



**AHEC Stands for Jobs**





- David R. Garr, MD  
South Carolina AHEC  
Executive Director

# Executive Director's Report

I enjoy preparing the introduction for our South Carolina AHEC Annual Report. There are always new and exciting things to share, and this year is no exception.

The **Health Careers Program (HCP)** continues to provide an excellent service by supporting the health professions pipeline for South Carolina. The team members in each of the four AHEC Centers and the Program Office involved with the HCP program do an excellent job working with middle school, high school and college students interested in pursuing careers in healthcare.

The Bench to Bedside Initiative (B2B), funded by The Duke Endowment in 2011, offers an innovative way to provide guidance and mentorship to college students interested in becoming healthcare professionals. Using videoconferencing equipment and working collaboratively with academic health center and university faculty members, this program is designed to increase the acceptance rate of college students into health professions programs.

The **Health Professions Student (HPS)** program has been of great service by arranging clinical rotations for health professions students in rural and underserved South Carolina communities. Two new initiatives during this past year were the Rural Interprofessional Student Experience (RISE) program for students in the Physician Assistant program at MUSC and a preceptor survey that gathered information from community-based preceptors. The RISE program provides physician assistant students beginning their clinical year of study with the opportunity to observe the many components of the healthcare delivery system in rural communities. The preceptor survey acquired information about the progress primary care practices are making in utilizing electronic health records, moving toward becoming patient-centered medical homes (PCMH), and harnessing the interprofessional team to deliver care. The AHEC HPS coordinators were critically important to the success achieved with both the RISE program and with the preceptor survey.

An exciting development occurred in June 2012 when we learned that The Duke Endowment approved our application to establish the Institute for Primary Care Education and Practice on the campuses of MUSC and USC. The goal for the Institute is to identify advanced practice nursing, medical and physician assistant students who arrive on campus with an interest in primary care and to help them sustain their desire to enter primary care practice. Our state needs more primary care providers, and the Institute will help increase the visibility of primary care at our two state-supported academic health centers and increase students' interest in primary care.

The **Continuing Education (CE)** program continues to develop new educational programs for front-line healthcare professionals. The statewide South Carolina Health Occupations Outreach Learning System (SCHOOLS) videoconferencing system and AHEC U distance learning program have enabled healthcare professionals to benefit from continuing education without needing to leave their communities. Our AHEC system is receiving national recognition for the creative ways we are using technology to provide health professionals with a wide range of up-to-date continuing education programs.

Our AHEC has also been playing an active role in advancing telehealth in the state. We sponsored the first telemedicine conference in 2009 and helped lay the foundation for a number of valuable initiatives designed to improve access to consultative services through the use of videoconferencing technology and other modes of communication. The South Carolina AHEC

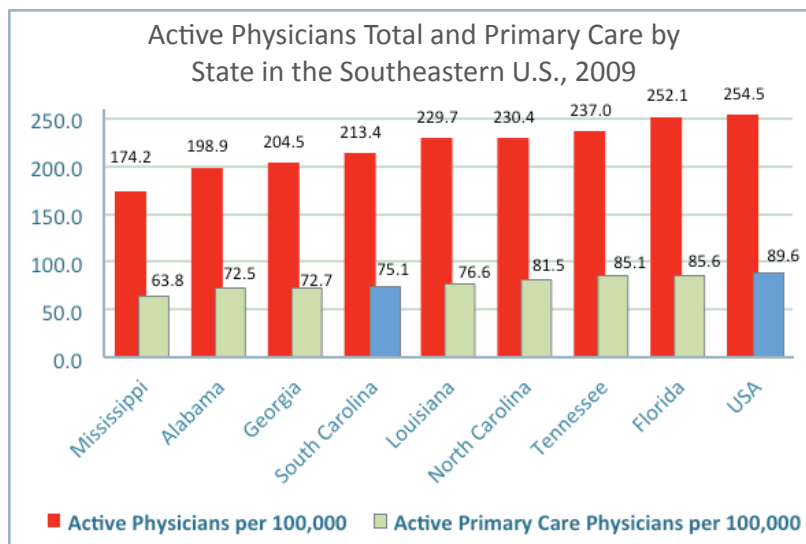


has been cited for its creative use of technology to extend broadband access to educational programs and clinical consultative services in the state.

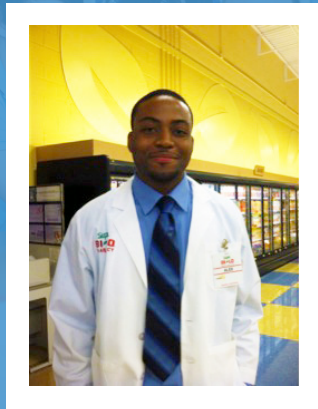
The eight **Family Medicine Residency Training Programs** continue to attract medical students from around the world who want to receive their family medicine training in South Carolina. There are few states where all family medicine residencies work as closely together as do our residencies. Representatives from the programs work collaboratively to interest medical students in careers in family medicine, organizing the annual Rebecca S. Seignious Family Medicine Interest Day in Columbia and recruiting future residents at the annual AAFP National Conference for Family Medicine Residents and Medical Students in Kansas City. More than half of all the family physicians in South Carolina received their training in these eight family medicine residency programs.

The **Office for Healthcare Workforce Analysis and Planning (OHW)** has had another productive year. In addition to publishing the annual South Carolina Health Professions Data Book, which provides information about the distribution of the health workforce in the state, the Office also published two important new monographs - *The Physician Workforce in South Carolina* in 2011 (see data below) and *The Dentist Workforce in South Carolina* in 2012. Both are landmark publications, providing a wealth of information about the distribution of doctors and dentists in the state. The Office is also undertaking an important project - the creation of models designed to forecast the supply and demand for nurses in South Carolina. The information emerging from these models will help nurse employers and educators plan more effectively and avoid problems from a shortage or over supply of nurses in the future.

Finally, a notable transition is occurring in Florence, SC. Dr. William H. Hester, the founding director of the McLeod Family Medicine Residency Program, announced in October 2012 his plans to step down as the residency program director after 32 years in that position. Dr. Hester has been a leader in family medicine education and a highly respected advocate for improved access to care for the citizens of our state. He has held numerous leadership positions in South Carolina and beyond and has been a recipient of awards for his contributions and dedication to family medicine. Fortunately, Dr. Hester plans to remain as an active member of the McLeod faculty and will continue with other leadership responsibilities. South Carolina has benefited from Dr. Hester's leadership and dedication, and we are deeply grateful for the vision and commitment he has provided to our AHEC system and to advancing family medicine education and practice in the state.



Dr. William H. Hester receives recognition for his 32 years of service as the Program Director of the McLeod Family Medicine Residency Program. Pictured with him are Gail Weaver, Pee Dee AHEC Center Director and Dr. Stoney Abercrombie, Program Director of the AnMed Health Residency Training Program and AHEC Council Chair.



*"The opportunities that AHEC and the HCP provide for underserved communities are invaluable. The program provides a healthy environment for those with fiery ambition to explore areas that otherwise would be inaccessible. Without the added encouragement from the AHEC family, I can honestly say I would not be at such an amazing juncture in my life where I am faced with so many options that will ultimately lead to greater things!"*

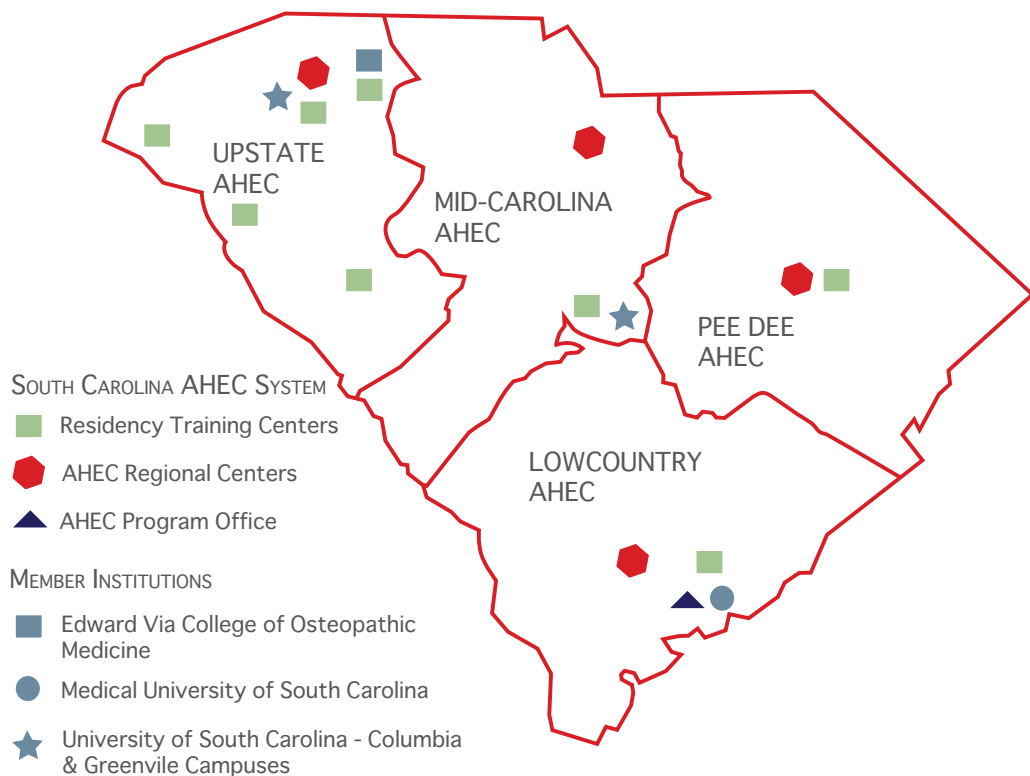
- Alexander Odumakinde  
SC AHEC Student of the Year  
Upstate AHEC

# South Carolina AHEC System

**T**he South Carolina AHEC is committed to being a leader in building a collaborative educational system designed to optimize the health of South Carolinians by achieving excellence in healthcare through recruitment, retention and education of healthcare professionals.

The essential role of AHEC programs in the United States is to recruit, train, sustain and inspire a broad range of health professionals to practice in underserved communities in order to maintain a high quality healthcare safety net. South Carolina is a state that is disproportionately poor, rural and underserved relative to the rest of the United States. Therefore, the role of the South Carolina AHEC is crucial for training and retaining the next generation of healthcare professionals.

In response to the need for additional graduate medical education opportunities in South Carolina, the University of South Carolina opened a campus in Greenville and the Edward Via College of Osteopathic Medicine opened a campus in Spartanburg. In 2012, the South Carolina AHEC invited both of these new medical schools to join the AHEC Consortium, thereby expanding our membership to 16 institutions.



## SCHOOLS Locations

Abbeville Area Medical Center	Greenville Hospital System	Pee Dee AHEC (McLeod Florence)
AnMed Health	KershawHealth	Roper Hospital - Mount Pleasant
Barnwell County Hospital	Laurens County Health Care System	South Carolina AHEC (MUSC)
Beaufort Memorial Hospital	Loris Community Hospital	The Regional Medical Center
Cannon Memorial Hospital	Lowcountry AHEC (Walterboro)	Upstate AHEC (Greenville)
Chesterfield General Hospital	Marlboro Park Hospital	Upstate Carolina Medical Center
Clarendon Memorial Hospital	McLeod Medical Center Darlington	Wallace Thomson Hospital
Coastal Carolina Medical Center	Mid-Carolina AHEC (Lancaster)	
Edgefield County Hospital	Newberry County Memorial Hospital	
Fairfield Memorial Hospital	North Greenville Hospital	
Georgetown Hospital System	Oconee Medical Center	



## The Four Regions in South Carolina

Much of the population in the service area of **Lowcountry AHEC** is rural and underserved with many in the population being uninsured or underinsured. Problems with hypertension, diabetes, infant mortality, and stroke are prevalent. While these are big challenges, Lowcountry AHEC is partnering with local community groups to improve health outcomes. Below are two examples of how Lowcountry AHEC and its partners are working to address these health issues.

The Low Country Healthy Start's (LCHS) focus is on eliminating disparities in perinatal health by reducing low birth weight and infant mortality, and increasing interpregnancy intervals and increasing positive pregnancy outcomes in four rural counties in South Carolina (Allendale, Bamberg, Hampton and Orangeburg). Lowcountry AHEC is assisting with these goals by designing, implementing, and evaluating an intensive continuing education training course for paraprofessionals and health professionals who work with women during the interconceptional time of life. This is the time before pregnancy or between pregnancies in which a woman's health can impact a future pregnancy.

Lowcountry AHEC is also designated as an American Heart Association (AHA) Training Center. As such, Lowcountry AHEC conducts Advanced Cardiac Life Support, Basic Life Support (BLS), and Pediatric Advanced Life Support courses. According to the AHA, four to six minutes is the window of opportunity for someone to act before it is too late; however, less than one-third of cardiac arrest victims get CPR from someone nearby. The AHA programs help increase survival rates by training people in community settings, such as churches. Lowcountry AHEC is partnering with Eat Smart Move More Colleton County (ESMMCC) and national faculty from the American Heart Association who provide BLS instruction to teach community members the AHA's Heart Saver course. Goals include teaching the Heart Saver course to 100 people per year during the next five years via the Faith Committee of the ESMMCC project. Of these 100, 10 will be identified to become instructors, thereby assisting with sustainability of the program. The collaboration also hopes to obtain grant funding to place Automated External Defibrillators in the participating churches.

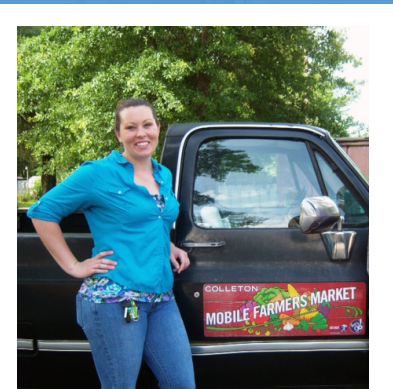
In an effort to support the Healthy People 2020 objectives and address national and statewide health-related trends associated with an aging population and workforce, **Mid-Carolina AHEC** collaborated with Maureen Dever-Bumba, FNP, DrPH (c) of the Palmetto State Geriatric Education Center (GEC) at the University of South Carolina School of Medicine to provide an innovative continuing education series. Utilizing on-site training and the SCHOOLS videoconferencing network, Mid-Carolina AHEC supported the Palmetto GEC's curriculum by broadcasting an eight-part *End of Life* series presented by Dr. Dever-Bumba. Each of the sessions consisted of 2.5 hours of continuing education in the content areas of: communication, legal/ethical issues, culture, compassion fatigue, symptom and pain management, grief and loss, and the final hours.

Geographic challenges associated with clinical education and training, as well as access to care, have been significantly improved with the installation of the SCHOOLS videoconferencing network. The capacity of the SCHOOLS network offers healthcare providers (social workers, case managers, nurses,



*"Working with Eat Smart Move More Colleton County has provided me with the opportunity to enable community change by empowering key leaders to take a step toward making the healthy choice the easy choice. I was excited to learn about this wonderful opportunity this past April when Lowcountry AHEC posted an internship listing for Eat Smart Move More Colleton County on the USC Arnold School of Public Health's Opportunity Manager student website. As I move toward a career in Public Health Social Work, I hope to encounter another opportunity as wonderful as the one I have had here in Colleton County."*

*- Jennifer Worthington  
University of South Carolina  
MSW/MPH Graduate Student*





"Outstanding is the word that describes Mid-Carolina AHEC. My daughter Maya has been provided an avenue to pursue her dreams in the healthcare field through her exposure to educational curriculum, volunteering, networking, internships and a multitude of additional avenues. I am proud of Maya and grateful to Erica Davis and Mid-Carolina AHEC for this great opportunity."

- Cathy Redmond-Dilligard  
(Mother of Maya Dilligard, 11<sup>th</sup> grader at AC Flora High School and a three year participant in the Health Careers Academy)

## South Carolina AHEC System

pharmacists, occupational therapists) access to the USC School of Medicine faculty training program via live presentations and/or recorded viewings across the state. The Palmetto State GEC provided an additional GEC certification to healthcare providers who completed the entire *End of Life* series.

Of the 179 registered participants in the *End of Life* series, 93% were female, 47% were 50-59 years old and 60% had a Masters degree. The initial data focused on the healthcare professionals' understanding of his/her role as it relates to the geriatric population. Objectives associated with each of the content areas emphasized increased knowledge and skills. Upon completion of the program, 92% reported "increased knowledge of the topic," 85% of the enrolled participants identified "at least one modification/improvement to his/her practice," with 73% "likely to implement this practice change." The evaluation data supports the shared goal of the Palmetto GEC and the South Carolina AHEC - to provide education and training to maintain competency of healthcare professionals statewide.

As a next step, the Palmetto GEC will work with Upstate AHEC to adapt the *End of Life* series so it will be available online through AHEC U, an online learning management system initiated by Upstate AHEC in Greenville, SC.

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**T**he **Pee Dee Area Health Education Center** is located in the rural northeastern section of South Carolina known as the Pee Dee. Centrally located in Florence, Pee Dee AHEC serves healthcare professionals, students, and healthcare institutions throughout a 12-county region.

Pee Dee AHEC can be described as a training pipeline for healthcare professionals. Our three core services are designed to connect students to careers, professionals to communities, and communities to better health. The Health Careers Program (HCP) targets middle school and high school students, with an emphasis on underrepresented minorities to help increase the number of young people choosing healthcare as a profession. Programs offered included a nine-month health career academy (HCA), which presented academic, career focus, and personal development topics. This year, 37 high school students completed the HCA and also participated in many community service initiatives, which helped them become more familiar with community needs and opportunities. An additional 23 students participated in the week-long Summer Institute at South Carolina State University, and five students participated in the Health Careers Academy at the Medical University of South Carolina. We also had the wonderful opportunity to provide 28 students with job shadowing opportunities in healthcare facilities for five weeks during the summer.

Pee Dee AHEC also served as a training pipeline for the Health Professions Students (HPS) program by working collaboratively with healthcare facilities to provide interprofessional and community-based learning experiences for 173 health science students. These students were able to rotate through 62 different clinical sites across the Pee Dee region. A total of 107 health professional preceptors provided rotations for students from the disciplines of medicine (allopathic and osteopathic), physician assistant studies, nurse midwifery, pharmacy, nursing, physical therapy, occupational therapy, nutrition science, biomedical technology, and public health. The health science students came from four South Carolina and eight out-of-state health profession programs.



The Continuing Education (CE) program offered quality, current, affordable and accredited training, based on the identified educational needs of our regional providers. Participants had the option of choosing educational programs via one of three learning modalities: traditional live programs or our two alternative delivery methods, SCHOOLS and AHEC U. The continuing education core service successfully provided 156 traditional classroom-style programs during the year.

**U**pstate AHEC, located in the “Golden Corner” of South Carolina, focused its efforts during the past year on quality customer service and continued collaborations. Our aim is to assure that customers’ needs are exceeded by providing quality programs and services throughout an 11 county area. The region is home to a mix of urban and rural communities, hospitals that range in size from 25 to 1200 patient beds, and a constituency that varies from high school students to seasoned healthcare professionals that require an extensive array of quality programs and services.

Upstate AHEC recognizes the value of lifelong learning by offering continuing education (CE) programs that contribute to the enhanced competency of the healthcare workforce, which, in turn, provide positive healthcare outcomes for our citizens. Upstate AHEC provided 158 course offerings to more than 3,700 professionals through on-site learning opportunities, web-based AHEC U courses and videoconferencing programs through SCHOOLS, a statewide outreach learning system.

The Health Professions Students (HPS) program provided 153 student rotations within our region. The HPS program was actively involved in interprofessional student activities, including the Interprofessional Service Learning Projects (ISLPs) and Student/Resident Experiences And Rotations in Community Health (SEARCH). The program collaborated with Greenville Technical College’s health professions programs to pilot an interdisciplinary student learning experience. The HPS program implemented the MUSC PA Department’s Rural Interprofessional Student Experience (RISE) in August. The HPS program also facilitated a forum during the Upstate Coalition for Health Careers’ Career Awareness Day, including a student panel representing medicine, physician assistants, physical therapy, and pharmacy discussing their disciplines and answering questions from high school students.

During 2011-2012 Upstate AHEC’s Health Careers Program (HCP) served 68 high school students through participation in the Health Careers Academy (HCA). Forty-one of the students were Junior Scholars who completed 20 – 110 program hours. Seventeen HCP completers were high school graduates who entered a South Carolina university during the fall of 2012. To strengthen community partnerships, Upstate HCP students attended one of six college tours in collaboration with SC One Stop and SC Personal Pathways. SC Personal Pathways to Success donated new book bags to HCP participants in need of school supplies. A one-day Health Careers Awareness workshop was sponsored by SC One Stop, SC Personal Pathways and the Upstate Coalition for Health Careers. The purpose of this event was to educate, motivate, and inspire high school students in Greenville County interested in a healthcare profession.

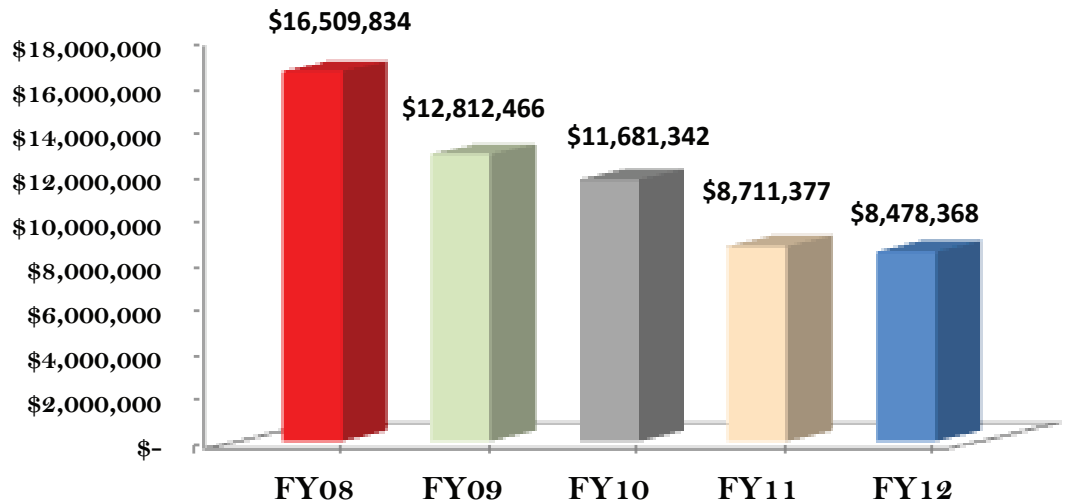
*“I started attending AHEC’s Health Careers Program in high school. I continued my involvement through medical school by participating in AHEC sponsored community-based clinical rotations. I have served as a Pee Dee AHEC preceptor for future healthcare professionals, both as an attending physician and in private practice. I definitely see the value of recruitment and retention of healthcare providers in our state. Regardless of where you are, AHEC brings my thinking right back to the community.”*

- Kievers Cunningham, MD  
McLeod Dillon  
Emergency Department



## 2012 State Funding

**S**tate funding appropriated by the state for the South Carolina AHEC totaled \$8,478,368 in FY 2012, marked the fifth consecutive year of decline in state support for Institutions of Higher Education in South Carolina. Revenues have suffered a cumulative 46% decrease since 2008.



"My confidence level as well as that of the staff has increased for providing palliative and end of life care to our patients and their family members. We feel that we are better able to address the concerns that the patients and/or family members have regarding end of life issues. We are so thankful to have had this opportunity for learning more about the end of life process and feel the information has definitely impacted our practice on our unit."

- Melanie Rose, RN, MSN, OCN  
Clinical Nurse Educator  
Greenville Hospital System

## 2012 Grant Funding

**\$577,597**

Office for Healthcare Workforce Analysis & Planning (The Duke Endowment)

**\$400,516**

AHEC Point of Service Maintenance & Enhancement Award - Formerly Model AHEC (DHHS\*, HRSA\*)

**\$250,000**

Recruitment and Retention of Future Healthcare Professionals: Bridging the Gap in the Education Pipeline (The Duke Endowment)

**\$200,906**

Increasing the Primary Care Workforce in South Carolina (The Duke Endowment)

**\$59,000**

Geriatric Education Center - University of South Carolina (DHHS\*, HRSA\*)

**\$42,000**

SC SEARCH - SC Primary Health Care Association (HRSA\*)

\*DHHS = Department of Health & Human Services

\*HRSA = Health Resources & Services Administration

State  
and  
Grant  
Funding



**T**he **South Carolina AHEC Health Careers Program (HCP)** provides a variety of extended learning opportunities for students to support their matriculation into health professions training programs. HCP initiatives promote the development of academically proficient and self-confident future healthcare professionals. The Health Careers Academy (HCA), the flagship of the HCP, enrolls students in grades 9 – 12 in the regional academies. The AHEC Centers' HCP coordinators facilitate educational modules and activities during the academic school year for these students. Service-learning, mentoring and academic advising are components of the curriculum, which aligns with the South Carolina Department of Education Academic Standards.

## In The Know

- More than 4,095 hours of health professions observation time were provided to HCP participants during this past year.
- Across the state, high school students in the HCP completed 3,307 hours of service-learning.

## 2012 Highlights

- The Bench to Bedside Initiative (B2B) works to increase the number of applicants and the acceptance rates of underrepresented minority (URM) students to health professions education programs in the state. South Carolina AHEC is in partnership with several of South Carolina's undergraduate colleges to facilitate a series of interactive, intercollegiate seminars and activities designed to address barriers that impact the successful matriculation of the targeted population. The SCHOOLS teleconferencing network is utilized to deliver educational sessions which promote professional and personal development, the investigation of healthcare research topics, and the Socratic method of inquiry and debate. Funded by a three-year grant from The Duke Endowment, the Bench to Bedside initiative has convened a core committee of campus faculty to support project coordination, content design, and program implementation. Participating campuses include Claflin University, Clemson University, Coastal Carolina University, College of Charleston, Greenville Technical College, and Winthrop University.
- The South Carolina Department of Education Health Science Teacher Education Division granted permission to award up to 2-hours of high school credit through the AHEC Health Careers Academy.

### Health Careers Program by the Numbers

2012 Health Careers Summer Institute	93 Participants
2012 Health Careers Program	3,375 Participants
HCA Activity Hours Facilitated	16,036 Hours
High Schools Career Exploration Credit	41 Hours
HCA Service Learning Hours Facilitated	1,210 Hours
HCA Junior Scholars (completed 20-59 contact hours of HCA activity)	126 Students
HCA Scholars (completed 60+ contact hours of HCP activity)	51 Students
HCP Achievers (completed 120+ contact hours of HCP activity)	91 Students
Haitian Mission Drive	400+ Items

# Health Careers Program



*"AHEC is an amazing program where youth can be engaged. Through AHEC I have been given the opportunity to receive quality information on various careers in the medical fields. I would highly recommend this program to anyone interested. Thanks AHEC for opening the doors not just to me, but to students across the great state of South Carolina!"*

*- Emily-Grace Singletary  
Hannah-Pamplico High School  
2013 Graduate  
Pee Dee AHEC*



*"The Rural Interprofessional Student Experience (RISE) curriculum has been very beneficial in my learning experience as a Physician Assistant student. It provided me the amazing opportunity to learn the ins and outs of a rural hospital, which will make me a well-rounded PA in the near future. It was the perfect transition from the classroom to clinical rotations."*

*- Rachel Lamb, MUSC  
Physician Assistant Class of  
2013*

## Health Professions Student Program

**The South Carolina AHEC Health Professions Student (HPS) Program** collaborates with health professions education programs in our state to provide community-based learning experiences for undergraduate and graduate students. This education is designed to expose students to the realities of clinical practice in rural and underserved areas and provide them with opportunities to help address specific health needs in those communities. The South Carolina AHEC placements give students the opportunity to experience healthcare in a real world setting away from their health science centers. Students are able to interact one-on-one with patients in community health centers, county health departments, homeless clinics, local practitioners' offices and other primary care sites. Students learn firsthand about economic and cultural barriers to the receipt of healthcare services and the specific needs of underserved and ethnically diverse populations.

### In The Know

- A total of 243 clinical facilities served as training sites for 771 health professions student placements.
- The teaching provided by 417 preceptors led to 113,414 patient contacts for the health professions students.

### 2012 Highlights

Pillars of primary care include access to first-contact care, coordinated care, comprehensive care, and sustained personal relationships. These pillars are incorporated into patient-centered medical home (PCMH) models, an important transformation from traditional models of primary care practice. Development and support of practices and preceptors moving toward PCMH where practitioners manifest the core competencies of interprofessional collaborative (IPC) practice are vital to providing outstanding AHEC-sponsored clinical experiences for health professions students, particularly in rural and underserved communities.

To identify outstanding practices, the South Carolina AHEC HPS Coordinators conducted a survey of primary care preceptors to assess Electronic Health Record (EHR) adoption, PCMH orientation, and interprofessional team care. An online survey assessed SC AHEC primary care preceptors (MDs/DOs, PAs, and NPs) who have achieved or are moving toward adoption of a PCMH model and interprofessional collaborative practice. Those preceptors who ranked highly and indicated a willingness to be contacted were then interviewed by the regional HPS Coordinators to further explore their practice environment, including EHR use to coordinate care and assess preventive care needs.

Study findings show that of the 60 practices surveyed, 13 (22%) were already certified as a PCMH and an additional 24 (40%) were planning to seek certification within the next three years. The results of the interviews were summarized and presented at the 2012 National AHEC Organization meeting in San Antonio. Model preceptors and practices will be invited to participate in the new Institute for Primary Care Education and Practice.



The South Carolina AHEC supports healthcare excellence throughout the state by offering **educational programs** to the state's 150,000 healthcare professionals each year. Programs provide healthcare professionals in all disciplines with knowledge that allows them to utilize the most current information when they provide care to patients.

### In The Know

- Educational programs were provided to 34,057 health professionals.
- More than 2,882 program hours were made available to health professionals in South Carolina's 46 counties.
- A total of 154,546 contact hours of programming were provided to assist professionals in maintaining their licenses and certifications.

### 2012 Highlights

- Over the past year, the South Carolina AHEC has expanded the South Carolina Health Occupations Outreach Learning System (SCHOOLS) to 31 locations across the state. This successful program permits access to educational programs, health professions student support, and research initiatives through videoconferencing equipment over a high-speed, dedicated broadband highway known as the Palmetto State Providers' Network. Nationally, South Carolina ranks in the top five of states that are utilizing secure-broadband healthcare networks to deliver education and patient care. In FY2012, over 750 healthcare professionals received training through the SCHOOLS network. An additional 63 PA students took part in rural training experiences that involved faculty support through the video network. The SCHOOLS infrastructure has provided the South Carolina AHEC with opportunities to partner on grants and expand capacity. Information is available at [www.scahec.net/SCHOOLS](http://www.scahec.net/SCHOOLS).
- Lowcountry and Upstate AHECs partnered with the National AHEC Organization as part of an educational program that offers help to returning veterans. The program aims to increase knowledge and improve practice for civilian healthcare professionals related to behavioral/mental health issues of veterans and their families. Several live and SCHOOLS programs were offered statewide. The recorded "Operation Homecoming Boot Camp for Civilian Healthcare Professionals" program can be accessed at [www.AHECU.com](http://www.AHECU.com).
- AHEC U has expanded the number of courses available through their online learning system to approximately 100. Programs are available for multiple disciplines to help health professionals meet state certification and licensing requirements.
- Based on a proposal presented to the South Carolina Nurses Association, AHEC has been approved to be a provider of "Legal Aspects of Nursing" courses. In the coming months, courses will be led by state experts and will train nurses in compliance and documentation.
- A listing of all the education programs offered by the South Carolina AHEC system is now centralized on a statewide calendar. Visit [www.scahec.net](http://www.scahec.net) to find local live and SCHOOLS programs.

## Educational Programs



*"Operation Homecoming: Boot Camp for Civilian Healthcare Professionals" is a great opportunity for community health providers to learn more about combat related Post Traumatic Stress Disorder (PTSD) and Traumatic Brain Injury (TBI). Although I currently work with the veteran population in a long term care (LTC) setting, this workshop presented me with the up-to-date issues facing our returning veterans and the impact of their traumatic experience on their quality of life. My staff will definitely be attending the next "Operation Homecoming" workshop. Supporting this program will only strengthen our community as a whole and enhance the quality of life among our veteran and active duty population."*

- Mary Berger, MSSA, LMSW  
Director of Social Work  
Veterans Victory House Nursing Home, Walterboro, SC



*"While all primary care physicians should be prepared for unexpected medical emergencies, rural physicians are much more likely to care for medical emergencies than their colleagues who work in suburban and urban settings with greater access to emergency rooms and hospitals. The primary goal of "Residency Education through Simulation in Procedural and Emergency Care Training" (RESPECT) is to develop a curriculum using patient simulation to train family medicine residents to treat high-risk medical emergencies that are commonly encountered in rural primary care."*

*- Eric Matheson, MD  
MUSC Assistant Professor of Family Medicine; and  
Principal Investigator, HRSA  
Title VII Residency Training Grant*

# Graduate Medical Education

**T**he South Carolina AHEC provides support for **Graduate Medical Education** through a number of initiatives. Our AHEC works collaboratively with South Carolina's medical schools to educate and retain medical students in South Carolina for their graduate medical education. Every five years, the South Carolina AHEC conducts a graduate survey to ascertain Family Medicine graduates' demographics, training needs, and practice experience. The results of these surveys are used to strengthen residency programs' curricula. In addition, AHEC works collaboratively to provide quality faculty development and networking opportunities for residency program faculty members.

**FAMILY MEDICINE RESIDENCY TRAINING PROGRAM:** In order to address the shortage and maldistribution of physicians in our state, the South Carolina AHEC provides funding for and works closely with the Statewide Family Medicine Residency Training Programs. Family Medicine is the medical specialty that provides continuing and comprehensive healthcare for individuals and families. The family physician typically functions as the patient's point of entry into the healthcare system. The family physician is the physician of first contact in most situations and, as the initial provider, evaluates the patient's total healthcare needs, provides personal care and guides the patient's use of the healthcare system.

**LOCATIONS OF THE AHEC RESIDENCY TRAINING PROGRAMS:** South Carolina AHEC Residency Training Programs are located in Anderson, Charleston, Columbia, Florence, Greenville, Greenwood, Seneca and Spartanburg.

## In The Know

- According to the most recent data from the South Carolina Budget and Control Board Office of Research and Statistics, the majority (57%) of the family physicians practicing in South Carolina were trained in South Carolina AHEC Family Medicine Residency Training Programs.
- South Carolina ranks 34<sup>th</sup> in the nation in its supply of actively practicing physicians, but ranks 43<sup>rd</sup> in the number of actively practicing primary care physicians.
- Of South Carolina's 46 counties, 45 have at least a partial designation as a Primary Care Health Professions Shortage Area (HPSA); in the case of 33 of those counties, the entire county is designated as a shortage area.

## 2012 Highlights

- South Carolina AHEC-affiliated programs trained 323 residents in the primary care specialties of family medicine, internal medicine and pediatrics.
- The Self Regional Family Medicine Residency program has developed an Underserved Community Care Track for residents who are interested in providing healthcare to the underserved and marginalized individuals of their community. The residents are being trained to assess the needs of a community, to take a leadership role in developing medical outreach and to provide best practice medical care in the two free clinics of Greenwood.



**T**he South Carolina AHEC has been committed to the **recruitment and retention** of healthcare professionals in the state through initiatives that have been ongoing and evolving for 40 years. For more information, visit our website: [www.scahec.net/professionals](http://www.scahec.net/professionals).

**RURAL PHYSICIAN PROGRAM INCENTIVE GRANTS:** We are pleased to report that the General Assembly restored the funding for the South Carolina Rural Physician Program in 2012. The South Carolina Rural Physician Program was initiated by the South Carolina Legislature in 1989 to address the undersupply of clinicians in rural and underserved South Carolina communities. The program provides incentive grants for primary care physicians who commit to practice in a Medically Underserved Area (MUA) or a Health Professional Shortage Area (HPSA) for at least three years. To date, the program has helped 363 primary care physicians establish practice in rural communities throughout South Carolina.

**RURAL DENTIST PROGRAM INCENTIVE GRANTS:** The Rural Dentist Program was established by the South Carolina Legislature in July 2005. The program assists with the repayment of educational loans for dentists who agree to practice in a Health Professional Shortage Area or serve as a full-time faculty member in the MUSC College of Dental Medicine. Healthcare providers are much more likely to remain in areas of need once they have established their practice in those communities.

**LOCUM TENENS:** The Locum Tenens Program is designed to support the practices and increase the retention of family practitioners and pediatricians in rural South Carolina by providing them with an opportunity for vacation and family time, continuing medical education conferences, or for other reasons that would require providers to be absent from their practices.

## In The Know

- Thirty-three rural dentists and twelve faculty members in MUSC's College of Dental Medicine have received funds from the Rural Dentist Loan Repayment Program since 2005.
- One hundred thirty-three days of locum tenens services were provided to physicians in rural and underserved areas of South Carolina in 2012.

## 2012 Highlights

- Eighty-eight medical students from the Medical University of South Carolina, the University of South Carolina, and 13 other medical schools attended the 2012 Rebecca S. Seignious Family Medicine Interest Day. Students participated in hands-on workshops provided by the Family Medicine Residency Program Directors and their staffs, as well as a recruitment fair hosted by the residency programs.
- Thirty-five residents attended the South Carolina AHEC Family Medicine Residents' Annual Meeting in June. This meeting provides a unique opportunity for residents from all specialties to submit proposals to present research papers on basic research or quality improvement projects. This meeting was held in conjunction with the South Carolina Academy of Family Physicians' Annual Meeting.

# Recruitment & Retention



*"The Rural Dentist Loan Repayment Program will play a critical role in allowing me to serve the oral healthcare needs in the Orangeburg Community. With the generosity of this program, I am able to devote more time and energy into service, community involvement, and being an active citizen. I am excited to return home to Orangeburg and care for the dental and oral health needs in my community."*

*- Daniel R. West, DMD  
General, Cosmetic, and  
Implant Dentistry for Adults  
and Families, MUSC College  
of Dental Medicine,  
Class of 2012*



*"There are many changes taking place in the way healthcare is organized and delivered that deserve the attention of workforce analysts: the decline of solo practices and the rise of health systems and accountable care organizations; wide-spread adoption of the medical home model of care; increased reliance on an interprofessional team to monitor and treat patients; the increased use of hospitalists; increased ability to bring specialists into rural and underserved areas through telemedicine; and many others. The challenge for healthcare workforce researchers and planners in coming years will be to understand and incorporate these delivery system changes into our work."*

- Linda Lacey, Director

# Healthcare Workforce Analysis and Planning

**The Office for Healthcare Workforce Analysis and Planning (OHW)** is dedicated to studying the issues affecting the available supply of healthcare providers in South Carolina. Funded by a grant from The Duke Endowment, our primary purpose is the development and analysis of accurate, reliable data about the healthcare workforce in South Carolina in order to support planning and policy decisions, which ensure that the citizens of the state will have the number and types of healthcare providers they need in the future. OHW reports, policy briefs, data briefs and maps can be downloaded free of charge from our website: [www.OfficeforHealthcareWorkforce.org](http://www.OfficeforHealthcareWorkforce.org).

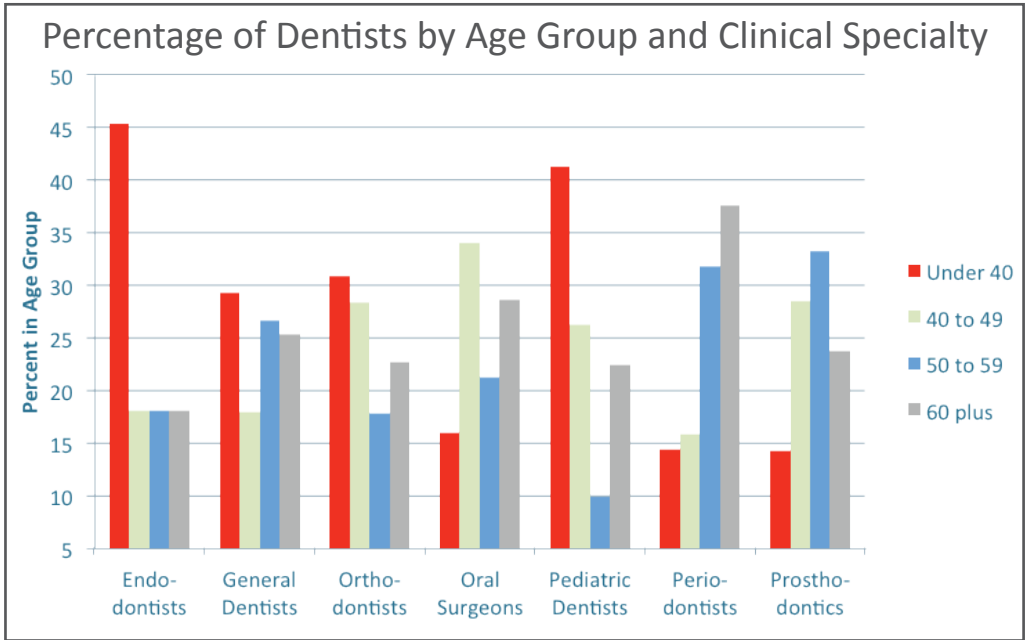
## Publications

### The Physician Workforce in South Carolina

Our recent analysis of the physician workforce in South Carolina shows that, although it has grown substantially over the past 30 years, the state still ranks below the national average in terms of the total number of practicing physicians relative to the population being served and the number and proportion of physicians in the primary care specialties. Strong population growth in South Carolina, especially among those aged 65 and older, suggests that the demand for physicians and medical services will continue to grow and may grow very rapidly over the next two decades. Understanding physician characteristics and the dynamics affecting the physician workforce improves our ability to plan for the number and types of physicians that will be needed in the future.

### The Dentist Workforce in South Carolina

Dentists play an increasingly important role in our healthcare system. The body of evidence linking poor oral health to a wide range of acute and chronic diseases is growing quickly. This report provides information about the number and type of dentists practicing in the state, their demographic characteristics, and information about where they practice. Knowing the size and characteristics of the current dentist workforce in the state is important baseline information for educators and policy makers concerned with ensuring an adequate supply of dentists for South Carolinians.





### The South Carolina Health Professions Data Book

The third edition of *The South Carolina Health Professions Data Book* assembles information from a variety of sources into a single volume. The Data Book reports the number and distribution of healthcare providers practicing in each county of the state, and focuses attention on community healthcare issues and population demographics. The newest edition, to be published in the Fall, also reviews changes in the size of the different health occupational groups over the past three years. This desktop reference is proving to be a valuable tool for the South Carolina AHEC, hospital and healthcare systems, healthcare professionals, community health program sponsors, state agencies, educational institutions and others involved in strategic planning activities involving the education or utilization of healthcare professionals.

## New Research Efforts

### Health Education Program Graduates Tracking System

Each health occupation or professional education program in the state reports the number of program graduates to the federal Department of Education through the Integrated Postsecondary Education Data System (IPEDS). South Carolina AHEC is compiling this information in order to understand how the educational pipeline in our state is changing for more than 51 different health occupations. Graphs and data tables have been developed to illustrate changes in the way education is being delivered and in the total number of graduates being produced each year. Tracking changes in our education system is an important element in our ability to understand our capacity to produce new professionals and how program placement affects the distribution of specific types of health professionals.

### Nursing Supply and Demand Forecast Models

Registered Nurses (RNs) make up the single largest health profession in the state. The RN workforce is also subject to cyclical shortages – usually as a result of increased demand for their knowledge and services. Ten years ago there were expectations that we would be in a nursing shortage cycle between 2010 – 2015 due to a large increase in retirements. A combination of advance planning, which increased the production of new RNs over the past 10 years, and a deep economic recession, which delayed retirement for many aging nurses, has eased the situation. However, these factors are only delaying the inevitable shortage that will occur when nurses in the baby-boom generation are no longer able or willing to work and leave the workforce in very large numbers.

In order to anticipate when the retirement exodus is likely to begin in South Carolina, and in order to estimate the expansion of nursing education programs that will be needed to counteract it, SC AHEC is developing a nursing supply forecast model based on demographic and historical trend information about our nursing workforce. The results of that model will inform nurse employers and educators, allowing them to develop solutions and coping strategies before the shortage reaches crisis proportions as happened in the 1970s and 1980s. In order to put the results of the nurse supply forecast into perspective, it is also necessary to know how the demand for RNs is likely to change over the coming decade. We are also building a companion forecast of RN demand in South Carolina based on information developed by the federal Bureau of Labor Statistics and the Labor Market Information System in our state Department of Employment and Workforce.

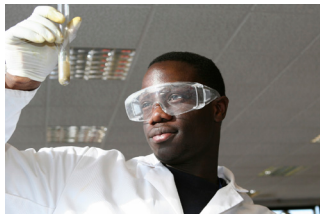
*“Seneca Lakes Family Medicine Residency Training Program applied for and received a grant from the National Organization of State Offices of Rural Health (NOSORH) in order to develop a rural health scholars program. This program is designed to attract students to train at our residency program who are likely to enter practices in rural South Carolina. The program focuses on high school and college students who live in rural areas and are therefore more likely to remain in South Carolina after training.”*

*- T. Edwin Evans, MD  
Program Director, Seneca Lakes Family Medicine Residency Program*



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