residency, nurse, PA/NP, social work, pharmacy or certificate programs) to fill vacancies.	<ul style="list-style-type: none">Each center will notify their respective strategic partner health professional schools with 100% of the vacancies identified by the strategic partner employers in a MUC setting.	Annually	All Centers, Regional Offices & Statewide Office	Effectiveness Evaluation: <ul style="list-style-type: none">Reach Process Evaluation: <ul style="list-style-type: none">Continuous quality improvement plan
Obj. 5.3: Designated Ambassadors will notify health professional students about incentives from state and federal debt reduction programs such as the National Health Service Corps Scholarship Program.	<ul style="list-style-type: none">Each center will designate at least one staff member as an Ambassador.	Annually	All Centers, Regional Offices & Statewide Office	Effectiveness Evaluation: <ul style="list-style-type: none">Reach and Impact Process Evaluation: <ul style="list-style-type: none">Continuous quality improvement plan

Objective 6: Strategic Partnerships [Goals 1, 2 & 3: Diversity, Distribution & Practice Transformation]

To develop and strengthen partnerships for implementing, advancing and sustaining the work of the AHEC Program to support practice transformation, diversity, and distribution of the health care workforce in medically underserved communities. *[in MUCs]*

Activities	Expected Outcomes	Time Frame	Responsible Party	Evaluation/ Tracking Method
Obj. 6.1: Convene New York State AHEC System Advisory Board to advise the New York State AHEC System regarding AHEC's response and roles in addressing issues facing the state's health care system	<ul style="list-style-type: none">Meet two times per year to: Foster community-focused, multi-disciplinary approach in health care training and service delivery in MUCs; Help develop linkages with state agencies, state programs and community resources; and Assist in evaluating the effectiveness of the New York State AHEC System.	Bi-Annually	All Centers, Regional Offices & Statewide Office	Effectiveness Evaluation: <ul style="list-style-type: none">OutcomesReach and Impact Process Evaluation: <ul style="list-style-type: none">Evaluations from Advisory Board members
Obj. 6.2: Develop and maintain strategic partnerships that engage key stakeholders (e.g. federal, state, local and national organizations) in the implementation and advancement of AHEC activities within medically underserved communities.	<ul style="list-style-type: none">Implement and continue to develop strategic partnerships with defined roles of partners, engagement strategies, and estimated resources required, with organizations such as: minority-serving institutions, state-level entities, Health Care Safety Net Sites, and active pipeline programs outside of AHEC.The NYS AHEC System will be marketed to Stakeholders and other partners by defining value propositions, aligning propositions with partners, developing marketing materials, engaging partners, establishing a process for developing and/or sharing partnership successes.	Annually	All Centers, Regional Offices & Statewide Office	Effectiveness Evaluation: <ul style="list-style-type: none">OutcomesReach and Impact Process Evaluation: <ul style="list-style-type: none">Evaluations from Advisory Board members
Obj. 6.3: Invest in the sustainability of the program and continue to diversify funding at the center level and statewide through grants and contracts from provider groups, government agencies and other foundations.	<ul style="list-style-type: none">Expanded funding for issue-focused initiatives (federal, state and local grants and contracts from provider groups, government and foundations).	Annually	All Centers, Regional Offices & Statewide Office	Effectiveness Evaluation: <ul style="list-style-type: none">OutcomesReach and ImpactRecord of grants submitted and grants received.

Objective 7: Statewide Evaluation Activities

To develop and strengthen the activities of the AHEC Program through a comprehensive evaluation plan which will support continuous quality improvement, measure and assess program performance and impact, track progress of goals and objectives, and inform programming decisions.

[Diversity, Distribution & Practice Transformation in MUCs]

Activities	Expected Outcomes	Time Frame	Responsible Party	Evaluation/ Tracking Method
Obj. 7.1: Implement continuous quality improvement plan that will monitor and keep all activities on track in terms of quality implementation, participant/stakeholder satisfaction, and target population reach, recruitment and exposure.	<ul style="list-style-type: none">Activities executed as plannedActivities operationalized in a manner consistent with the AHEC program goals and objectivesPotential obstacles to implementing the program identified and addressed	Quarterly & Annually	Statewide Office in collaboration with all Centers & Regional Offices	Effectiveness Evaluation: <ul style="list-style-type: none">OutcomesReach and Impact Process Evaluation: <ul style="list-style-type: none">Continuous quality improvement planFeedback from stakeholders

ATTACHMENT 2 – Estimated Unobligated Balance

Grant Number: U77HP16459
Project Title: New York State Area Health Education Center (AHEC) System
Grantee: Research Foundation for SUNY, University at Buffalo
Address: Department of Family Medicine, University at Buffalo
77 Goodell St, Suite 220, Buffalo, NY 14203
Primary Contact: Leishia B. Smallwood, MPA, Director, 716-816-7225, leishias@buffalo.edu
Project Period: September 1, 2017 through April 30, 2018

No unobligated balance of funds is expected by the end of the current budget period.

ATTACHMENT 3 – Biographical Sketches for New Key Project Personnel

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77 Goodell St, Suite 220, Buffalo, NY 14203
Primary Contact: Leishia B. Smallwood, MPA, Director, 716-816-7225, leishias@buffalo.edu
Project Period: September 1, 2017 through April 30, 2018

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors.
Follow this format for each person. **DO NOT EXCEED FIVE PAGES.**

NAME: Karin Blackburn

eRA COMMONS USER NAME (credential, e.g., agency login):

POSITION TITLE: Executive Director, Northern Area Health Education Center

EDUCATION/TRAINING *(Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable. Add/delete rows as necessary.)*

INSTITUTION AND LOCATION	DEGREE (if applicable)	Completion Date MM/YYYY	FIELD OF STUDY

A. Personal Statement

I have over 20 years of experience as an administrative professional. Prior to joining the NYS AHEC System, I worked with top-level administrators within academia and developed strong communication, organizational and computer skills. Within my position at St. Lawrence University community, I provided administrative support to the Vice President of the University and Dean of Academic Affairs, the Associate Dean for Faculty, and the Associate Dean of Academic Administration and University Registrar. My responsibilities included coordinating and facilitating a number of different programs such as: the Summerterm Program, the SLUSEP (St. Lawrence University Scholars Enrichment Program). I served as an Event Coordinator for Academic Events and Lectures dealing with topics such as: Contemporary Issues, Piskor Lecture, Crimmel Colloquium, Festival of Scholarship & Creativity. Currently, I volunteer as the Event Coordinator for Believe NNY, where we educate people about the risks of cancer and PTSD to emergency responders, as well as provide education on different resources available to members of the emergency services community. I am also an active community member within my rural community of Canton NY, as an at-large member of the Comprehensive Plan Committee in which we are working together to develop a Comprehensive Plan for Canton that will guide Canton's long-term vision and provide a framework for making our vision a reality. I joined the NYS AHEC System in 2017 as a Center Director and have a keen interest in improving public health of underserved populations, educating health professionals about social determinants of health, and helping to improve access to healthcare within my AHEC Center's rural areas.

B. Positions and HonorsPositions and Employment

1994 – 1999	Administrative Support, Various Positions
1999 – 2001	Donor Relations Administrative Support, St. Lawrence University, Canton, NY
2001 – 2005	Human Resources Administrative Support, St. Lawrence University, Canton, NY
2005 – 2017	Executive Admin. Academic Dean's Office, St. Lawrence University, Canton, NY
2017 – present	Center Director, Northern Area Health Education Center, Inc., Canton, NY

C. Contributions to Science: Not Applicable.

D. Additional Information: Research Support and/or Scholastic Performance: Not Applicable.

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors.
Follow this format for each person. **DO NOT EXCEED FIVE PAGES.**

NAME: Nicole Y. Charles, MS

eRA COMMONS USER NAME (credential, e.g., agency login):

POSITION TITLE: Executive Director, Bronx-Westchester Area Health Education Center

EDUCATION/TRAINING *(Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable. Add/delete rows as necessary.)*

INSTITUTION AND LOCATION	DEGREE (if applicable)	Completion Date MM/YYYY	FIELD OF STUDY
College of New Rochelle, New Rochelle, NY	B.A.	05/2012	Social Science
Georgian Court University, Lakewood, NJ	M.A.	12/2014	Integrative and Holistic Health Studies

A. Personal Statement

Born and raised in the Bronx, I was unanimously appointed by the board of directors as the Executive Director of Bronx Westchester Area Health Education Center (member of the National AHEC Organization) in January 2018. I have since forged a partnership agreement with the City University of New York Institute for Health Equity thereby expanding the reach and depth of BWAHEC. I am passionate about empowering students to realize their potential and the power they hold – teaching health education through the lens of health justice and empowering students to discover the world through their communities in order to make effective and impactful change beginning with their self and family.

B. Positions and HonorsPositions and Employment

2010-2013	Administrator, Pratt Institute, Brooklyn, NY
2013-2016	Assistant Director and Academic Advisor, Maryland University of Integrative Health, Laurel, MD
2017	Program Manager, Manhattan Staten Island AHEC, New York, NY
2017	Director of Programs, Bronx-Westchester AHEC, Bronx, NY
2017-Present	Adjunct Faculty, Lehman College, Bronx, NY
2018-Present	Executive Director, Bronx-Westchester AHEC, Bronx, NY

C. Contributions to Science: Not Applicable.

D. Additional Information: Research Support and/or Scholastic Performance: Not Applicable.

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors.
Follow this format for each person. **DO NOT EXCEED FIVE PAGES.**

NAME: Mandy Qualls, MS, CHES

eRA COMMONS USER NAME (credential, e.g., agency login):

POSITION TITLE: Executive Director, Central New York Area Health Education Center

EDUCATION/TRAINING *(Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable. Add/delete rows as necessary.)*

INSTITUTION AND LOCATION	DEGREE (if applicable)	Completion Date MM/YYYY	FIELD OF STUDY
East Central University, Ada, OK	B.S.	12/2002	Education-Athletic Training
University of Oklahoma, Norman, OK	M.S.	05/2005	Health and Exercise Science

A. Personal Statement

I combine my health education/health promotion background and writing skills and put them into practice in multiple outlets, including overall program management, media relations, and creating content for websites and social media. I have wanted to be a professional in the health field since I was a small child. I have dedicated my life to studying and sharing knowledge of health behaviors, trends in public health, and addressing the healthcare workforce needs of the future. True change cannot be achieved without knowledge, advocacy, and behavior change, and I apply these principles to any program I manage.

B. Positions and HonorsPositions and Employment

1997-2003	Administrative Assistant, Britton Vision Associates
2003-2005	Graduate Teaching Assistant, University of Oklahoma, Norman, OK
2005-2007	Health Mentor, Employees Benefits Council
2007-2015	Communications Supervisor, Oklahoma City County Health Department
2015-2016	Communications Manager, Central New York AHEC
2016-2017	Associate Director, Central New York AHEC
2017-Present	Executive Director, Central New York AHEC

C. Contributions to Science: Not Applicable.

D. Additional Information: Research Support and/or Scholastic Performance: Not Applicable.

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors.
Follow this format for each person. **DO NOT EXCEED FIVE PAGES.**

NAME: Kathryn Stair, MS

eRA COMMONS USER NAME (credential, e.g., agency login):

POSITION TITLE: Executive Director, Hudson Mohawk Area Health Education Center

EDUCATION/TRAINING *(Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable. Add/delete rows as necessary.)*

INSTITUTION AND LOCATION	DEGREE (if applicable)	Completion Date MM/YYYY	FIELD OF STUDY
Marist College, Poughkeepsie, NY	B.A.	05/2004	Communications
Sage Graduate School, Troy, NY	M.S.	05/2014	Organization Management

A. Personal Statement

With over 15 years of progressive nonprofit experience, I joined Hudson Mohawk AHEC with a background in nonprofit administration, organization management and program development. My direct experience includes: strategic planning, grant writing, fundraising, board development, program analysis, evaluation and report, and marketing.

B. Positions and HonorsPositions and Employment

2004-2005	Executive Assistant, Maranatha Human Services, Inc., Poughkeepsie, NY
2005-2007	Development Coordinator, Maranatha Human Services, Inc., Poughkeepsie, NY
2007-2010	Director of Program Development, Commission of Economic Opportunity, Troy, NY
2010-2012	Director of Program Planning and Evaluation, Commission of Economic Opportunity, Troy, NY
2012-2015	Director of Strategic Planning, Commission of Economic Opportunity, Troy, NY
2015-2017	Chief Planning Officer, Commission of Economic Opportunity, Troy, NY
2018-Present	Executive Director, Hudson Mohawk AHEC, Glens Falls, NY

C. Contributions to Science: Not Applicable.

D. Additional Information: Research Support and/or Scholastic Performance: Not Applicable.

ATTACHMENT 4 – Updated Project Abstract

Grant Number: U77HP16459
Project Title: New York State Area Health Education Center (AHEC) System
Grantee: Research Foundation of SUNY, University at Buffalo (UB)
Address: Dept. of Family Medicine, UB, 77 Goodell St, Suite 220, Buffalo, NY 14203
Primary Contact: Leishia B. Smallwood, MPA, Director, 716-816-7225, leishias@buffalo.edu
Project Period: September 1, 2017 through April 30, 2018

Overall Purpose/Goals: The overall purpose of the New York State AHEC System is focused on the shortage of health care professionals and lack of diversity in the health workforce via strategies that enhance access to quality health care and improve health care outcomes by addressing the health workforce needs of medically disadvantaged communities and populations. Through community-academic partnerships, the New York State AHEC System cultivates a skilled, culturally diverse workforce to assure that each community has access to primary care from practitioners whose backgrounds reflect the racial, ethnic, and socioeconomic composition of the state's population. The New York State AHEC System will continue to utilize a process-impact approach to evaluate the success of its programs and short-term, intermediate and long-term outcomes.

Goals/objectives:

- ***Diversity:*** Prepare a diverse, culturally competent primary care workforce representative of the communities served;
- ***Distribution:*** Improve workforce distribution, particularly within medically underserved communities (MUCs); and
- ***Practice Transformation:*** Develop and maintain a healthcare workforce that is prepared to deliver high quality care in a transforming healthcare delivery system with an emphasis on MUCs.

Methodology/Activities: The NYS AHEC System has nine local centers based in rural and urban communities: Bronx-Westchester AHEC, Brooklyn-Queens-Long Island AHEC, Catskill Hudson AHEC, Central New York AHEC, Erie Niagara AHEC, Hudson Mohawk AHEC, Manhattan-Staten Island AHEC, Northern AHEC and Western New York Rural AHEC. NYS AHEC activities include:

- *Pipeline Activities:* health care career exposure programs for students in grades 9-12;
- *Rotations and Community Experiential Training:* for current health professions students;
- *Continuing Education:* for practicing health professionals focusing on Core Topic Areas;
- *NYS AHEC Scholars Program:* a two-year IPE program focused on Core Topic Areas;
- *Connecting Graduates to MUCs:* connection of graduates to job opportunities in MUAs;
- *Development and Strengthening of Strategic Partnerships:* for program advancement; and
- *Statewide System Enhancement:* informed by program process evaluation.

Milestones: During the course of the project reporting period (September 1, 2017 through April 30, 2018), the NYS AHEC System proudly provided:

- Over 6,600 students in grades K-12 with exposure programs increasing awareness and promotion of health care careers;
- Nearly 460 health professional students in medicine, nursing, physician assistant, medical technology, and psychology with rotations or other community-based experiential learning totaling over 61,580 hours.
- Over 390 Continuing Education programs, including workshops, seminars, conferences, and online training, to roughly 36,700 current health professionals with topics addressing cultural competency, health literacy, quality improvement, patient safety, leadership development, and health information technology.

ATTACHMENT 5 – Supplemental Performance Narrative

Grant Number: U77HP16459
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A) AHEC Scholar Selection Criteria

All NYS AHEC Scholars participants will be recruited from schools with which an AHEC center has established a formal strategic partnership. For schools that offer an associate's degree (typically allied health programs such as practical nursing, dental assistant, health information technology, etc.) students will be recruited during their first year of enrollment. For academic institutions that offer a baccalaureate degree, students will be recruited during their junior and senior years. For graduate programs, with the exception of medical programs, candidates will be recruited during the last two years of their program. For medical degree programs, students will be recruited during their first two years of school, as the last two years of medical school do not provide sufficient time for program participation due to clinical service requirements.

The NYS AHEC Statewide Office, in collaboration with all nine centers, developed a standardized application for AHEC Scholars candidates. (A copy of the NYS AHEC Scholar Student Application can be found in [Appendix 1](#) on page 6). The application is available online through each of the center's webpages, as well as the NYS AHEC System website. The AHEC Scholar student application collects all necessary demographic information requested by HRSA, including but not limited to race, gender, ethnicity, date of birth, academic enrollment status and major, and candidate background. Applicants must also answer questions related to intent to practice in rural, underserved, or primary care settings. All candidates must further provide a letter of reference from a teacher, faculty member, community leader, or mentor demonstrating specific examples and anecdotes that illustrate their ability to be a successful AHEC Scholar. Finally, applicants must also submit an essay detailing why they would like to participate in the program, and how the program will support their academic/career goals.

Incomplete applications will not be reviewed. An admissions committee comprised of representatives from the Statewide Office, each AHEC Center, and associated faculty from strategic partner academic institutions will select final participants. NYS AHEC Scholar candidates will be assessed on their desire/willingness to work with underserved populations, and their desire and capacity to commit to all program expectations, as demonstrated by their letters of recommendations and essay. Priority will be given to candidates from minority and/or underserved populations, as determined by their race, ethnicity, and socioeconomic background. There will be no variation in selection or admissions criteria as a result of variance in type of health profession program enrollment.

B) Statewide Evaluation Efforts

The Statewide Evaluation Team is working closely with the NYS AHEC System Data and Evaluation Committee to plan and implement the Statewide Evaluation. The Data and Evaluation Committee is comprised of at least one representative from each of the nine Centers and three Regional Offices (RO), and includes the Statewide Office's Director of Evaluation, Sr. Program Developer, and Program Specialist. This collaboration ensures that the assessment and evaluation of all Center/RO level activities are aligned with the mission, goals and objectives of NYS AHEC Program. The purpose of this committee is to:

- 1) maintain and improve the quality standards for data collection and reporting at the Center/RO levels;
- 2) assess the usability, cost-effectiveness and alignment with the evaluation plan with current and proposed database and data tools for the System;
- 3) provide direction and technical assistance to their respective Center/RO staff on the Statewide Evaluation Plan (i.e. data collection and interpretation of results for decision-making); and
- 4) identify and resolve any issues at the Center/RO level pertaining to data collection, quality, tracking, reporting, and/or analysis.

We are taking a collaborative and participatory approach to statewide evaluation that involves the Data and Evaluation Committee and the Statewide NYS AHEC Evaluation Team. This collaboration will be based on respect for one another's roles and provide an equal partnership in the process of evaluation. We will assure that everyone within the system, including top-level leadership, understand the following key evaluation concepts: the definition of outcomes-based assessment, evaluation and its necessity; the connection of evaluation to planning; how to use the results both as a practitioner (e.g., administrator or instructor) and as a leader; and how to connect evaluation results to external benchmarks or indicators of success. Given that resources are limited at the Center/RO levels, the Statewide NYS AHEC Evaluation Team will provide technical assistance to all Centers/RO staff. This will include information on all aspects of the outcomes-based assessment process and one-on-one assistance with data documentation.

The Statewide Evaluation Plan is based on the RE-AIM Framework, which is well matched to inform the specific needs of the NYS AHEC System Program including the centers, regional offices, partners, policy makers and funders.^{1, 2} RE-AIM provides a comprehensive framework to assess programs that work in real-world settings. The RE-AIM model in Table 1 consists of five evaluative dimensions that describe the overall population-based impact of an intervention: Reach, Efficacy, Adoption, Implementation, and Maintenance.

Table 1 – The RE-AIM Framework		
Dimension	Definition related to objectives	Evaluation Questions related to objectives
<u>Reach</u>	Participation rate within the target population and the characteristics of participants versus non-participants.	Are the activities reaching the intended target populations? Are the activities serving the needs of the local communities?
<u>Effectiveness</u>	The impact of an activity on specified outcome criteria (when it is implemented as intended).	What are the immediate, intermediate and longterm impacts of the activities (both anticipated and unintended consequences)?
<u>Adoption</u>	The percentage and representativeness of organizations that have adopted a given program.	Are the stakeholders willing to adopt the program/activities (i.e. AHEC Scholars Program & Continuing Education)?
<u>Implementation</u>	Intervention integrity, or the quality and consistency of delivery.	Were the activities implemented as intended? Was it cost-effective?

¹ Glasgow, R. E., Vogt, T. M., & Boles, S. M. (1999). Evaluating the public health impact of health promotion interventions: the RE-AIM framework. *American journal of public health*, 89(9), 1322-1327.

² Glasgow, R. E., Klesges, L. M., Dzewaltowski, D. A., Estabrooks, P. A., & Vogt, T. M. (2006). Evaluating the impact of health promotion programs: using the RE-AIM framework to form summary measures for decision making involving complex issues. *Health education research*, 21(5), 688-694.

<u>Maintenance</u>	Individual level refers to how well behavior change efforts hold up in the long term. Organizational level refers to the extent to which a practice becomes institutionalized as a routine part of usual care.	Is the activity sustainable in a cost-effective way? Did the participant maintain their change in behavior and/or intention? Did the partner maintain their change in practice?
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The RE-AIM framework offers a comprehensive approach to considering dimensions that are important for evaluating the impact of the NYS AHEC activities on the overarching goals of Diversity, Distribution and Practice Transformation. RE-AIM allows for meaningful and frequent monitoring of ongoing processes, outcomes of implemented activities and curriculum, and progress towards meeting program goals and objectives. As shown in Table 2, the Statewide Evaluation Plan will be driven by each of the RE-AIM quality dimension levels. Table 2 also illustrates the type of measures that will be utilized to assess each dimension, the data sources that will be collected, and the data collection timelines.

Table 2 – The RE-AIM Framework for the Statewide Evaluation Plan			
Dimension level	Measures	Data Sources	Collection Timelines
<u>Reach</u>	<ul style="list-style-type: none"> Eligibility criteria for participants Method of recruitment Number & representativeness of participants and/or partners The extent to which the target population is reached and represented 	<ul style="list-style-type: none"> Participant & activity tracking system (AHEC Tracker) Survey items Interview Data Document Review 	<ul style="list-style-type: none"> Baseline Ongoing Midpoint Post-activity
<u>Effectiveness</u>	<ul style="list-style-type: none"> The impact on attitude, knowledge and/or behavior (including negative and unanticipated consequences) 	<ul style="list-style-type: none"> Pre & Post Surveys Document review (budgets & invoices) AHEC Tracker Site, Activity & Participant Data Activity reflections by participants, those who implemented the activity and/or partners Public data sources to help quantify change (i.e. National Student Clearinghouse) 	<ul style="list-style-type: none"> Baseline Ongoing Midpoint Post-activity
<u>Adoption</u>	<ul style="list-style-type: none"> # and % of sites/partners that participate Degree to which the settings (sites) are representative of target population 	<ul style="list-style-type: none"> Percentage of key stakeholders who are involved (planning stage) Interviews & Surveys to see which partners maintained any changes 	<ul style="list-style-type: none"> Baseline Ongoing Midpoint Post-activity
<u>Implementation</u>	<ul style="list-style-type: none"> Consistency of implementation across staff/time/settings/groups 	<ul style="list-style-type: none"> Document review (agendas, curriculum, lesson plans, tools/materials) 	<ul style="list-style-type: none"> Baseline Ongoing Midpoint Post-activity

	<ul style="list-style-type: none"> Fidelity of the various elements of the activity protocol and consistency of delivery as intended Time/Cost of implementation (are the ongoing costs sustainable?) 	<ul style="list-style-type: none"> AHEC Tracker Site, Activity & Participant Data Interviews (Perception of implementation such as barriers and/or factors that supported effectiveness) Observations of the activity Document review (budgets, invoices, staff time/effort, space requirement) Activity reflections (participants, partners & AHEC Staff) 	
Maintenance	Changes in behaviors that are maintained over time	<ul style="list-style-type: none"> Interviews (participants & partners) Surveys (participants & partners) 	<ul style="list-style-type: none"> Post-activity

The results of the Statewide Evaluation Plan will contribute to our overall knowledge of the broader impact of our activities. The Evaluation Team at the Statewide Office will work directly with the Data & Evaluation Committee. Together, they will undertake a broad mixed-methods approach to analysis, utilizing the evaluation questions related to the RE-AIM framework to direct the analysis of the data. Results of the analysis will be reported annually to HRSA within the Evaluation Report, which will be submitted as an attachment to the Annual Noncompeting Continuation Application.

Software. 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.

Data Collection. 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 four 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."

NYS AHEC Scholars Program

SAMPLE Student Application



Please apply online: https://www.surveymonkey.com/r/NYSAHEC_Scholars

Confidentiality Statement

As an applicant, all information you share about yourself will be kept confidential. NYS AHEC is required to report general demographic information about participants in the categories within this application. This data will be confidentially maintained and will be referenced periodically to evaluate the effectiveness of AHEC services and programs. We appreciate your cooperation in the completion of this form.

Before you begin filling out this application, please make sure you have the following two documents ready to upload as .doc, .docx or .pdf files:

① ESSAY: We would like to get to know you through this application and believe that a thoughtful, well-constructed essay is an important step in the process. As a general guideline, the length of your application essay should be a minimum of 300 words. Within your essay, please respond to the following questions:

Why you would like to participate in the NYS AHEC Scholars program?

How will the NYS AHEC Scholars Program benefit you in accomplishing your academic and/or career goals?

② Letter of Recommendation: Stories about your behaviors, impact, and personal qualities told by others play an essential role in the evaluation of your application. Your letter of reference should provide specific examples and anecdotes that illustrate your ability and desire to be an AHEC Scholar. Please attach one letter of reference from a teacher, faculty member, community leader, mentor, etc., and provide your reference's contact information.

The completion of the online application is estimated to take 8 - 10 minutes.

STUDENT CONTACT INFORMATION

First Name:		Last Name:		Date of Birth: mm/dd/yyyy	
Street Address:		City:		State:	ZIP Code:
Permanent Address (if different):		Permanent City:		State:	ZIP Code:
Cell Phone Number:		Email Address:		Secondary Email Address:	

STUDENT DEMOGRAPHIC INFORMATION

What is your GENDER?

☐ Male
 ☐ Female
 ☐ Other: _____

Which best describes your RACE? *(Choose all that apply)*

- ☐ African American/Black
- ☐ American Indian /Alaskan Native
- ☐ Asian
- ☐ Native Hawaiian/Other Pacific Islander
- ☐ White
- ☐ Other: _____

Are you Hispanic or Latino?

☐ Yes
 ☐ No

Are you a VETERAN?

☐ Yes*
 ☐ No

Do you speak any languages other than English?

☐ No
 ☐ YES*

*If Yes, please specify:

Name of High School attended: _____

High School Graduation Year:

City: _____ State: _____

While growing up, did you live in a Rural area? For example, in a town with a population of less than 2,500 people.

☐ Yes
 ☐ No
 ☐ I'm not sure

While growing up, did you or your family use federal or state assistance programs? Examples of programs include: free or reduced school lunch, subsidized housing, food stamps, Medicaid, etc.

☐ Yes
 ☐ No
 ☐ I'm not sure

Have you had or do you currently receive a scholarship or loan for disadvantaged students?

☐ Yes
 ☐ No
 ☐ I'm not sure

CURRENT SCHOOL INFORMATION

What College/University/Community College will be you attending as of September 1, 2018?

School Name: _____

City: _____ State: _____

Anticipated Graduation Date:

(MM/YY) _____

As of September 1, 2018, which category below best defines the type of program you will be enrolled in?

- ☐ Certificate or Associate's Degree program
☐ Undergraduate or Bachelor's Degree program
☐ Graduate program or Master's/PhD degree program
☐ Medical School or MD/DO
☐ Other (if other, *please specify*) _____

Are you the first generation in your family to attend college?

☐ Yes ☐ No

Were you or will you be the first in your family to receive a bachelor's degree?

☐ Yes ☐ No

Year in Program as of September 1, 2018:

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ Other: _____

What is the name of the program you will be enrolled in? (*i.e. Sociology, Public Health, Nurse Practitioner, Physician Assistant, etc...*)

Do you have a Faculty Advisor?

☐ Yes* ☐ No ☐ Don't know

* If Yes: What is your Faculty Advisor's Information?

First Name: _____ Last Name: _____

e-mail: _____ phone: _____

INTENT TO PRACTICE

Do you intend, plan, or would like to **work in a primary care setting**?

Examples include: a clinic for Family Medicine, General Internal Medicine, or General Pediatrics.

☐ Yes ☐ No ☐ Undecided/Unknown

Do you intend, plan, or would like to **enter a health career as a primary care clinician**? *Examples include: Family Medicine, General Internal Medicine, General Pediatrics, nurse practitioner, or physician assistant, etc..*

☐ Yes ☐ No ☐ Undecided/Unknown

Do you intend, plan, would like to **work with people who are medically underserved**, that is people who face economic, cultural, or linguistic barriers to healthcare?

☐ Yes ☐ No ☐ Undecided/Unknown

Do you intend, plan, or would like to **work in a rural area**? *Example: a town with a population less than 2,500 people.*

☐ Yes ☐ No ☐ Undecided/Unknown

Two (2) Attachments to upload (.doc, .docx or .pdf files only)

1) Application ESSAY Instructions:

We would like to get to know you through this application and believe that a thoughtful, well-constructed essay is an important step in the process. As a general guideline, the length of your application essay should be a minimum of 300 words. Within your essay, please respond to the following questions:

- **Why you would like to participate in the NYS AHEC Scholars program?**
- **How will the NYS AHEC Scholars Program benefit you in accomplishing your academic and/or career goals?**

☐ attach file (Please attach .doc, .docx or .pdf files only)

2) LETTER OF REFERENCE:

Stories about your behaviors, impact, and personal qualities told by others play an essential role in the evaluation of your application. Your letter of reference should provide specific examples and anecdotes that illustrate your ability and desire to be an AHEC Scholar.

Please attach one letter of reference from a teacher, faculty member, community leader, mentor, etc., and then provide your reference's contact information below.

☐ attach file (Please attach .doc, .docx or .pdf files only)

Reference Information:

Name: _____

Relationship: _____

e-mail address: _____

Phone Number: _____

How did you hear about this program?

☐ Email Contact

☐ Class Presentation/School Visit

☐ AHEC Web Site

☐ College or University

☐ Recruitment Flyer

☐ Other Student

☐ Faculty/Advisor

☐ Other: _____

TERMS and RESPONSIBILITIES

Please check each box to certify your understanding of the criteria for the NYS AHEC Scholars program.

☐ I understand that the NYS AHEC Scholars program is a two-year longitudinal program.

☐ I agree to commit a minimum of 2 hours per week (on average) toward required program activities.

☐ I will complete all necessary forms, training, etc. associated with the NYS AHEC Scholars Program.

Acknowledgment:

I understand and agree to the above student terms and responsibilities. I understand that if my application is approved, I will be assigned a site in either a rural or urban community. I also understand that I am responsible for providing my own transportation to and from the placement site while completing the program. As part of the program, I agree to provide one-year follow-up demographic and employment information following program completion. I understand that failure to complete all necessary activities will result in the termination of my participation, and such termination will disqualify me for any program participation incentives.

Signed: [type full name] _____

Date: [date submitted] _____