



# THE CONVENER

Improving Access to Quality Health Care

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From the Executive Director

## Health Reform and the Challenge of Primary Care

I joined the Champlain Valley Area Health Education Center (AHEC) as the new executive director in March, just as the heated national debate over health care reform was at its most intense. I can think of no more challenging, critical, or rewarding time to be working with Champlain Valley AHEC's academic and community partners in providing vital support to the health care workforce and students here in Vermont.

The health reform legislation signed

into law by President Obama on March 23 will add another 32 million people to the ranks of the insured nationwide. Laudable though this achievement may be in many respects, it also poses extraordinary challenges to those who are committed to improving access to quality health care for all. Many experts have noted that today's primary care workforce – including physicians, nurses, physician assistants, and allied health professionals such as social workers

and occupational, physical, and respiratory therapists – is insufficient to meet *existing* demands for access to quality care, both here in Vermont and throughout the country. (See "The Annual Primary Care Survey" on page 7 for a summary of Champlain Valley AHEC's latest survey findings on the



Tom Ayres

*(Continued on page 5)*

## Health Care Reform Heightens Demand for Health Careers Awareness Programs



Winooski Middle School students participating in our Health Careers Workshop during the Winooski Career Carnival on April 23, 2010.

The implementation of health care reform will bring millions of new patients into primary care settings throughout the country. Reform's impact on the demand for primary care, coupled with ongoing workforce shortages in many health professions throughout Vermont and the nation, makes Champlain Valley AHEC's programs in workforce development more

important than ever.

Champlain Valley AHEC's health careers awareness activities include classroom presentations to middle and high school students, participation in career fairs, and facilitating a field trip to the University of Vermont's (UVM) College of Medicine (COM) and College of Nursing and Health Sciences (CNHS) for students from Missisquoi Valley Union (MVU) Middle School. Since August 2009, we have worked with more than 4,000 students in grades six through twelve to spark interest in growing health care career opportunities.

Our work is paying off. "I've learned how many different healthcare careers there are and that you can plan your career based on various interests," one student said following a recent middle-school presentation.

*(Continued on page 2)*

### Inside this issue:

Meet Gwen Fitz-Gerald, MedQuest Alumnus.....	3
Former MedQuest Assistant Directors Learn of Residency Placements.....	3
Health Career Exploration Ideas for Students.....	3
Health Careers Spotlight: Primary Care Physician.....	4
Interview with Amy Roberts, MD.....	4
Highlights of 2010 Geriatrics and Blueprint Conference.....	5
First Statewide Migrant Farm Worker Conference.....	6
The Annual Primary Care Survey and the Champlain Valley.....	7
AHEC Summer Projects a Rite of Passage for Health Care Students.....	7

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## Mission

The Champlain Valley AHEC improves access to quality health care by working with community and academic partners to support healthcare workforce development through recruitment, retention and continuing education of health care professionals.

## Health Career Ambassadors, MedQuest Alumni Join Vermont Hospitals as Emergency Room RNs

Two alumni of Champlain Valley AHEC's *MedQuest* health careers exploration program are joining the Emergency Room staffs of Vermont hospitals as registered nurses (RNs).

Meghan Kennison and Lindsay Stanley were both participants in the *MedQuest* program, Meghan in the summer of 2004 and Lindsay in the summer of 2005. Committed to steering young Vermonters into health care careers, the two also served as Health Careers Ambassadors with Champlain Valley AHEC this past year. As Ambassadors, Meghan and Lindsay visited Chittenden and Franklin County schools on behalf of AHEC to speak about their health care training and career aspirations.

Meghan and Lindsay graduated from the

University of Vermont College of Nursing and Health Sciences this past month. The newly designated RNs will begin work in emergency medicine this summer – Meghan at Northwestern Medical Center in St. Albans and Lindsay at Rutland Regional Medical Center in Rutland. Champlain Valley AHEC congratulates the pair as they transition from their UVM studies and join the staffs of the two regional hospitals. We also thank them for their volunteer service to Champlain Valley AHEC and for their decisions to stay home and work locally here in Vermont.

To learn more about becoming a Health Careers Ambassador with Champlain Valley AHEC, go to our website at [www.cvahec.org](http://www.cvahec.org), click on the "Health Professionals" link, and get involved!

## Increased Demand for Health Careers Programming, continued...

(Continued from page 1)

Interest in Champlain Valley AHEC's Health Careers Exploration Programs has exploded. These programs include a day-long *Focus on Health Careers Conference* in the fall, *Shadow Day* programs held at each of the local hospitals in our region, and *MedQuest*, intensive, week-long experiential and residential programs held during the summer at UVM. During the most recent *Shadow Day*, held at Fletcher Allen Health Care (FAHC) in Burlington on April 30, 24 students in grades 10 through 12 spent the day immersed in health careers exploration, shadowing health care practitioners one-on-one in a variety of hospital settings. Besides the required training in infection control and confidentiality, plus a three-hour job shadow, participants also



A member of the UVM Rescue Squad shows MVU students the proper way to "backboard" an injured person to transport in an ambulance.

interacted with college students currently studying in health care fields, toured the UVM COM and CNHS, and heard presentations from specialists in family medicine, student services, and other areas relevant to their career explorations.

Capacity at the upcoming *MedQuest* programs June 27-July 2 and July 11-16 has

been increased by 25 percent, up to 40 participants from 32 a year ago. That said, there were 120 applicants among 10th and 11th graders in Addison, Chittenden, Franklin and Grand Isle counties for just those 40 spots. Clearly the demand for intensive exposure to health care career paths is high among Vermont youths and Champlain Valley AHEC remains committed to expanding opportunities for students to engage with their interests. To that end, we will be organizing and hosting the second *Focus on Health Careers Conference* to mark Vermont's Health Careers Awareness Month in the fall. Visit our website at [www.cvahec.org](http://www.cvahec.org) for more information on this second annual gathering as plans unfold.

## Meet Gwen Fitz-Gerald, MedQuest Alumnus and Assistant Director

Gwen Fitz-Gerald is one of the first-year medical students hired as a *MedQuest* assistant director for the programs this June and July. An alumnus of Champlain Valley AHEC *MedQuest* programs in 2002 and 2003, Gwen first connected with *MedQuest* and AHEC as a student at Mt. Abraham Union High School in Bristol. Now she is delighted to be serving as an assistant director at the 2010 *MedQuest* program at the University of Vermont, July 11-16.

“I attended *MedQuest* during high school when my guidance counselor brought the opportunity to my attention. Medicine had been a career I had been thinking about for a while and this camp was a perfect opportunity to experience it from multiple angles through shadowing different medical professions,” Gwen says as she reflects upon her *MedQuest* experience. “But the camp isn’t only about learning,” she adds. “It was also great to meet other



Gwen Fitz-Gerald as a *MedQuest* participant in 2003 (left) and as a medical student today (right).

### Former MedQuest Assistant Directors Learn of Residency Placements

UVM medical students who served as *MedQuest* assistant directors in 2007 have recently learned of their residency placements. Champlain Valley AHEC wishes these colleagues all the best as they pursue their residencies. Here’s hoping they will one day return to Vermont to practice medicine in their chosen specialties. Congratulations to:

- Catherine Avener Johnson, Natividad Medical Center, California, Family Medicine
- Anna Liberatore, Orlando Health, Florida, Emergency Medicine
- Lyle Gerety, University of Vermont/Fletcher Allen Health Care, Anesthesiology
- Joe Pare, Boston University Medical Center, Emergency Medicine
- Sarah Mulligan (who has served as a *MedQuest* assistant director for three consecutive years), Maine Medical Center, Portland, Medicine/Pediatrics

like-minded high school students from around the state and we had a lot of fun just hanging out. The sessions were so positive and rewarding in helping me decide that medicine really was the path I wanted to take and now I have the opportunity to help other high school students have a similar experience.”

Joining Gwen as *MedQuest* assistants this summer will be first-year UVM medical students Naiara Barbosa, Megan Gray, Anna Meyendorff, Katherine Irving, and Nkem Aziken. Third-year medical student Hugo Valencia will also return for his third and final year as an assistant.

Looking back on her own days as a *MedQuest* participant, Gwen cites shadowing emergency medical technicians (EMTs) from St. Michael’s College Rescue Squad as one of her most memorable—and influential—experiences. “It inspired me to obtain my own EMT certification, which further convinced me that medicine was the direction I wanted to take. My medical student camp counselors were really inspirational, too. I remember thinking that when I got to medical school I wanted to come back and participate in this camp so I would be able to pass on the excitement that my counselors instilled in me, helping to inspire another generation of medical students or healthcare professionals.”

## Health Career Exploration Ideas for Students

Try out some of these ideas to explore health careers and become more involved.

### Middle School Students

- **Do you know what Stomafaciopiosis is? It may or may not be a real medical term.**  
Test your knowledge of medical terminology by taking the “Fakeology” Quiz on Vermont’s Health Careers website at [www.vthealthcareers.org](http://www.vthealthcareers.org). Send your results to your friends and see if they can beat your score.
- **What medical innovations and advancements will your generation make to help people live better lives?**  
Try the “Doctor Over Time” activity found on PBS’s Science Odyssey: You Try It website at [www.pbs.org/wgbh/aso/tryit/](http://www.pbs.org/wgbh/aso/tryit/). There are also activities relating to mapping the brain and creating the genetic code for a protein.



### High School Students

- **After the devastating earthquakes that affected Haiti and Chile, you may have heard about local healthcare professionals volunteering to help those in need.**  
To learn more about some of the work and programs being done in Haiti, go to [www.vermonthaitproject.org/html/programs.html](http://www.vermonthaitproject.org/html/programs.html).
- **Learn more about the medical field by attending one of the University of Vermont (UVM) Community Medical School’s free lectures.**  
This spring’s topics range from “Doctors Without Borders” to “Obesity and Diabetes.” UVM holds lecture series like this every spring and fall. To see the full schedule go to [www.med.uvm.edu/cms/](http://www.med.uvm.edu/cms/).





## Health Careers Spotlight

Physicians, also known as doctors of medicine or doctors of osteopathy, use a combination of extensive education and training, work experience, and ongoing research to better serve their patients. Once a physician has determined a diagnosis and a treatment strategy, she/he works with the rest of the health care team to put that strategy into action. While all physicians are trained and licensed to diagnose and treat illnesses and to prescribe medications, most choose to specialize in a particular area.

Primary care physicians are doctors who deliver healthcare for the majority of common illnesses and who typically have a group of established patients. Primary care physicians may work in medical offices, clinics, and hospitals, often in combination. Physicians may work independently as a solo practitioner, owning and managing his or her own practice, or may partner with other physicians to form a group practice. Some physicians may be employed as salaried staff by a clinic or hospital.

Several factors, including an aging population and advancements in health care, will ensure that physicians remain in high demand. As increasing numbers of medical practices locate in urban areas, there will be a particular demand for physicians in rural areas in the coming years.

Earnings of physicians are among the highest of any occupation. According to the Medical Group Management Association's Physician Compensation and Production Survey, in 2008, physicians practicing primary care had a total median annual compensation of \$186,044. Self-employed physicians—those who own or are part owners of their medical practice—generally have higher median incomes than salaried physicians. Earnings vary according to number of years in practice, geographic region, hours worked, skill, personality, and professional reputation. Self-employed physicians must provide for their own health insurance and retirement.

To become a physician, it takes four years of undergraduate work and four years of medical school, followed by three to eight years of internships and residency. High school course work should have a heavy emphasis on math and science, followed by an undergraduate degree that incorporates the necessary science classes. Excellent grades along the way are important.

For more information on a career as a physician, please visit the American Medical Association website at [www.ama-assn.org](http://www.ama-assn.org).

**Primary Care  
Physician**

### An Interview with Amy Roberts, MD, Internal Medicine Physician in St. Albans, Vermont

*Amy Roberts, MD is an internal medicine physician in a solo practice in St. Albans, Vermont. Amy received her Bachelor of Science degree from Alma College in Michigan and attended the University of Vermont College of Medicine. She completed her residency at the Primary Care Program at the University of Rochester in New York.*



#### How did you become interested in becoming a physician?

I helped my mother study to become a Registered Nurse (RN) when she was 40 years old. I discovered that I liked to read her textbooks.

#### How long have you been working as a physician?

I graduated medical school in 1991 and completed my residency in 1994—so 16-19 years.

#### What other alternatives did you consider?

None really. I was a fairly focused young woman.

#### Did any person influence your decision to become a physician?

My mother. My mom earned her RN degree

while working three jobs and raising six children. A driven and focused woman as well.

#### In what ways has your occupation changed you as a person?

I am much more protective of my personal time given the significant demands of this profession.

#### If you could have chosen any occupation (no limits) what would it be?

I've never given this much thought as I've always wanted to be a physician. However, now that I'm in this field, I occasionally wonder how different my life would be if I had pursued my love of math!

#### Describe the demands of your job including hours per week, relating with people, and so on.

Self-employed physicians must now be businessmen and women. I never learned anything in college to prepare me for this aspect of my practices—learn as one goes. The number of hours I work per week depends upon my call schedule

In terms of working with people, you can't please everyone but if you just listen, even if you don't have all the answers—that goes a long way!

#### What is a typical day for you?

I'm at work by 7:30 am and work straight through lunch. On Mondays and Thursdays I'm usually home by 7 pm and Tuesday and Wednesday I'm home by 6 pm. During the day I see my scheduled patients and also triage all phone calls, refill medications, communicate with other physicians by phone, review all paperwork, and address lab results and X-ray results by phoning or mailing the results to my patients.

#### Do you encounter any problems combining your job with your family life?

Yes. I have too little time with my family. It's hard to attend games, school functions, and concerts, without significant pre-planning and scheduling. I bring work home every night.

#### What personal characteristics are desirable to be good at this job?

Determination, focus, efficiency, stamina, dedication.

*(Continued on page 5)*

## Interview with Amy Roberts, continued...

(Continued from page 4)

### What do you like best and what aspects of this position cause the most frustration?

I like forming longstanding relationships with my patients—living their lives and sharing their ups and downs. The most frustrating part of the job—insurance company issues—too many to

list! Also, it can be hard to deal with the rare unhappy patient that cannot be satisfied.

### What high school classes should be taken to prepare for this health career?

Math and science help but I graduated medical school with many from arts backgrounds. Anyone can be a physician if determined.

### What advice would you give someone who is planning to enter this field?

Be sure that it's what you *really* want to do, as it takes so much time and money to reach this goal. Once you've arrived, there is significant debt but, if there is job satisfaction, you can pay it off gradually without the stress of being in a profession you don't enjoy.

## Highlights of 2010 Geriatrics and Blueprint Conferences



**The 2010 AHEC Geriatrics Conference** on April 4 was heavily attended and delivered practical workshops covering varied systems and practice perspectives. Of note, Dr. Thomas DeLoughry reported that many practitioners hold inaccurate views of the benefits versus risks of

more aggressive anti-coagulant therapy for patients where such therapy is indicated. Dr. Zail Berry reported on her transition to a house-call practice, which has allowed her to more comprehensively assess and effectively care for elders in the family context they prefer. It has also increased her personal satisfaction with practice. Financial feasibility continues to be a challenge. Dr. Frank Landry and Elizabeth Davis, RN reported on the expansion of PACE multidisciplinary, all-inclusive care for

the elderly clinics in Colchester and Rutland and on the progress of the Seniors Aging Safely at Home (SASH) project that links primary care and health promotion services to senior housing and seeks to demonstrate how to increase wellness while decreasing total health care costs.

At the **2010 Blueprint Conference** on April 26, psychologist and researcher Dr. Edward Noffsinger of Harvard/Vanguard Medical Associates reported on shared, multidisciplinary medical appointments and group-based approaches. He finds that treating patients in groups (after private, brief exams) increases primary care practitioner productivity by 200-300 percent in many specialties and provides opportunities for practitioners to assess and educate patients, as well as for patient learning and peer support that are not possible during individual appointments. Dr. Noffsinger is the author of *Running Group Visits in Your Practice*.

## Health Reform and the Challenge of Primary Care continued...

(Continued from page 1)

current primary care shortage here in the region.) This tenuous situation will only be exacerbated as the expanded insurance coverage called for by health reform is phased in over the next decade.

Champlain Valley AHEC is well-positioned to rise to this challenge and help meet the burgeoning demand for quality primary care in Vermont in the days, months, and years ahead. One of Champlain Valley AHEC's most vital roles is to administer educational loan repayment programs geared toward those entering primary care and nursing, as well as those intending to practice in rural and underserved areas of Vermont. Just this year, we distributed more than \$161,000 to 38 primary care practitioners and three practices in Addison, Chittenden, Franklin, and Grand Isle counties to support the retention and recruitment of physicians, nurses, and other primary care providers through loan repayment.

Our work with the UVM Colleges of Medicine, Nursing and Health Sciences also continues unabated. Champlain Valley AHEC supports students in rural and underserved primary care rotations and research throughout the region. With the advent of health reform, these collaborative efforts between AHEC, academic institutions, rural and community health centers are more essential than ever. (See "AHEC Summer Projects" on page 7 to learn where health care students supported by Champlain Valley AHEC are working this summer.)

Prudent, proactive development of Vermont's health care workforce is a must as health reform takes hold. Across the four-county region of the Champlain Valley, high school students are responding with ever-increasing interest and enthusiasm to Champlain Valley AHEC's health careers exploration programs, including the week-long *MedQuest* residential program at UVM for sophomores and juniors; *Shadow Day*

programs at the region's three hospitals; and the annual *Focus on Health Careers Conference*, which debuted last November as the capstone event of Vermont's annual Health Careers Awareness Month. (Read all about the 2010 *MedQuest* and Fletcher Allen Health Care *Shadow Day* programs on page 1.)

Our great state of Vermont is often seen as an important, scale-model laboratory for exploring new ways of thinking and acting about the public policy issues – social, environmental, scientific, and energy-related – that vex us as a nation. The most significant reform of our health care system in generations is under way. Vermont can play a central role in showing others how to achieve meaningful reform that assures access to quality health care for all. We at Champlain Valley AHEC look forward to working with all of our community collaborators in making this exciting and compassionate vision a reality.

## First Statewide Migrant Farm Worker Conference

Farm workers, farmers, citizens, artists, health care providers, educators, service providers and government officials gathered at Middlebury College's Bicentennial Hall on Saturday, April 24 for the state's first Migrant Farmworker Conference, sponsored by



Addison County Farm Worker Coalition (ACFWC) and many partners including the Consulate of Mexico in Boston. Champlain Valley AHEC cosponsored and coordinated the health care offerings.

The inaugural conference took place against the backdrop of a heated national debate and significant tension over newly passed legislation in Arizona that authorizes authorities to request documentation from any individual suspected of being an illegal immigrant. Reports also circulated that Arizona officials had already approached children of color walking to school, demanding papers.

The Hon. Fernando Estrada-Samano, consul general of Mexico in Boston, spoke to the group, thanking attendees for supporting Mexican workers, calling on the United States to honor basic human rights, and challenging his own government and countrymen to provide more economic opportunity for Mexican citizens. He noted that Mexican workers come north "to do

what any of us would do, simply to care for their families." He praised the courage of workers who make long, dangerous journeys and live in constant fear. In a morning address,

coalition member and peace activist Beatrice Parwatiker called for establishment of a guest worker program for migrant dairy workers who cannot be served by existing permit programs or proposed amendments.

ACFWC cofounder, nurse and dairy farmer Cheryl Connor said migrant dairy farm workers are here because "they need work, and we, the farmers, need them. No one was taking these jobs. We are losing farms." Even with help of migrant farm workers, several organizations estimate that 200 dairy farms in Vermont remain at risk of closure.

The number of migrant workers in Vermont has risen sharply in recent years. Erin Shea, director of migrant education at the University of Vermont Extension Service, reported that as many as 1,500 migrant workers come to Vermont to work each year, in addition to approximately 1,000 United States citizens who move from farm to farm. Foreign-born migrant farm workers have an average 5th-6th grade education level and will benefit from plain language at work and in healthcare delivery, Shea said.

Regional health care providers offered an overview of their work with migrant workers. Lauren Young, RN, of Open Door Clinic in Middlebury, said taking health services to special events and directly to farms reaches three times the number of workers seen during traditional clinic hours. Core services delivered by Open Door through these means include health assessments and immunizations, as well as screening for chronic illnesses, injury, and risks related to occupational hazards, including respiratory and orthopedic issues. Migrant health services in Addison County are being expanded through a Health Resources and Services Administration (HRSA) outreach grant administered by BiState Primary Care Association.

Lauren Trottier, an outreach worker for the Northern Tier Center for Health (NOTCH), a Federally Qualified Health Center (FQHC) in the Champlain Valley AHEC region, shared that NOTCH is working diligently to build trusting relationships with Franklin and Grand Isle County farmers and farm workers in a region along the Canadian border where the U.S. Immigration and Naturalization Service has a strong presence.

Dr. Robert Pitts of the Porter Hospital Emergency Department in Middlebury observed that migrant workers are most at risk for occupational injuries and illnesses. The physician said he struggles with how and whether to compile and retrieve data on hospital utilization by the workers given the ongoing public controversy over their presence in our communities. Foresta Castaneda of WomenSafe in Middlebury said services offered to women and families in the migrant worker community are similar in many ways to those offered to all women. Castaneda noted that special challenges and barriers to service delivery include the complex, stressful lifestyles of migrant workers, language differences, and concerns about whether reporting an abuser or other actions could lead to deportation of patients, partners, and family members.

Karin Hammer-Williamson, education resource coordinator for Champlain Valley AHEC, told conference-goers that the statewide AHEC Network offers cultural competency technical assistance services, connections to the UVM College of Medicine and other health programs at the university; and support for student projects that assist community collaborations in addressing migrant farm worker concerns.

In an afternoon session on mental health Maria Mercedes Avila, cultural and linguistic competence coordinator for the Substance Abuse and Mental Health Services Administration (SAMSHA) Youth in Transition grant, reviewed core cultural competency theories related to mental health. She noted that in many cases worker health and mental health risks are not based on the culture of origin. Most workers arrive in the United States with baseline health and mental health statuses at least as

*(Continued on page 7)*

### **Invisible Odysseys: Art by Mexican Farm Workers in Vermont**

Migrant farm workers and artist B. Amore opened an "Invisible Odysseys" exhibit of fourteen dioramas, narratives, and hangings that illustrate workers journeys and perspectives. The Consul General presented a gift to each worker, who then addressed the conferees. Some workers attended with their children, despite the risk that, when parents are detained, families are split up for long periods of time.

The exhibit has been documented in a commemorative booklet "Invisible Odyssey: Art by Mexican Farm Workers in Vermont"/"Odiseas Invisibles: Arte de Trahajadores Mexicanos en Vermont" edited by B. Amore and published by Kokoro Press. The publication and exhibit powerfully depict workers dreams, perspectives on well-being, and the stress of their displacement in a land of plenty. For ordering information, email [kokoropress@bamore.com](mailto:kokoropress@bamore.com).

## The Annual Primary Care Survey and the Champlain Valley

The annual AHEC Primary Care Survey for 2010 is under way. Many thanks to those who have already returned forms. The survey package also includes an optional survey for practitioners to help identify clinical tool and other support needs. As a token of our thanks, five practitioners and practice managers will receive iTunes gift cards.

As always, the 2009 survey has been used to inform decisions by the Champlain Valley AHEC Educational Loan Repayment Committee. The 2009 report includes a more person-centered focus with an estimate of the number of individuals that must be trained and recruited into primary care in order to meet the "full-time-equivalent" gap. The national model used

for the supply benchmark is based on full-time equivalents (FTE), yet over the years it has become apparent that many practitioners do not spend all their work time in delivery of care. The new estimate applies the average FTE in primary care to the FTE gap to estimate the number of individuals needed to close the gap. Franklin County has the highest physician gap at 11.5 FTE and the estimate of individuals needed is significantly higher at 15 persons. This difference of more than 20 percent is significant at a time when educators are developing strategies to increase the capacity of our medical, nursing, and allied health training programs.

Practitioners work less than full-time in care delivery for a variety of reasons. Many

work part-time in research, administration, teaching, or specialty care functions. Others may work less than full-time in a given year to accommodate personal or family needs. With health care reform setting the stage for nearly all Americans to have access to insurance for primary care, it is critical that our studies consider the number of individual practitioners required to deliver the care needed by all. The annual AHEC Primary Care Survey is a vital part of our toolkit. If you have any questions or concerns about the 2010 survey now in progress – or about the 2009 Primary Care Survey Report released this past winter – please contact Karin Hammer-Williamson, BASW, Education Resource Coordinator, at (802) 527-1474, x11 or email at [khammer@cvahec.org](mailto:khammer@cvahec.org).

## AHEC Summer Projects a Rite of Passage for Health Care Students

Each year Champlain Valley AHEC supports a number of summer projects that advance student learning and contribute to significant community needs.

**Luke Vierthaler (UVM COM '13) and Loretta Charles (UVM CNHS '12)** will serve as the first multidisciplinary student team in a new SEARCH grant effort involving the UVM College of Medicine Office of Primary Care and the Vermont AHEC Network. The grant focuses on placing students in community experiences relevant to rural needs. Luke and Loretta will serve for one month at Seniors Aging Safely at Home (SASH) to identify ways to strengthen linkages between primary care and the multidisciplinary health promotion team on site. The pair will also reassess the high-needs residents who have completed a first year of health promotion activities. The project is cosponsored by a wide array of community partners and led by Cathedral Square Corporation. It will be replicated at other senior housing sites

throughout Vermont and reach hundreds of rural seniors.

**Chester Areson (UVM COM '13) and Delia French (UVM COM '13)** have been named Freeman Medical Scholars for 2010 summer projects. Chester will serve at Open Door Clinic, assisting staff and volunteers in developing approaches to assess the mental health needs of migrant farm worker patients. Maria Mercedes Avila, MA, cultural and linguistic competence coordinator for the Substance Abuse and Mental Health Services Administration (SAMSHA) Youth in Transition mental health grant will provide technical assistance to the project. Delia will identify primary care and health promotion preferences of a new American group of community members, building on approaches from last year's Freeman summer projects and her own recent work developing health care orientation workshops for patients of the Community Health Center of Burlington.

## First Statewide Migrant Farm Worker Conference continued...

*(Continued from page 6)*

good as their Vermont counterparts. Instead their wellness is challenged by circumstances here in the United States and health status declines over time. The secrecy and risk in which many migrant workers live, the inherent risks of their occupations, and separation from the family – a core asset in Latino health promotion – combine with a lack of

educational opportunity, poverty, and racism to erode wellbeing. This decline is exacerbated by some employers who take unfair and illegal advantage of workers, Avila said.

Avila is working with Julie Arel, MSW, MPH of Addison County's Open Door Clinic and Chester Areson, a Freeman Medical Scholar from the UVM College of Medicine this summer to identify tools and practices to increase Open Door Clinic's

capacity to address farm workers' mental health needs. Watch for the findings of this effort to be published this fall in a poster presentation that will be available online at [www.cvahec.org](http://www.cvahec.org).

For a packet with the full conference proceedings and a health care bibliography compiled by Champlain Valley AHEC and Open Door Clinic, visit [www.cvahec.org](http://www.cvahec.org) and click on the "Cultural Competency" link.



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Funding support for the Champlain Valley Area Health Education Center is provided by the University of Vermont College of Medicine through contributions from the Health Resources and Services Administration, the State of Vermont, the Freeman Medical Scholars Program, Fletcher Allen Health Care and community hospitals.

Vermont's AHEC Program is a statewide network of the Northeastern Vermont AHEC, the Champlain Valley AHEC, the Southern Vermont AHEC, and the UVM College of Medicine.