

FINAL REPORT

RURAL EXTERNSHIP PROJECT

SUMMER, 1974

Lakes Area Regional Medical Program, Inc. 2929 Main Street Buffalo, New York 14214

John R.F. Ingall, M.D. Executive Director

Robert J. Beebee Project Director

# EVALUATION REPORT LAKES AREA REGIONAL MEDICAL PROGRAM, INC.

#### 1974 RURAL EXTERNSHIP PROJECT

#### I. BACKGROUND

The Rural Externship Project was developed by the Lakes Area Regional Medical Program in an attempt to alleviate the problem of shortages in health care personnel in rural areas. The goal of the Project is to increase the availability of all health professionals in the rural areas of Western New York State and Northwestern Pennsylvania.

Nine health science students participated in the Project in 1970, the first year of operation. The number of student participants in 1974 was 57. In 1971, there were 22 externs; in 1972, there were 34; and in 1973, there were 55.

In addition to the principal objective of interesting health science students in a rural health career following graduation, other objectives of the Rural Externship Project are:

- To enable students to participate in an interdisciplinary "team" approach to health care based, in many cases, in a rural or semi-rural hospital setting;
- 2. To expose students to rural health care delivery;
- 3. To expose students to a rural community and rural life style through actually living in a rural community; and
- **4.** To make students more aware of the characteristics and problems of rural health practice.

### II. PROJECT ORGANIZATION

General administration of the Project was managed by the project director who is a member of the Lakes Area Regional Medical Program staff. An advisory committee was formed which consisted of representatives from each of the health science schools at the State University of New York at Buffalo, student representatives, past preceptors, health planners, and hospital administrators. This committee, together with the Lakes Area Regional Medical Program as sponsoring agency, determined program policy, advised the director relative to specific problems, and will make plans and recommendations for future continuance of the Project.

Health disciplines involved in the 1974 Project included medicine, pharmacy, dentistry, nursing, physical therapy, podiatry, and others as listed in Table I.

TABLE I: Externs by Discipline

	<u>#</u>	<u>%</u>
Medicine	21	36.8
Pharmacy	10	17.5
Nursing	6	10.5
Dentistry	5	8.8
Physicial Therapy	5	8.8
Medical Technology	2	3.5
Podiatry	2	3.5
Hospital Administration	1	1.8
Medical Record Technology	1	1.8
Nutrition	1	1.8
Occupational Therapy	1	1.8
Public Health	1	1.8
Speech Pathology	1	1.8

There were 182 applicants for the 57 externship positions available.

Several factors were taken into consideration in selecting the externs.

Among the most important ones were years completed in professional school, place of residence, and the needs and requests of the various preceptor sites for a particular distribution of students in the health disciplines.

Second, third, and fourth year students were usually favored over first year students because the experience would be more productive and meaningful to both the student and to his preceptor. In addition, advanced students are nearer to the time when they must decide where they will practice.

#### III. OPERATION OF PROJECT

Close working relationships were developed between the principal preceptors and their students. The externs lived in the communities where they worked. In addition to the principal preceptors, there were many others who supervised the externs for brief periods, so that the total number of preceptors involved in the program was over one hundred. This permitted the extern to benefit from a broad professional experience with a number of preceptors in various disciplines and specialties.

Basically, operation of the program called for a moderate amount of structuring and scheduling, enough to provide stability of planning, but at the same time not being too rigid, thereby allowing some degree of freedom of action for the externs. This permitted them to participate in deciding how they would like to spend part of their time, according to their own individually developed interests.

On June 18th of this year, a general orientation meeting for preceptors and externs was held in the Lakes Area Regional Medical Program offices.

Approximately 85% of the externs attended this meeting.

Chautauqua County in particular held a number of orientation, discussion, and critique sessions while the project was in operation.

In addition, the Chautauqua County group formed a planning and advisory committee which functioned before and during the program period. This committee was an important factor in the outstanding success of the Chautauqua County effort.

Externs were paid a stipend of \$75 per week. Housing was arranged by the externs, except in Chautauqua County where the W.C.A. Hospital provided rooms.

The diversity of experience of the externs was most extensive. In addition to having contacts with all hospital departments, most of them went out into the community under the supervision of various preceptors and enjoyed an enriching experience in many aspects of health care delivery and delivery of health related services. This occurred in rural, semi-rural, and small urban areas and included patients from each of these areas. Medical and dental offices were involved, as well as public health offices, social service agencies, nursing homes, community pharmacies, family practice centers, physicians' home visits, and home visits with the Visiting Nurses Association and public health nurses.

## IV. COSTS

The following is the budgetary breakdown of the 1974 Rural Externship Project:

Stipends	\$33,800
Salaries & Benefits	12,700
Travel	2,850
Publications	700
<b>Other</b>	250
TOTAL	\$50,300

#### V. PUBLICITY

Interpretation of the 1974 Rural Externship Program to health professionals and the general public in the region was excellent. Externs were well received by both the professional and the general community.

Many newspaper articles appeared in a large number of local papers, and the project was carried on the wire services. Articles included several feature stories of personal interviews with externs and preceptors. Accounts of the undertaking were heard on radio stations. Letters were written to area legislators concerning the project. Interested and favorable replies were received.

#### VI. RESULTS AND EVALUATION

Comments of preceptors and externs alike have been overwhelmingly favorable and enthusiastic. Many of the externs have asserted that they plan on a rural practice following graduation. Specific quotations appear in attachments to this review.

Following are several tables selected from the evaluation questionnaires of students and preceptors. These tables are significant in their indication of attitudinal changes on the part of the externs. They point out clearly the substantial degree of success apparent at this time in accomplishing the Project's objectives. Contact will be maintained with the students whenever possible so as to be able to determine the degree of accomplishment of goals and objectives over the longer term of several years.

# TABLE II: <u>Career Plans of Students Regarding Rural Practice</u>

On both the pre-program questionnaire and the questionnaire given after the externship, students were asked the following two questions:

- 1. Would you consider the possibility of working in a rural area when you complete your training?
- 2. Do you have plans to work in a rural area when you complete your training?

	"Yes" Before	"Yes" After
Would you consider?	81.5%	97.1%
Do you plan?	31.5%	42.9%
	(N = 54)	(N = 35)

## TABLE III

After completion of the program, students and preceptors were asked:
"Would you like to see this program incorporated into the school curriculum?"

		Students	Preceptors
Yes		68.6%	56.3%
No		11.4%	25.0%
Uncertain	* * * * * * * * * * * * * * * * * * *	20.0%	18.6%
	TOTAL	100.0%	99.9%
		(N = 35)	(N = 36)

## TABLE IV

Answers to the post-program questionnaire indicated that several significant changes had occurred in the students' perceptions of rural practice. For example, "How would you rate the facilities available to the health professionals of a rural area?"

	Preceptors	Stud	ents
		Before	After
Excellent	47.2%	5.8%	17.1%
Very Good	30.6%	9.6%	31.4%
Good	16.7%	40.4%	31.4%
Fair	2.8%	38.5%	20.0%
Poor	2.8%	5.8%	0.0%
TOTAL	100.1%	100.1%	99.9%
	(N = 36)	(N = 54)	(N = 35)

## TABLE V

"What is your overall impression of the quality of health care services offered by your profession in a rural as opposed to a metropolitan area?"

•		Stude	ents
	• • •	Before	After
Excellent		5.8%	28.6%
Very Good		13.5%	45.7%
Good		44.2%	22.9%
Fair		30.8%	2.9%
Poor		5.8%	0.0%
	TOTAL	100.1%	100.1%
		(N = 54)	(N = 35)

TABLE VI

"The facilities most in need of development/improvement relative to health care needs in rural areas are primarily related to:"

	Preceptors	Stude	ents
		Before	After
Prevention	28.6%	36.5%	41.7%
Primary Care	40.0%	38.1%	30.6%
Rehabilitation	31.4%	25.4%	27.8%
TOTAL	100.0%	100.0%	100.1%
	(N = 36)	(N = 54)	(N = 35)

# TABLE VII

"I believe that the variety of health care services provided in rural areas is as great as in metropolitan areas."

		Preceptors	Stude	
	•		Before	After
Agree		52.8%	13.2%	31.4%
Disagree		41.7%	66.0%	57.1%
Don't Know	:	5.6%	20.8%	11.4%
	TOTAL	100.1%	100.0%	39.9%
		(N = 36)	(N = 54)	(N = 35)

#### VII. SUMMARY AND RECOMMENDATIONS

- 1. Fifty-seven externs participated in the 1974 program, funded entirely by the Lakes Area Regional Medical Program.
- 2. Externs were placed in all nine counties of the region.
- 3. Reports on the results of the 1974 program were generally very favorable, from both preceptors and students.
- 4. 42.9% of the externs are definitely planning on rural health practice following graduation; 97.1% are considering it.
- Problems involved were basically minimal. Such concerns as housing,
   board, and personality conflicts offered only minor difficulties.
- 6. The basic structure of the program was generally accepted. General activity guidelines and schedules allowing for ample flexibility were by and large the methods of choice of preceptors and students alike.
- 7. Existing preceptors are more than willing to continue in a future project, with several others already asking to be included in a 1975 program.
- 8. The following specific recommendations for a future summer program are offered:
  - a. Generally speaking, a continuation of the 1974 mode of operation, especially with reference to program structure, content, and scheduling. Ridigity should be avoided. Most externs and preceptor sites prefer flexibility.
  - b. Preparation of brief outlines for preceptors in the various health disciplines so that they can understand more fully what they might cover, also including project background and what is expected of the preceptors.

- c. Where possible, each extern should be assigned a primary preceptor to whom (s)he can relate over the eight-week period.
- d. Recruit more advanced health students. Those who are in the later years of their studies are able to benefit more from their experience and make it a more satisfying one for their preceptors also. Besides, the advanced students are nearer to the time when they must decide on their locale of practice.
- e. More in-depth screening of student applications. A longer, more detailed application form could help accomplish this, seeking more knowledge of students' interests and background.

A final recommendation can be made which will serve also as a fitting conclusion to this report. It may be stated simply that it is to be hoped that continuity of the project can occur, thereby assuring steady and progressive future implementation of its goals and objectives. In this manner, the Rural Externship Project will impart a lasting effect upon the region it seeks to serve.

# Selected Student Comments Following Their Externship Experience

- "I feel this type of program would be extremely interesting and helpful to professional students uncertain of the area in which they intend to practice."
- "I feel this is beneficial for all students working toward a career in the medical profession -- what could be better than working in your profession and being exposed to related health professions."
- "The experience, both clinical and patient contact, has been invaluable."
- "I personally feel that the first-hand experience makes the classwork more relevant."
- "I was surprised to find such competency in a small hospital."
- "I was not sure that health care would be as integrated as it was. The health professions were really interested in knowing the total picture."
- "I have lived in a rural community all my life and this summer's experiences have served to confirm and expand my previous expectancies."
- "The regular medical care was what I expected, but the atmosphere that prevailed was unique -- that of a small united community."
- "I expected medical practice in the rural area to be somewhat 'backwards' and I found this not to be true at all."
- "I feel that this sort of exposure has enhanced my educational career greatly."
- "I was very satisfied with this year's program. It proved to be an invaluable experience for me."
- "I think it would be very challenging and self-satisfying to be employed in a rural setting; people seem to be more dependent on you, and more grateful for your services."
- "I will practice in a rural area with no reservations."
- "I enjoy the atmosphere in rural areas; although not sophisticated, there is still an air of professionalism on the part of the pharmacist. I also enjoyed the confidence the rural people had in the pharmacist in many areas."
- "Overall, I think it is a <u>great</u> program, and I wouldn't have traded my two summers for anything. I hope others got as much out of it as I have. The one important lesson I've learned is that all disciplines must work together to deliver quality medical care, no matter whether it is rural or metropolitan. The people in Jamestown were great and more than willing to help."

#### Student Comments (Continued)

"I think the program is very good. It offers the student some practical experience in his aspired discipline and provides a little incentive along side. I would encourage that the program be considered in future years."

"I felt the program was a definite success. The people and experiences I encountered greatly enriched my appreciation of pharmacy, health care, and the patient. The encouragement I received from my preceptors was deeply appreciated. I am going to strongly recommend the program to anyone in Pharmacy School as invaluable experience in their undergraduate training."

"Thank you for allowing me to participate in this program. I gained valuable clinical experience and enjoyed living in Wyoming County."

"I enjoyed the program very much. It has helped me greatly. I hope that I may participate next year. Thank you."

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# PARTICIPANTS 1974 RURAL EXTERNSHIP PROJECT

LOCATION	EXTERN	DISCIPLINE	PRECEPTOR
Andover, New York	Richard Cudahy	Medicine	Daniel Tartaglia, M.D.
Arcade, New York	Leonard Wagner	Medicine	Gerald Diesfeld, M.D.
Batavia, New York	Robert Baron	Public Health	Victoria Markellis, M.D
Bradford, Pennsylvania	Arthur Goodman Kim Keneske Patti Kulka Debra McCracken Janet Schoonmaker	Pharmacy Medical Records Speech Pathology Nursing Physical Therapy	William Killen Genevieve Chiodo, RMA Ann Confer Dorothy Ekas, R.N. Melody Pollock, RPT
Dunkirk, New York	Margaret Mitchell David Nash	Medicine Medicine	George McNaughton George McNaughton
Erie, Pennsylvania	Lucienne Conti William Davis Rita DePhilip Sui-Hing-Ho Candace Johnson Helen Li Joel Owerbach Terri Smith George Walker	Pharmacy Pharmacy Pharmacy Pharmacy Pharmacy Pharmacy Pharmacy Pharmacy Pharmacy Physical Therapy Pharmacy	Frank Mozdy, RP Ange LaFuria Frank Mozdy, RP
Franklinville, New York	John Norbund	Medicine	Ovid Knight, M.D.
Gowanda, New York	Stanley Scott	Dentistry	Robert Watson, D.D.S.

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LOCATION	EXTERN	DISCIPLINE	PRECEPTOR
Jamestown, New York	Marc Fedder	Medicine	John Voltmann, M.D.
	Joseph Felsen	Medicine	Carl Hammerstrom, M.D.
	P. Scott Forsb <b>erg</b>	Physical Therapy	George Lawn, D.M., P.T.
	Peter Guzzetti	Dentistry	F. Palmer Lindblom, D.D.S.
	Marsha Larson	Nursing	Marilyn Hale
	Bruce Nohejl	Medicine	Glen Ebersole, M.D.
	Cheryl Nohejl James Nord Rita Pridgen	Medicine Physical Therapy Nursing	Lillian Ney, M.D. George Lawn, D.M., P.T.
	Albert Schlisserman Martha Slye	Medicine Hospital Admin.	Cynthia Dauch, Ed.D. H. Gregory Thorsell, M.D. Murray Marsh
	George Toufexis	Medicine	R.X. Williams, M.D.
	Dale Voelker	Dentistry	Charles Sinatra, D.D.S.
	Jonathan Woodcock	Medicine	Wilson Shaw, M.D.
	David Wuertzer	Podiatry	Bert & Eunice Klein, D.P.M.'s
Lewiston, New York	Elaine Jansen	Medical Technology	Polly Artley, ASCP
Lockport, New York	David Cavallaro	Podiatry	Gordon Mittleton, D.P.M.
	Jessica Kort	Physical Therapy	Hanna Juul
	Stephen Stockton	Dentistry	John Kugler, D.D.S.
Mayville, New York	Mary Costello	Nursing	Arnold Mazur, M.D.
	Mark Strassberg	Medicine	Arnold Mazur, M.D.
	Kathleen Szymk <mark>owski</mark>	Nutrition	Arnold Mazur, M.D.
Newfane, New York	Barbara Penn	Medicine	Consan Dy, M.D.
N. Tonawanda, New York	Joseph Bylebyl	Medicine	Richard Carlson, M.D.
	Mark Polis	Medicine	Harry Bylebyl, M.D.

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LOCATION	EXTERN	DISCIPLINE	PRECEPTOR
Olean, New York	Robert Krall Ellen To Victor Vena	Medicine Medical Technology Pharmacy	Arthur Beck, M.D. Elaine Brown Donald Jones
Perry, New York	Joseph Graham	Medicine	Paul Murphy, M.D.
Springville, New York	David Sokal	Medicine	Timothy Siebel, M.D.
Warsaw, New York	Susan Bruch Fabia Kwiecinski John Verby Vivian Wasik	Occupational Therapy Medicine Medicine Nursing	Gail Riley, OTR R.T. Williams, M.D. M.F. Smallwood, M.D. Patricia Stopen, R.N.
Wellsville, New York	Marilyn Jordan	Nursing	Wellsville Nursing Home
West Seneca, New York	Warren Krutchick	Dentistry	Ronald Zeilin, D.D.S.