

# Outcome Evaluation of Health Careers Promotion Programming Methods for Data Collection and Tracking of Participants

## HRSA A-TrACC Webinar 105

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# HRSA A-TrACC

**What does it stand for?** The HRSA AHEC-Training and Consultation Center (HRSA A-TrACC)

**What is it?:** A contract with the National AHEC Organization (NAO) issued by HRSA

US. Department of Health and Human Services (HHS)

Health Resources and Services Administration (HRSA)

Bureau of Health Professions (BHPPr)

Division of Public Health and Interdisciplinary Education (DPHIE)

Area Health Education Center (AHEC) Branch

AHEC Training and Consultation Center (A-TrACC)

**Why is it?:** The purpose of A-TrACC is to provide ongoing technical assistance to the national network of AHEC programs and their affiliated centers with the objective of identifying and enhancing performance measures and data collection efforts of the individual grantees and the National AHEC Program.

# Webinar Outline

- Strategies for gathering HRSA annual required performance measures
- Strategies for gathering short-term, intermediate, and long-term outcomes
  - Number of AHEC pre-professional participants who
    1. Increased their knowledge of health careers (short-term)
    2. Declared their intention to pursue a health career (short-term)
    3. Matriculated into health professions training programs during the reporting year (intermediate)
    4. Completed health professions training programs during the reporting year (long term)
    5. Began practicing in an underserved area during the reporting year (long term)
  - Within each Category:
    - Current methods used by program offices and centers
    - More in-depth discussion of some methods
    - Challenges and successes in gathering data in the everyday environment
    - Strategies for integrating/extracting outcome/impact stories into/out of the evaluation process
- Other evaluation elements to consider in assessing your programs' effectiveness

# Strategies for gathering HRSA annual required performance measures

The performance report HRSA requires for the Health Careers Promotion/Preparation/Enrichment/Pipeline Programs asks for the following data:

- K-12 student, parent, teacher/counselor contacts (Gen 2)
- Numbers of K-8, 9-12, college participants by:
  - hours (DSCPH 4, LR-1, DV-1a&b, DV-2)
  - Age and gender(LR-2)
  - ethnicity (DV-1a&b)
  - disadvantage status (DV-2)

# Strategies for gathering

## HRSA annual required performance measures

### Two approaches to data collection:

1. *Centers collect program participant forms* and enter them on a web/server accessible database *governed by the program office* that aggregates the data for the reports.

#### Pros

- Program office can review data entry at any time and trouble shoot data entry difficulties easily
- Program office can access current data and compile reports at any moment
- Updates are done on only one database
- Uniform data entry methods established
- Students that complete programs at more than one center can be seamlessly tracked in database
- Student information can be easily generated by Program office for tracking surveys

#### Cons

- Programs with numerous centers can make confirmation of all of the data being accurate and up to date difficult
- Web or server based technical issues can disrupt access for everyone
- One database may have to have large amounts of pages/forms that may not be necessary for each center. Data entry can be confusing
- Multiple data entry users may make data inconsistent with other users
- Depending on the database, needed updates may take a long time

*Some variations occur where the data forms are sent to the program office to be entered into the database.*

# Strategies for gathering HRSA annual required performance measures

2. *Centers have their own database* which they populate and *export bulk datasets to the program office* that compiles the report and submits to HRSA.

## Pros

- Centers can review data compiled to confirm that all the data has been entered
- Centers can utilize a database better that they can alter to meet their needs
- Data entry may be easier
- Database updates could be quick

## Cons

- Program office cannot review data being entered for accuracy
- If centers will be compiling the report, they would each need to understand the HRSA report to send to the program office
- Changes in the HRSA reporting measures can significantly complicate the process
- They may double count programs if they are jointly conducted by multiple centers.
- Can be difficult with Program Offices with 5+ centers.

# Strategies for gathering HRSA annual required performance measures

How do you find out if someone is disadvantaged?

If they have an Economically or Educationally disadvantaged background

## Economically Disadvantaged

Generally questions about household income (poverty) guidelines are not asked/answered (here is the site if you would like to know what they are

<http://aspe.hhs.gov/poverty/10poverty.shtml>)

## Educationally Disadvantaged

Many AHECs simply look at the high school district using the following three standards to determine educational disadvantaged status:

- 1. Greater 30% of students receiving Free/Reduced Lunch**
- 2. Less than 50% going to college**
- 3. Below average SAT scores for the state**

# Strategies for gathering HRSA annual required performance measures

## Educationally Disadvantaged continued . . . .

There are three other criteria for educationally disadvantaged status personal to the student, but they are often less likely to be indicated.

From the federal definition: *An individual who comes from an environment that has hindered the individual in obtaining the knowledge, skills and abilities required to enroll in and graduate from a health professions school.*

The following are provided as examples of "Educationally Disadvantaged" for guidance only and are not intended to be all-inclusive.

- 4. Person who has a diagnosed physical or mental impairment that substantially limits participation in educational experiences.**
- 5. Person for whom English is not his/her primary language and for whom language is still a barrier to their academic performance.**
- 6. Person who is first generation to attend college and who is from a rural or urban area or receives public assistance.**

# Strategies for gathering HRSA annual required performance measures

QUESTIONS???



# Strategies for gathering Short-Term Outcomes

## *Current Methods Used By Program Offices and Centers*

### **Outcome 1: Increased their knowledge of health careers**

- Assumed from program participation but not actually measured
- End of program survey
- Center developed pre/post survey
- Program Office standardized pre/post survey

### **Outcome 2: Declared their intention to pursue a health career**

- Assumed from enrollment in program but not formally measured
- Each center tracks own participants
- Included in application/registration to program
- Center developed pre/post survey
- Program Office standardized pre/post survey

***Often information on these outcomes is collected but is not linked to participant demographic data (age, sex, race/ethnicity and disadvantaged status)***



# Strategies for gathering Short-Term Outcomes

## *Example of a Program Office Standardized Survey and Method for Linking to Demographic Data*

- Pre-/post-evaluation instruments templates for middle school, high school, college/internship
- Components:
  - 10-15 item knowledge tests (statewide test banks developed with objective questions)
  - Health professions checklist
  - Program evaluation questions
  - Excel spreadsheets for data entry

# NYS AHEC System Standardized Pre/Post Survey

Survey Item	On Pre Test	On Post Test	Modified short Post Test	In the Pipeline Report
•Have you participated in other programs related to math, science, etc?	X			X
•How likely are you to pursue a career in Health Care?	X	X	X	X
•What 5 careers could you see yourself doing in the future?	X	X	X	X
•10-15 item knowledge test	X	X		X
•Program Evaluation:				
•This program met my <i>needs</i> .		X	X	X
•I found the activities/presentations/internship <i>interesting</i> .		X		X
•I learned a lot about <i>health care professions</i> .		X		X
•I learned about different <i>health topics</i> .		X		X
•The activities/presentations/internship are <i>helpful to someone thinking about working</i> in the health care field.		X		X
•After this experience, I am more <i>interested in working in health care</i> .		X	X	X
•After this experience, I am more <i>interested in working in the field(s)</i> I learned about in this program.		X	X	X
•I would <i>consider working at the facility</i> where I attended this program someday.		X	X	X
•I would <i>recommend</i> this program to others.		X	X	X
•What did you <i>Like</i> about this program?		X		X
•What did you <i>Dislike</i> about this program?		X		
•What <i>changes</i> would you recommend for next year?		X		X
•What was <i>most important</i> thing learned?		X		
•Future Planning:				
•More programs on health care professions.		X	X	X
•A copy (or CD) of a career guide.		X	X	X
•Information on what courses to take in school.		X	X	X
•Information on college and graduate-level health professions programs.		X	X	X
•Visit a college with other students in this program.		X	X	X
•Information on financial aid for college.		X	X	X
•A summer work experience in healthcare.		X	X	X
•Other ideas. (Please explain)		X	X	X
•Other AHEC specific evaluation questions - to be added by center		optional	optional	



# Strategies for gathering Short-Term Outcomes

## *Example of a Program Office Standardized Survey*

*Standardized Pre/Post allows AHECs to present aggregate data from all centers*

### Standardized Pre/Post Program Survey Components:

1. Participated in **other math/science programs?**
  - Allows you to determine if even students with previous exposures increased their knowledge/intent
2. **Likelihood of pursuing health career**
  - Asked both pre and post program to determine if program increased likelihood
3. **Select 5 careers you see yourself doing in the future**
  - Can compare this pre/post to determine if there were changes in intended careers. Changes may be related to program content.
4. **10-15 item knowledge test**
  - Tailored specifically to the program
  - Questions pulled from central “test bank” that includes selection and true/false questions appropriate to different reading levels. Centers can add questions to test bank if questions don’t meet their needs.
  - Administered on first and last day of program to determine change in knowledge
  - Pre/Post scores compared by independent and paired-samples t-test to determine whether a change in knowledge occurred and whether it was statistically significant on an aggregate as well as individual level.



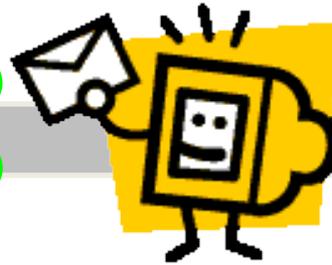
# Strategies for gathering Short-Term Outcomes *Example of a Program Office Standardized Survey From Program to Report*



Pipeline participants complete evaluations, Centers determine whether program has evaluation



AHEC Center enters data in standardized Excel database along with ***Unique Tracking ID # from web-based database***



Data emailed to Statewide Program Office by Jan 15 for entire previous year's programs



Data is combined, cleaned, ***linked to web-based database demographic data*** and analyzed



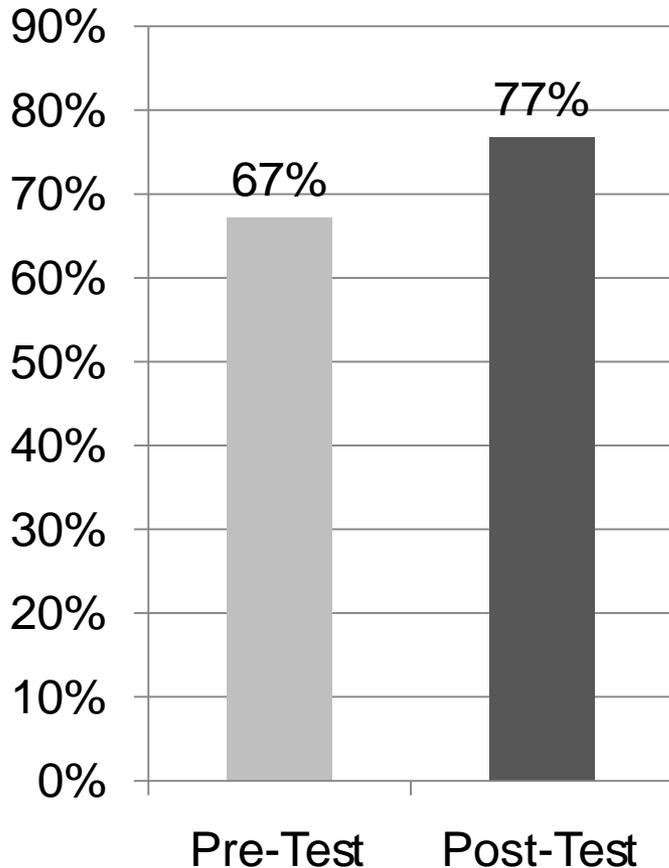
Evaluation report is generated and distributed to all centers and posted on website



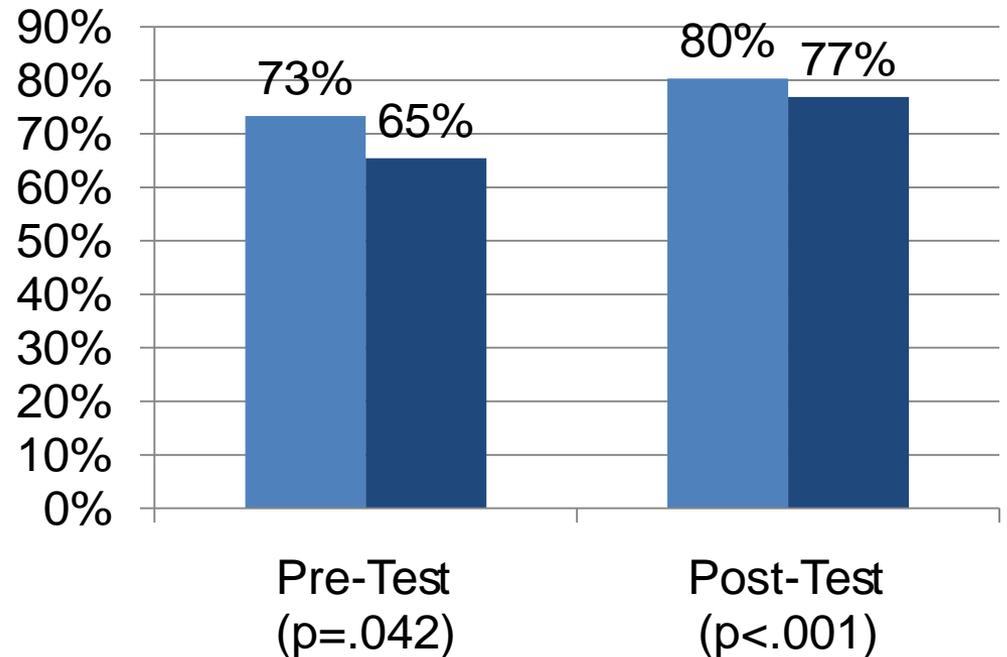
# Strategies for gathering Short-Term Outcomes

## *Presenting the Data: Increased Knowledge of Health Careers*

**Mean Score on Pre/Post Knowledge Test (n=793, p<.001)**



**Mean Score on Pre/Post Knowledge Test by whether participated in other math/science programs (n=646)**



- have participated in other programs (p<.001)
- have not participated in other programs (p<.001)



# Strategies for gathering Short-Term Outcomes

## *Presenting the Data: Increased Knowledge of Health Careers by Minority/Disadvantaged Status*

### **Pre/Post Test Results and Mean Change in Test Score by Minority/Disadvantaged Status**

	Pre-Test Results*	Post-Test Results*	Mean Score Change*
Minority or Disadvantaged	<b>65.59</b> (n=371)	<b>77.08</b> (n=349)	11.49
White Non-Disadvantaged	<b>69.35</b> (n=320)	<b>76.53</b> (n=311)	7.18

*\*differences between groups are not statistically significant*



# Strategies for gathering Short-Term Outcomes

## *Presenting the Data: Declared Intention to Pursue Health Career by Minority/Disadvantaged Status*

**Table 5: Percentage of Students Agreeing/Strongly Agreeing by Minority/Disadvantaged Status**

Question	Minority/ Disadvant	Non- Disadvant	p-value
1. Program met my needs	90.03%	89.25%	0.696
2. Found activities interesting	91.09%	89.90%	0.733
<b>3. Learned a lot about health care professions</b>	<b>95.10%</b>	<b>84.54%</b>	<b>&lt;0.001</b>
<b>4. Learned a lot about different health topics</b>	<b>95.65%</b>	<b>87.13%</b>	<b>&lt;0.001</b>
5. Activities helpful to someone thinking about health care career	<b>96.29%</b>	<b>91.15%</b>	<b>&lt;0.001</b>
<b>6. More Interested in working in health care</b>	<b>84.57%</b>	<b>73.51%</b>	<b>&lt;0.004</b>
<b>7. More Interested in working in the field I learned about</b>	76.72%	69.84%	0.311
<b>8. Would consider working in the facility where I attended this program</b>	59.03%	56.35%	0.794
9. Would recommend program to others	<b>95.16%</b>	<b>90.55%</b>	<b>&lt;0.001</b>

*Table displays results of chi-square analysis. P-value < .05 is significant*

# Extracting Impact Stories from Evaluation Materials:

## Securing Program Funding

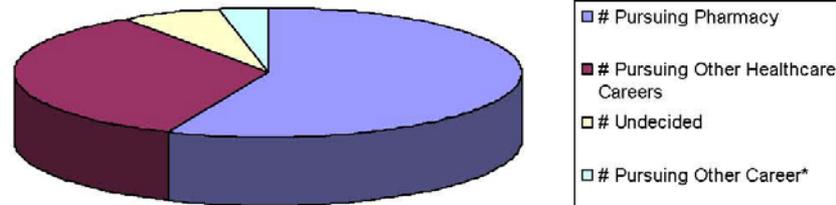


*Since working in a retail pharmacy, I understand that being a Pharmacist means having a responsibility to the community you serve.*

*-- Liz Westcott*

*Entering Albany School of Pharmacy Fall 2009*

Career Path Outcomes for Kinney Students



**90% of all respondents are pursuing healthcare careers.**

N = 32

Response Rate = 32/38 or 84%

Pharmacy = 56%

Other Healthcare = 34%

Undecided = 6%

Other Career = 3%\*

\*Student wanted to pursue Pharmacy but was provided financial incentive to switch to engineering.

Pharmacy Pipeline Status

## Touched by an AHEC: Stories from Across the State

A publication of the NC Area Health Education Centers (AHEC)



# ***Extracting Impact Stories from Evaluation Materials: Demonstrating Statewide Reach on Website***

Touched by an AHEC is a series of stories about people, places, and programs in North Carolina that have been directly affected by the nine AHECs in the NC AHEC Program. If you have been touched by an AHEC and would like to share your story, please e-mail us at [nc\\_ahec@med.unc.edu](mailto:nc_ahec@med.unc.edu).





## **Encouraging Students to Pursue the Path to Health Careers**

Culturally reflective healthcare allows patients an opportunity to be treated by health care providers who are similar to their own racial and ethnic backgrounds. The Florida AHEC Network inspires youth to explore the opportunities available for a career in health. We recruit young people, especially underrepresented minorities and disadvantaged youth, from elementary school to college, into health professions training programs and follow them through their professional training with the goal of having them practice in rural and underserved sites. Student enrichment programs such as health career camps, mentoring programs and academic preparatory courses are designed to generate interest in health careers particularly among disadvantaged and underrepresented youth.

- Last year more than 56,000 hours of enrichment programs were provided to students in grades K-12 as well as to students in technical schools, community colleges and universities.
- Of 1,078 students attending these programs, 77 percent were racially underrepresented or economically disadvantaged.
- The Florida AHEC Network had an 88.5 percent increase in the number of enrichment program participants from 2003 to 2006.

## ***Extracting Impact Stories from Evaluation Materials: Success Stories Shared in Brochure***

# Extracting Impact Stories from Evaluation Materials: Summary of Program Evaluation for Annual Report

## CRITICAL FACTOR/CHALLENGE #3: PROMOTE HEALTH CAREERS AS AN EXCITING, VIABLE OPTION TO YOUNG CAREER SEEKERS

One of the critical activities of the West Texas AHEC is to promote health career opportunities to young career seekers. We focus most of our efforts on the high school-aged audience, working with schools to

- encourage youth to pursue training after high school
- share with them information about health careers and about the career opportunities available in their hometown.
- provide resources to teachers and counselors about health careers so that they are better equipped to guide students. These resources include the Texas HOT Jobs book and website, which has information on more than 90 health careers. ([www.texasshotjobs.org](http://www.texasshotjobs.org))
- provide opportunities for students interested in health careers to participate in hands-on, career-focused activities that prepare them for health professions training.

AHEC's work in this area utilizes two primary formats: "one-touch" and "longitudinal" activities.

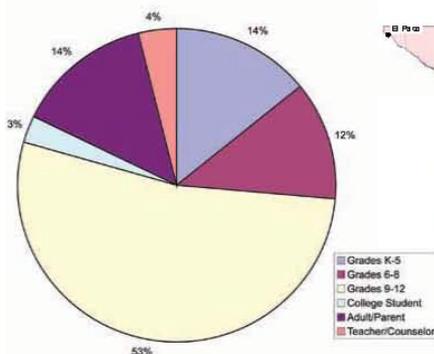
## ONE-TOUCH

In one-touch activities like classroom presentations or career fairs, the purpose is to

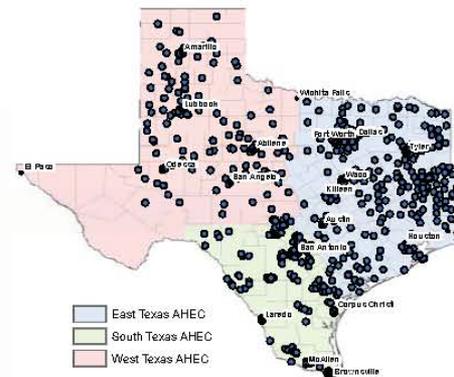
- 1) expose as many young people as possible to the opportunities that exist in health care and
- 2) give them the tools to explore health careers on their own or with the help of their teachers and parents.

More than **40,000 young people, parents and educators** participate in health careers promotion presentations each year.

Health Careers Promotion Activities by Age Group



Health Careers Promotion Events



EXPOSE.



EXPLORE.



EXPERIENCE.



ENGAGE.



# Strategies for gathering Short-Term Outcomes

QUESTIONS???



# Strategies for gathering Intermediate Outcomes *Current Methods Used By Program Offices and Centers*

## Outcome 3: Matriculated into health professions training programs during the reporting year

- Not collecting/not feasible
- Centers track own students and report to program office
- Collected by University Health Science Technology Academy
- Data limited: Only available for in-state public colleges/universities
- Tracking system currently under development
  - Considering using National Student Clearinghouse
  - New “Pre-health recruiters” at each AHEC to track participants
  - Tracking Survey sent periodically to past participants



# Strategies for gathering Intermediate Outcomes

*Ideas for Tracking whether Past Participants  
Matriculated into health professions training programs*

- **Center Level Efforts**
  - Social networking
  - Pre-health recruiters
  - Emails
  - Phone calls
  - Tracking survey (Paper and/or Electronic Version)
- **Program Level Efforts**
  - National Student Clearinghouse
  - Tracking survey (Paper and/or Electronic Version)
    - Every year to all who have participated in > 5 hours programming who are age 17 and older (exclude those who responded in previous year)
    - Only at points of career decision making (age 17/18, age 22, etc)



# Strategies for gathering Intermediate Outcomes

*Tracking whether Past Participants Matriculated into health professions training programs – Center Level Efforts*

## OKAHEC

Center for Rural Health

Oklahoma State University - Center for Health Sciences

	Phone	Email	Snail Mail	Counselor, Teacher, School Contact	Social Network	Other	Unknown	Total	N	Contact Rate
<b>Center 1</b>	42.6%	13.2%	0.0%	7.4%	30.9%	0.0%	5.9%	100.0%	76	<b>89%</b>
<b>Center 2</b>	57.7%	3.8%	5.8%	25.0%	3.8%	0.0%	3.8%	100.0%	96	<b>54%</b>
<b>Center 3</b>	6.7%	0.0%	6.7%	0.0%	73.3%	0.0%	13.3%	100.0%	18	<b>83%</b>
<b>Center 4</b>	10.0%	5.0%	0.0%	40.0%	7.5%	3.8%	33.8%	100.0%	93	<b>86%</b>
<b>Total</b>	31.6%	7.0%	1.9%	23.3%	18.6%	1.4%	16.3%	100.0%	283	<b>76%</b>

# *Extracting Impact Stories from Evaluation Materials: Securing Program Funding*

*“This program was one of the key factors in my decision to become a Pharmacist. Thank you for the opportunity to spend time at the pharmacy; it has literally changed my life.”*

*-- David Avery  
1<sup>st</sup> Year Pre-Pharmacy Program  
University at Buffalo*



*“Personally, this experience inspired me to continue my future in healthcare...being a Pharmacist gives you a rewarding feeling.”*

*-- Brenden Mance  
Entering St. John Fisher  
Pharmacy Program/Fall 2009*

# Strategies for gathering Intermediate Outcomes

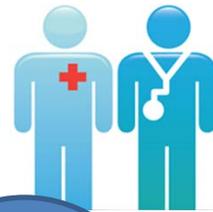
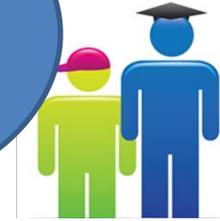
## Tracking whether Past Participants Matriculated into Health Professions Training Programs – Program Office Efforts using the NSC

**3565** names with birthdates submitted to NSC

871 (24%) no record found

**2694 (76%)** records found

This means 76% of past participants 18 & older have attended some college



**261** information on degree/major

109 (42%) degree/major is not science/health-related

**152 (58%)** degree/major is science/health-related

More than half of past participants (who have graduated and for whom info on major is available) have pursued careers related to health/science



## Strategies for gathering Intermediate Outcomes

*Tracking whether Past Participants Matriculated into health professions training programs – Program Office Efforts using the NSC*

*Remember 871 (24%) no NSC record found: Possible sources of missing data:*

- Name spelling errors
- Birthdate errors
- Participant attended college that is not part of NSC
- Participant attended a college several years ago that was not part of NSC at that time
- Participant received certificate that is not captured by NSC
- Participant has not (yet) attended college

*NSC should be used in addition to other methods of tracking.*



# Strategies for gathering Intermediate Outcomes

*Tracking whether Past Participants Matriculated into health professions training programs – Program Office Efforts using the NSC*

109 (42%)  
degree/major is  
not science/  
health-related

**152 (58%)**  
degree/major is  
science/health-  
related

Types of Science/Health-Related Majors of Past Participants		
Science/Health-Related Major	#	%
Nursing	51	34%
Biology/Chemistry/Neuroscience/Physiology	41	27%
Psychology	11	7%
Health	9	6%
Criminal Justice/Forensics	8	5%
Exercise Science/Physical Therapy	6	4%
Sociology/Social Work	4	3%
Speech/language/Communication Disorders	4	3%
EMT/Paramedic	3	2%
Nutrition	3	2%
Pharmacy	2	1%
Physician Assistant	2	1%
Radiologic Tech	2	1%
Dental Hygiene	1	1%
Medical Lab Tech	1	1%
Phlebotomy	1	1%
Public Health	1	1%
Radiation Therapy	1	1%
Respiratory Care	1	1%
<b>TOTAL</b>	<b>152</b>	<b>100%</b>



# Strategies for gathering Intermediate Outcomes

*Tracking whether Past Participants Matriculated into health professions training programs – Program Office Efforts using Tracking Survey*

## Annual Past Program Participant Tracking Survey

- Students who participated in  $\geq 5$  hours of AHEC programming
- High school senior or 2<sup>nd</sup>, 3<sup>rd</sup>, 4<sup>th</sup> year of college
- Currently attending school? Planning a health career?
- If completed school, work in a health care field?
- AHEC influence decision to pursue health care career?
- n=309 in 2007, 274 in 2008, 529 in 2009
- Over two thirds indicate intent to pursue health career

**AHEC Program Participant Survey**

In the past, you participated in a program sponsored by your local AHEC. We are trying to determine if our programs are helpful to students who are considering health care careers. We would appreciate it if you would complete this brief survey.

Survey respondents will be entered to win one of 20 available \$20.00 gift cards to Amazon.com!

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Birthdate: \_\_\_/\_\_\_/\_\_\_

This information will be used to identify which AHEC programs you participated in and the years of those programs. It will be removed from your survey responses prior to analysis and reporting.

1. You are currently (please check one):

In High School. SCHOOL NAME \_\_\_\_\_ GRADE:  9  10  11  12

In College. SCHOOL NAME \_\_\_\_\_ YEAR:  Freshman  Sophomore  
MAJOR: \_\_\_\_\_  Junior  Senior

In Trade School. SCHOOL NAME \_\_\_\_\_ YEAR \_\_\_\_\_ SPECIALTY \_\_\_\_\_

Working. EMPLOYER \_\_\_\_\_ POSITION/JOB TITLE \_\_\_\_\_

Other (PLEASE EXPLAIN) \_\_\_\_\_

2. If you are in school, are you planning a career in health care?

Yes (go to question 3-5)

No (go to question 6)

3. If yes, what are your (your child's) plans?

\_\_\_\_\_

\_\_\_\_\_

4. Upon completing your school/training, do you intend to pursue health care employment in an underserved rural or urban area?

Yes

No

5. If yes, please explain:

\_\_\_\_\_

\_\_\_\_\_

6. Have you volunteered in a health care field?

Yes (go to question 7)

No (go to question 8)

7. If yes, please explain:

\_\_\_\_\_

\_\_\_\_\_

Please continue on back →



# Strategies for gathering Intermediate Outcomes

*Tracking whether Past Participants Matriculated into health professions training programs – Program Office Efforts using Tracking Survey*

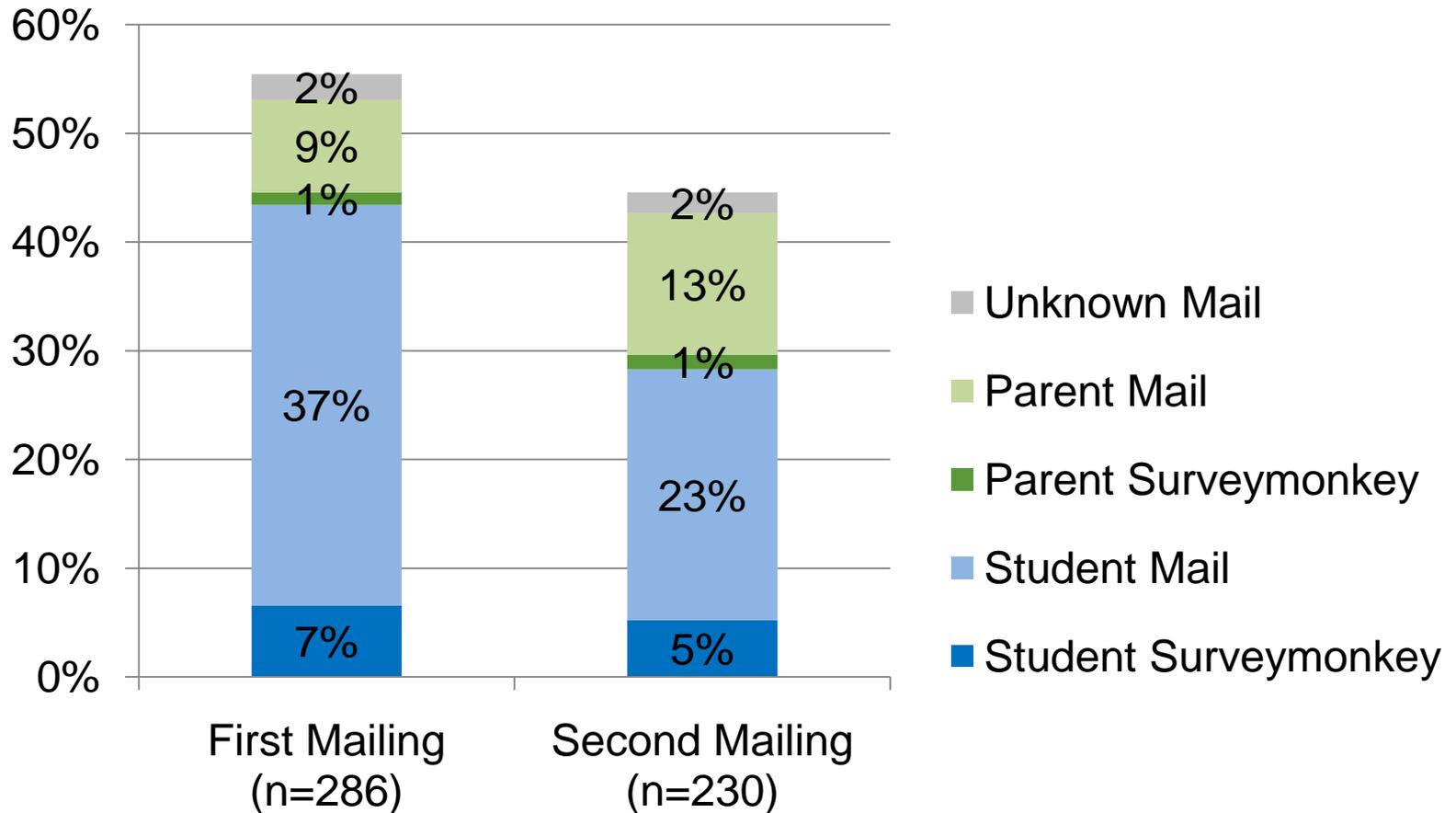
SURVEY METHODOLOGY ISSUES		
“Problems” Encountered	Possible Reasons	Solutions
Not completing all components of survey (year of h.s., college, etc)	Difficult to Read	Change order and lay-out
Students mentioned volunteer experience when asked about employment		Add specific question about volunteer experience
Response Rate Low	Students away at school	Address to past participant OR parent of past participant
	Doesn't seem important	Add chance to win incentive (amazon.com gift card)
	Survey got lost or set aside	Send second mailing



## Strategies for gathering Intermediate Outcomes

*Tracking whether Past Participants Matriculated into health professions training programs – Program Office Efforts using Tracking Survey*

### Breakdown of Responses by Respondent, Method and Mailing

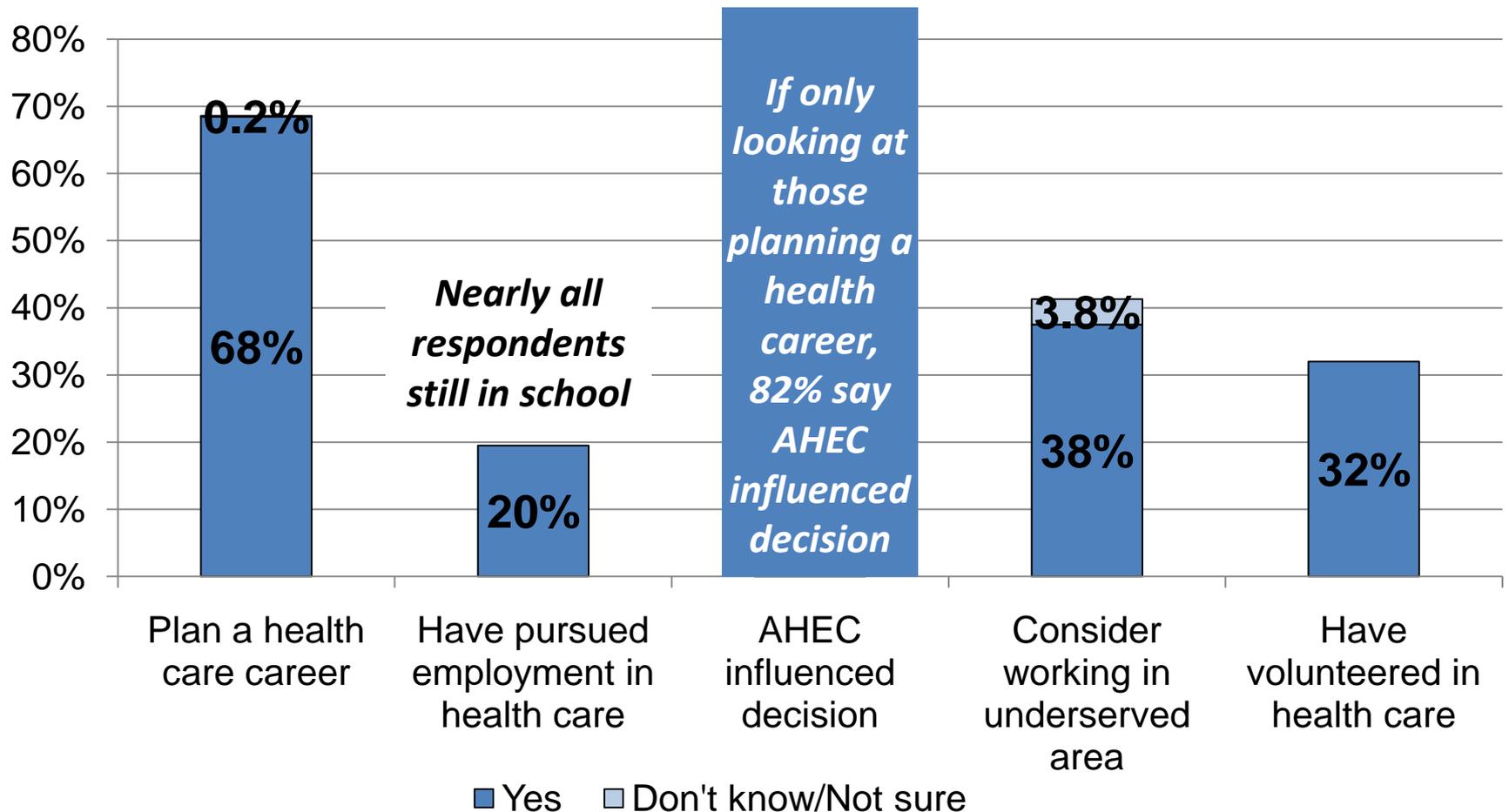




## Strategies for gathering Intermediate Outcomes

*Tracking whether Past Participants Matriculated into health professions training programs – Program Office Efforts using Tracking Survey*

### Tracking Survey Results by Question (n=1112, 3 survey years combined)

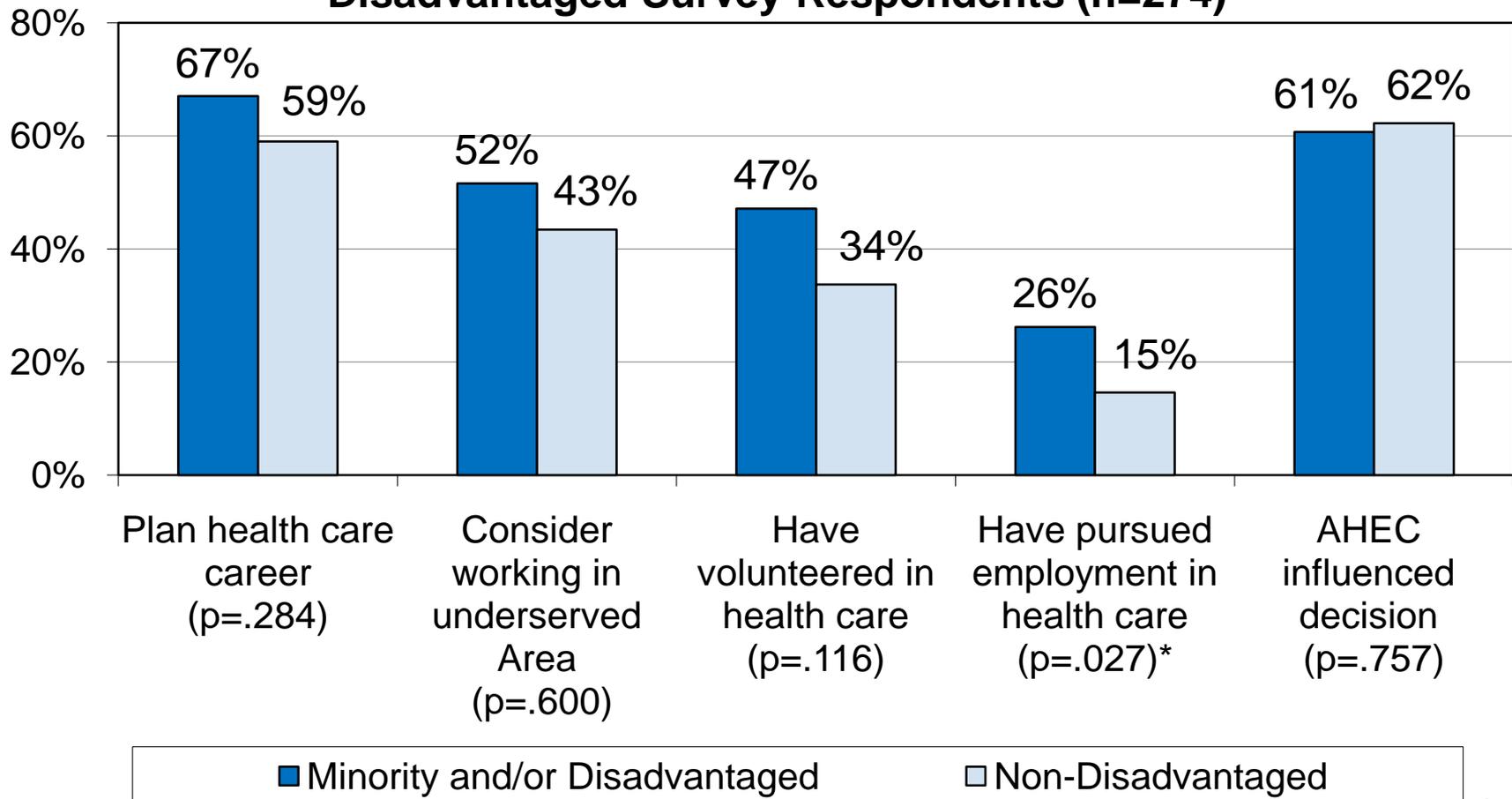




## Strategies for gathering Intermediate Outcomes

*Tracking whether Past Participants Matriculated into health professions training programs – Program Office Efforts using Tracking Survey*

**2008 Survey: Comparison of Disadvantaged and Non-Disadvantaged Survey Respondents (n=274)**

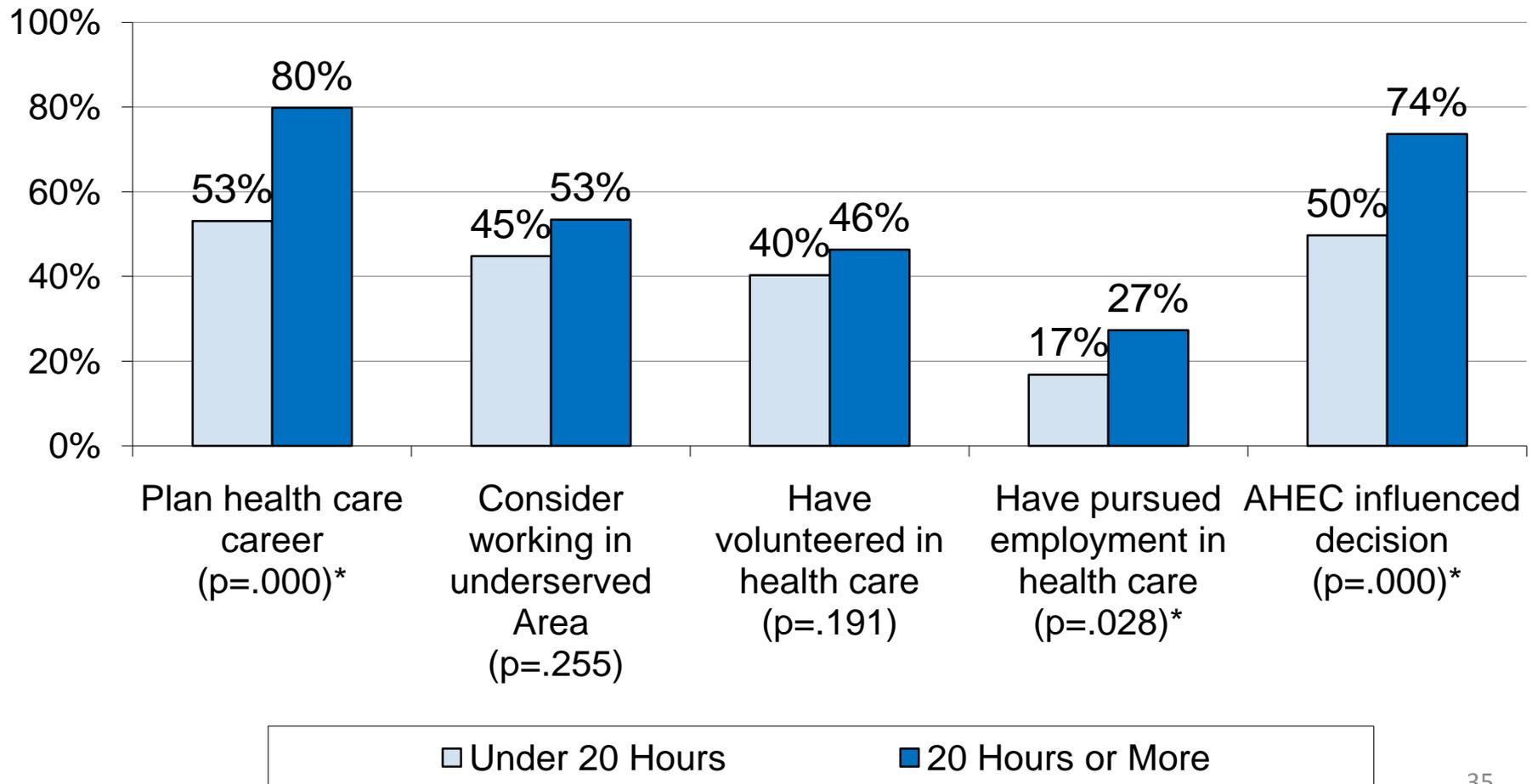




## Strategies for gathering Intermediate Outcomes

*Tracking whether Past Participants Matriculated into health professions training programs – Program Office Efforts using Tracking Survey*

**2008 Survey: Comparison of Survey Respondents by Number of Program Hours (Under 20 versus 20 Hours or More) (n=274)**





## Strategies for gathering Intermediate Outcomes

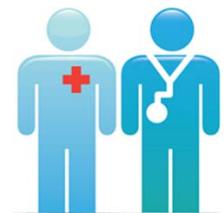
*Tracking whether Past Participants Matriculated into health professions training programs – Program Office Efforts using Tracking Survey*

### **2008 Survey: Categories of Explanations of AHEC's Influence on Decision to Pursue a Health Care Career (n=148 out of 179)**

<b>Category</b>	<b>#</b>	<b>Example comment</b>
Awareness of Health care Careers	48	The experience opened my eyes to different field in health care, and careers that appealed to me.
Help with Career Choice	45	I realized that health care is what I have a passion for and a way to change the lives of people.
Confirm/Reaffirm Decision	30	It really let me experience hospital life and only persuaded me more to work there.
Great time, fun	11	I loved every moment.
Program	6	I participated in MASH camp in the summer of 2004
Help people	4	It inspired me to help people
Other	4	<i>Comments about specific people or very specific aspects of career preparation</i>

# Strategies for gathering Intermediate Outcomes

QUESTIONS???



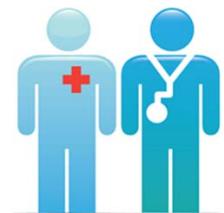
# Strategies for gathering Long-Term Outcomes

## *Current Methods Used By Program Offices and Centers*

**Outcome 4: Completed health professions training programs during the reporting year AND**

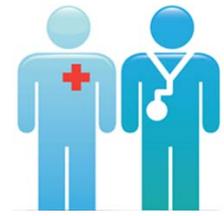
**Outcome 5: Began practicing in an underserved area during the reporting year**

- Not collecting/Not feasible
- Collected from students' educational institution and by telephone survey by AHEC center
- Only track those who complete entire course of study/bulk of their study at AHEC rather than single rotation
- Under development –
  - National Student Clearinghouse
  - “Pre-health recruiters”
- National Student Clearinghouse
- Tracking survey



# Strategies for gathering Long-Term Outcomes *Ideas for Tracking Past Participants*

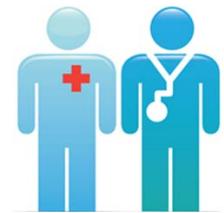
- **Center Level Efforts**
  - Social networking
  - Pre-health recruiters
  - Emails
  - Phone calls
  - Tracking survey (Paper and/or Electronic Version)
- **Program Level Efforts**
  - National Student Clearinghouse
  - Tracking survey (Paper and/or Electronic Version)
    - Every year to all who have participated in > 5 hours programming who are age 17 and older (exclude those who responded in previous year)
    - Only at points of career decision making (age 17/18, age 22, etc)



## Strategies for gathering Long Term Outcomes

*Tracking whether Past Participants Completed Health Professions Training Programs and were Practicing in an Underserved Area – Center Efforts Using Tracking Survey and web-based career exploration program*

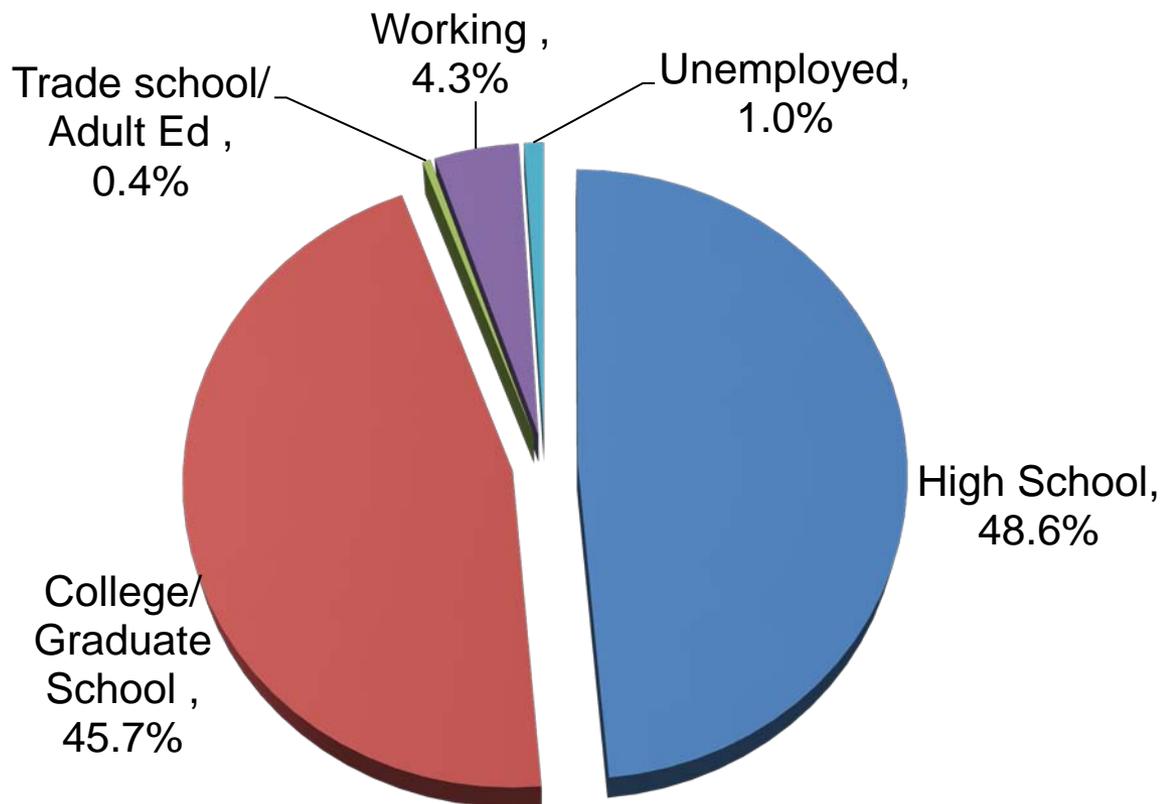
- Annual survey follow up (mail x 2/with telephone follow up);
  - parents are often very willing to complete the survey on behalf of their child during telephone follow up
- After 3 years straight, encountered "survey fatigue" from participants.
- Survey results demonstrate a shift in the pipeline
  - 2007: 50/50 high school/college
  - 2009: 33/60/3 high school/college/adult healthcare employment
- Because of the survey fatigue, which affected response rate, taking a break of at least two years before re-initiating the survey process.
- Because all past participants are registered in My Health Career, we are able to retain fairly accurate contact info for students.
  - Either the students keep their contact info up-to-date via the website, or the
  - parental contact info remains stable

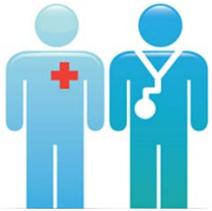


## Strategies for gathering Long Term Outcomes

*Tracking whether Past Participants Completed Health Professions Training Programs – Program Office Efforts using Tracking Survey*

### Current Educational/Work Status of Survey Respondents (n=508)

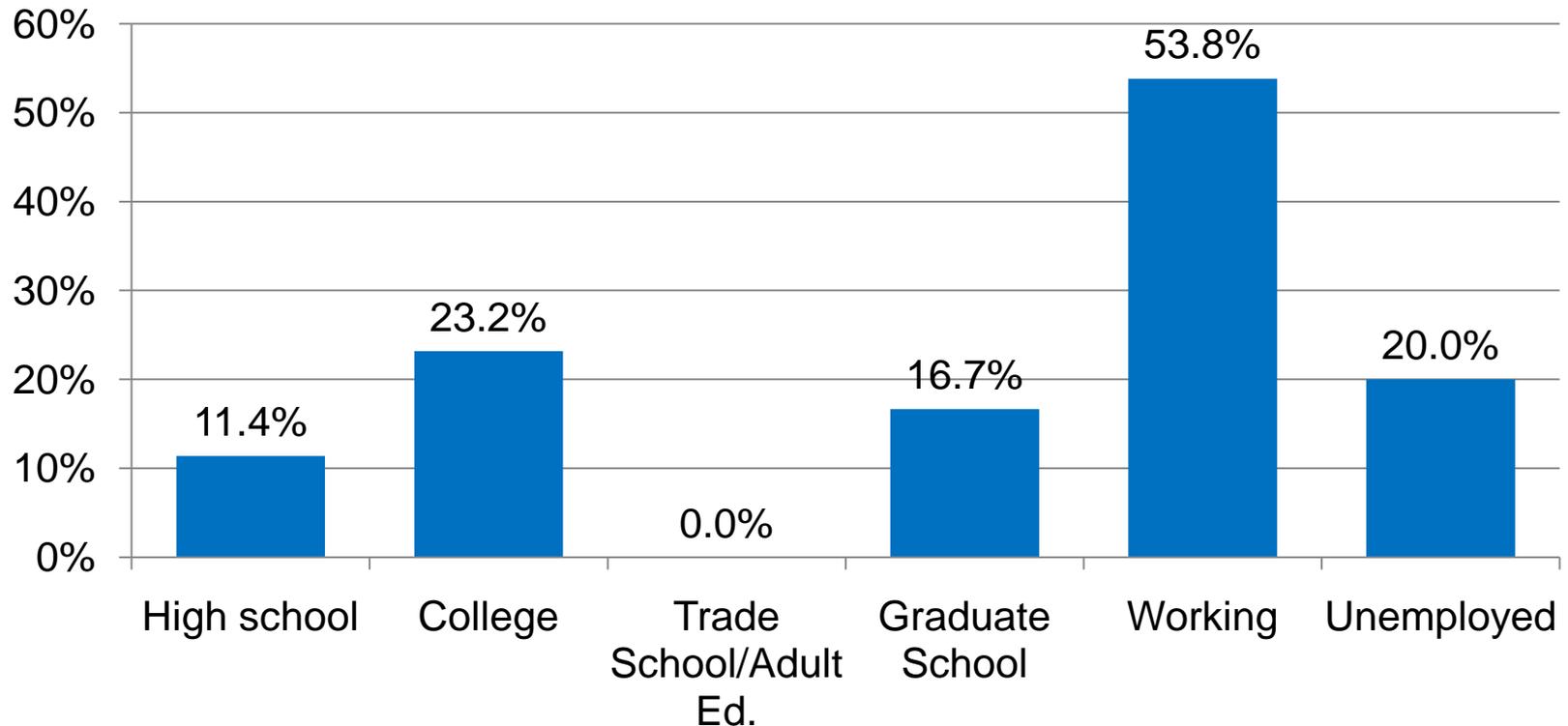


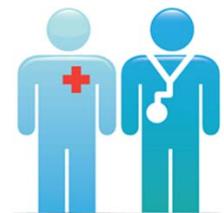


## Strategies for gathering Long Term Outcomes

*Tracking whether Past Participants Completed Health Professions Training Programs – Program Office Efforts using Tracking Survey*

### Percent of Past Participants Who Had Pursued Health care Employment by Current Educational/Work Status





## Strategies for gathering Long Term Outcomes

### *Tracking whether Past Participants Completed Health Professions Training Programs and were Practicing in an Underserved Area – Program Office Efforts using Tracking Survey*

- In 2009, of the 94 respondents who had pursued health care employment, 79 gave details and 39 provided the exact location.
- Out of these 39 respondents, it was determined that 28 (72%) had worked or were working in an area designated as a HPSA, MUA, and/or MUP.

Category	#
<i>Pharmacy</i>	12
<i>Certified Nursing Assistant (C.N.A.)</i>	7
<i>Nursing Home</i>	5
<i>Clerical/ Administrative Assistant</i>	5
<i>Job Shadow/Internship</i>	5
<i>Dentistry/Assist/Hygiene</i>	4
<i>Nurse's Aide</i>	4
<i>Nursing- general</i>	4
<i>Medical Laboratory</i>	3
<i>Med Tech/Surgical Tech/Scrub Tech</i>	3
<i>Registered Nurse</i>	3
<i>Currently Looking</i>	2
<i>EMT/Paramedic</i>	2
<i>Medical/Doctor's Assistant</i>	2
<i>Personal Care Aide (PCA)</i>	2
<i>Physical Therapy</i>	2
<i>Physician Assistant</i>	2
<i>Other</i>	12

## Success Stories

As we begin to track those individuals we have guided along the path, we are finding success stories throughout Oklahoma. [Hear from students on the AHEC path.](#)



**Jeri Frazier, O.D.**

- **Get 'Em**  
1985-86 Health Careers Exploration
- **Train 'Em**  
1986-87 Clinical Training
- **Keep 'Em**  
1990 Family Eye Care, Hobart\*  
2002 SWAHEC Advisory Board

**Meredeth Hardiman Maynard, RN**

- **Get 'Em**  
1991 MASH Camp
- **Keep 'Em**  
2002 Tulsa City County Health Department, Children's First Program\*



**Brian Molloy, DDS**

- **Get 'Em**  
1987-88 Health Careers Awareness  
1989-90 Health Careers Exploration
- **Keep 'Em**  
2002 Pediatric Dentistry, Lawton (one of the few practices in the area that sees Medicaid clients)\*  
Participated in Continuing Education



**Carmen Barnes, PA**

- **Get 'Em**  
1980's Health Careers Awareness
- **Train 'Em**  
1999 Clinical Training, Duncan and Lawton
- **Keep 'Em**  
2002 Comanche County Memorial Hospital, Lawton  
Continuing Education

# *Extracting Impact Stories from Evaluation Materials: Demonstrating Progress Along the Pipeline on Website (Get'Em, Train 'Em, Keep 'Em)*

# Strategies for gathering Long Term Outcomes

QUESTIONS???

# HRSA Contact

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