

**Executive Leadership 2008-2009**  
**Division of Health Access and Tobacco**

MAJOR ACCOMPLISHMENTS OF PAST YEAR (2007-2009)

**Area Health Education Center Network:**

The Department of Health administered \$19.5 million dollars in legislative appropriations through contracts with the state medical schools to fund the Area Health Education Center (AHEC) Network's core activities of extension of academic resources, influencing health professions education, recruiting providers to areas of need, and providing educational/service linkages in 2007-2009. The return on the state's investment totals close to \$33 million in actual services delivered, and is used to:

- support direct patient care with over 14,000 AHEC preceptors, residents and students providing care to over 2.3 million Floridians;
- provide over 166,000 hours of continuing education programs to more than 28,000 practitioners caring for Florida's underserved population; and to
- deliver more than 220,000 hours of health careers enrichment activities to over 2,800 Florida students to support healthcare practitioner workforce efforts.

**Area Health Education Center Network Tobacco Training and Cessation Program:**

The AHEC Tobacco Training and Cessation Program has received \$20 million dollars in from 2007-2009. The AHEC efforts are supported by their established infrastructure across all counties in Florida and focus on the training of health care professionals and students on best practice tobacco cessation methodologies using nationally recognized curriculum, tobacco continuing education classes and an extensive tobacco cessation program. Cessation activities are multi-faceted and include one-on-one counseling, group cessation classes, materials and referrals to providers and the Florida Quitline.

AHEC accomplishments include:

- Nearly 24,000 medical, nursing, pharmacy and other health professions students and community-based practitioners received AHEC tobacco training
- Health professions education programs at 60 colleges and universities located throughout the state incorporated AHEC tobacco training into the curricula of a wide range of disciplines
- AHEC tobacco prevention education reached nearly 150,000 youth from over 300 schools in 56 Florida counties
- Nearly 22,000 Floridians received cessation counseling at 250 AHEC cessation sites established in 67 counties

**Office of Health Professional Recruitment and State Primary Care Office:**

Shortage Area Designations:

- 114 Health Professional Shortage Area Updates
- 24 New shortage area designations
- 12 Medically Underserved Area/Medically Underserved Population Updates (21 were reviewed)

National Health Service Corps (NHSC):

- 107 New NHSC clinicians assigned to Florida
- 159 NHSC clinicians currently assigned in Florida  
3<sup>rd</sup> highest in U.S.

J-1 Visa Waiver Program:

- 60 new J-1 visa waiver physicians assigned to Florida during the past two years.
- 90 J-1 visa waiver physicians currently practicing in Florida.

Expanding Access To Primary Care Grants:

Grants totaling \$**13.2** million were awarded to **39** Community Health Centers under the Community Health Center Access Program Act, 409.91255, Florida Statutes. The State Primary Care Office monitors and oversees the activities under the grant agreements.

### **Physician Workforce Initiatives:**

Physician Workforce Update July 2006-2009

The physician workforce initiative efforts since 2006 involve the efforts of the Governor, Florida Legislature, Department of Health and a large number of stakeholders interested in the development of Florida's physician workforce and the access to quality care for Florida's residents and visitors. While the workforce effort has evolved over the past 10 years, only since 2006 has the department maintained its leadership role in reporting and strategic planning. In 2006, the first voluntary physician workforce survey was developed and implemented. The voluntary survey yielded an impressive 94% response rate and an excellent starting point for stakeholders and Department staff to begin to dissect areas of concern and questions that needed further evaluation. This information led to the successful passage of SB 770 in 2007, codified in section 381.4018, F.S.

The statute directed the department to focus on multiple activities, including further survey development, data analysis and reporting, and collaborating with governmental and non governmental stakeholders. In response to this mandate, the State Surgeon General formed the Healthcare Practitioner Ad Hoc Committee in 2008. The committee has been diligent in effort and dedicated in focus, offering expertise to the department in reporting, analysis and the effort that established our ability to provide continuous, reliable data, the mandated survey.

The State Surgeon General reappointed the Healthcare Practitioner Ad Hoc Committee in 2009 to finalize the state's strategies to address workforce development. Those strategies are three-fold, addressing medical education, graduate medical education and the recruitment and retention of physicians in Florida. These strategies will be finalized in the November 2009 Physician Workforce Annual Report, but preliminary efforts focus on the following concepts:

1. Introduce health care as a profession and strengthening skills needed for medical school from elementary school through pre-medical education.
2. Consider the development of post-baccalaureate programs to meet the state's needs, i.e., transitional programs focusing on recruiting

underserved and minorities into medicine from areas to which they may return.

3. Discuss medical school's best practices and costs associated with recruitment and retention.
4. Consider how to ensure a sufficient quantity and quality of academic (i.e. basic science) and clinical faculty needed in Florida's allopathic and osteopathic medical schools as the number of medical school students increases by making practicing docs affiliates of medical schools or faculty.
5. Consider funding alternatives for graduate medical education positions, including the possibility of providing state funding for an increased number of GME positions in Florida based on physician workforce information and should address the critical geographic, demographic and specialty needs of the state.
6. Maximize federal and state programs that use incentives to attract physicians to this state or retain physicians within the state. Strategies might include the use of programs such as the Florida Health Services Corps (s.381.0302, F.S.) and the Medical Education Reimbursement and Loan Repayment Program (s. 1009.65, F.S.) as a means to immediately provide physicians to critically underserved areas.
7. Attention/involvement of boards of medicine and osteopathic medicine to address areas of licensure that may be streamlined for identified specialties of need or by geographic location or, as needed, before a physician is disciplined, to recruit to volunteer upon retirement, licensure process, etc.
8. Consider and address cooperative efforts with government, hospital or other interests to develop scholarship, loan repayment, or other incentive programs addressing:
  - a. Medical Debt
  - b. Lifestyle issues
  - c. Telehealth/telemedicine
  - d. Administrative Burdens
  - e. Start up costs/Office Leases
  - f. Emergency On-Call Requirements
  - g. Community involvement
9. Address matters related to practice environment that impact Florida's ability to recruit or retain needed practicing physicians.
  - a. Liability Climate
  - b. Malpractice-Insurance Rates
  - c. Low Reimbursement Rates
  - d. Amendment 8-3 Strikes
  - e. Managed Care
  - f. Number of Uninsured
10. Outreach educational campaign to focus on medical practice climate in Florida, dispelling any myths or inaccurate state by state comparisons to residents or interested physicians.

One of the greatest achievements of the physician workforce initiative has been the successful development of the mandatory surveys and subsequent data collection and reporting. For the first time in the state's history there is a valid and continuous source of information on physicians by specialty and geographic location. As collection continues, the state will further its work on trend data and finalizing a model that will be able to forecast future workforce needs and opportunities.

To date, the data on all Florida physicians has had a remarkable 98% reporting and we have information including:

- Of all 56,197 allopathic and osteopathic physicians on file, only 37,860 (67.4%) are currently active.
- Age: 5% are in the 24-35 age bracket, 26% are in the 36-45 age bracket, 69% of the entire active physicians are 46 and older. Average age for MD and DO: 52 and 48, respectively.
- Gender: 77% Male (n=29,078)
- Race: White(65%), Hispanic (15%), Asians/Pacific Islander (11%), Black (4.5%), Other (4.4%), and American Indian (.1%)
- Distribution of Physicians by Region: 97% practiced in urban area, compared to just 3.3% in rural area.

Additional data items are reported in the Physician Workforce Annual Report, updated each November and posted online at:

[http://www.doh.state.fl.us/Workforce/CHEP\\_GME.html](http://www.doh.state.fl.us/Workforce/CHEP_GME.html)

### **Office of Rural Health:**

During FY 2008-09, the Florida Office of Rural Health received \$4.73 million in state and federal revenues to support improved health services to citizens in rural areas.

Accomplishments for the year included:

- Awarded \$4 million in grants to Florida's 26 rural hospitals under the rural hospital capital improvement program for needed capital improvements;
- Provided \$572,000 in contract funding to support efforts by nine state certified rural health networks to improve the efficiency and effectiveness of health care in rural communities;
- Provided \$906,000 in contract funding to support eleven Local Health Councils for data collection, planning, evaluation, and support of local efforts to improve access to health services;
- Awarded \$139,492 in grants under the federal Small Rural Hospital Improvement Program to 16 small rural hospitals to improve quality of care through health information technology;
- Awarded \$60,000 in grants to five rural health networks for improving access and quality of care;

- Awarded \$60,000 in grants to twelve rural county health departments to conduct local health needs assessments;
- Provided \$100,00 to fund year seven of an ongoing medication safety program for Florida's critical access hospitals with Florida's Medicare Quality Improvement Organization. The program is conducted in conjunction with faculty from the University of Florida College of Pharmacy and Shands Teaching Hospital to provide technical assistance to Florida's eleven critical access hospitals to reduce or eliminate errors in the prescribing, dispensing, and administration of medications to hospital patients.
- Awarded \$305,000 in grants for pharmacy health information technology to ten critical access hospitals as part of an ongoing effort to assist Florida's small rural hospitals to improve their quality of healthcare. The grants will assist rural hospitals in implementing information technologies identified as significantly impacting prevention of hospital medication errors. The hospitals will be acquiring over equipment, including, pharmacy computers, automated medication dispensing cabinets, and computerized medication infusion pumps.
- Supported efforts to improve the financial sustainability of county health departments by providing economic impact analysis training to 15 county health departments and 11 Local Health Councils.
- Awarded \$30,000 in funding to the Florida Association of Rural Emergency Medical Services to support efforts to recruit and retain emergency medical services personnel in rural counties;
- Funded a rural health research project with the Florida State University College of Medicine;
- Funded trauma training for the staff of three critical access hospitals.

#### **Bureau of Tobacco Prevention:**

In fiscal year 2007-08, \$57.7 million was appropriated to the Department of Health for implementation of a constitutional amendment creating a statewide tobacco program consistent with the Centers for Disease Control and Prevention's Best Practices for Comprehensive Tobacco Control Programs. This program resulted in:

- Convening meetings of the 23 member Tobacco Education and Use Prevention Advisory Council including representatives of Florida's medical schools, American Heart and Lung Associations, Cancer Society and a host of experts representing various fronts of the efforts to reduce tobacco usage in Florida. The Council has established subcommittees to address youth issues, communications, and surveillance and evaluation of program components.
- A record number of calls to the toll-free telephone cessation service providing counseling and free nicotine replacement therapies (patches, gum, lozenges) to smokers who want to quit using tobacco. To date, 32,127 Floridians have called the Quitline and in May 2007, a record was set with 7,049 callers.
- Launch of the \$19 million "Tobacco Free Florida" statewide marketing campaign to promote tobacco cessation, reduce secondhand smoke exposure, and prevent youth tobacco use initiation.

- Fifty county health departments and 17 non-profit agencies receiving funding to develop community-based partnerships to establish youth and chronic disease tobacco prevention programs.

Following is a sample of the successes achieved since July 2008:

- Annual funding was increased by approximately 5% and the projects initiated in year one were increased accordingly.
- All 67 community based tobacco prevention and chronic disease county-level programs were refunded for a second year.
- Department sponsorship of Students Working against Tobacco (SWAT) statewide meeting in Orlando October 17 – 19, 2008. Youth and youth coordinators from all regions of the state met to reconvene the SWAT program, receive updated training in tobacco prevention best practices, and create a structure for moving the youth-led program forward.

In fiscal year 2008-09, \$63.5 million was appropriated to the Department of Health for continued implementation of statewide tobacco program. The program adopted the Centers for Disease Control and Prevention's 2007 Best Practices for Comprehensive Tobacco Control Programs in statute. Following is a sample of the success achieved since July 2008:

- The 2009 Florida Legislature increased the tobacco use tax by \$1.00.
- Florida competed and received the CDC Tobacco Prevention and Control Grant for \$1.8 million.
- An additional \$2 million in Nicotine Replacement Therapy (NRT) was provided through legislative appropriation.
- An opportunity for funding was provided for each of the 67 counties to apply for funding to support a county-level tobacco community intervention grant. The Tobacco Advisory Council recommended the minimum score for award and 54 counties received funding. The program will put out another opportunity for funding for the remaining counties before October 1, 2009.
- Developed a Strategic Plan to address tobacco use in disparate populations.
- The Tobacco Free Florida campaign produced and launched new *Be Free* youth prevention TV and radio spots at the end of February during the campaign's first ever Tobacco Free Florida Week.
- Governor Charlie Crist proclaimed February 27 through March 7 as Tobacco Free Florida Week to promote smoke-free living while reminding tobacco users of programs and support that are available to help them quit. Over 17,000 Be Free pledges were collected during the week at over 20 community, professional sporting, and collegiate sporting events.
- Just in time for New Year's Resolutions, the cessation portion of Tobacco Free Florida's Be Free campaign launched December 29, 2008. The TV, radio, and online media resulted in the Quitline's highest monthly call volume, with 5,567 calls in January 2009.
- The Florida Tobacco Quitline now has free Nicotine Replacement Therapy.

- The Automated Tobacco Activities Collection System (ATACS) was developed, beta tested and completed. The ATACS program will be used to plan, develop, implement and report community-based tobacco prevention activities of the grant awardees.
- Staff conducted a presentation on candy flavored tobacco at the 2009 National Tobacco Prevention and Health Conference.
- Develop contracts for independent evaluation of all program components.
- Continued to convene meetings of the 23 member Tobacco Education and Use Prevention Advisory Council and youth, communications, surveillance and evaluation subcommittees.

**Volunteer Health Services Program:**

In 2006-2007 the Volunteer Health Services Program documented a combined total of donated goods and services since program inception in 1992 of more than \$1.1 billion dollars. This program administers the Department of Health's two volunteer initiatives designed to increase access to health care for the underserved and uninsured. During this fiscal year goods and services were donated by over 20,000 volunteers throughout the state working in Department of Health facilities, private businesses, and community and faith-based organizations.

In 2007-2008 the volunteer organizations and Department of Health units participating in the two volunteer programs accounted for more than 300,000 patient visits. The health care provided by volunteers during this period was valued at more than \$178 million as reported by participants throughout the state. This value includes \$69.5 million in donations such as medications, equipment, monies and various in-kind contributions.