

The University of Texas Rio Grande Valley™

THE FIRST TEXAS UNIVERSITY
FORMED IN THE 21ST CENTURY

SUCCESS (Students Uniting
Care, Culture, Empathy
Science and Skills) Curriculum
and Integrated Care in the
South Texas

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Disclosures

- Dr. Fernandez has four disclosures to report.
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 - **Related to commercial or for-profit activity:** None
- Discussion will not include use of medications.

To Start A New Medical School





The University of Texas Rio Grande Valley School of Medicine



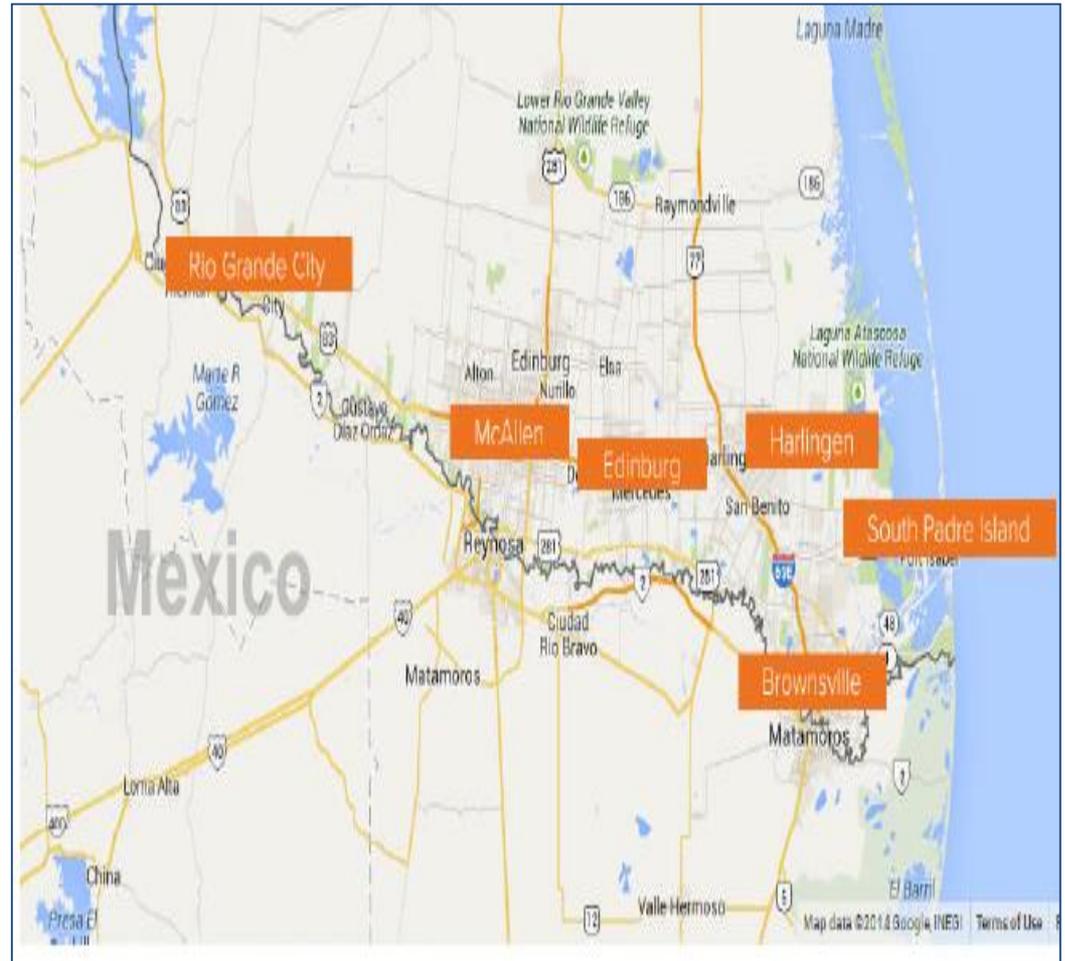


UT Rio Grande Valley™

School of Medicine

To start a medical school in an underserved area.

- The Lower Rio Grande Valley (LRGV) is designated as one of the most medically underserved regions in the United States.
- While Texas lags behind the national average for physicians, the 12 counties that make up the Rio Grande Valley have even lower ratios of physicians to population.
- The increasing need for skilled medical personnel is a function of rapid population growth across all age groups, as well as rising rates of obesity and associated diseases such as diabetes, hypertension, heart disease, depression, and cancer in the population at large.



10 “D”s of the Rio Grande Valley

- **D** Diabetes
- **D** Depression (all mental disorders)
- **D** Developmental Pediatrics & Medicine
- **D** Degenerative Diseases (AD, PD, ALS, etc.)
- **D** Dental
- **D** Diet (appetitive drives inclusive of alcohol, drugs, nicotine, sex, pornography, videos, etc.)
- **D** Dialysis (ESRD and other metabolic disorders)
- **D** Domestic (injury, abuse, violence, defense)
- **D** DPT (diphtheria, pertussis, tetanus and all infectious diseases)
- **D** Determination of Coverage (access, prevention, health literacy, health education, etc.)

UTRGV SOM → Values

- The UTRGV School of Medicine's curriculum is designed to instill students with scientific, clinical, and research expertise of the highest professional standards. In combination with a program ethos that prioritizes improving health at the individual and community level, UTRGV SOM will graduate physicians who are:
 - **Patient Advocates:** Dedicated to serving patients and their families through the practice of ethical, evidence-based, patient/family-centered medicine.
 - **Community-Focused:** Committed to improving health outcomes and reducing health disparities of at-risk populations through community and population-based interventions.
 - **Culturally-Aware:** Equipped with the tools and empathy to successfully work with the diverse and unique needs of any community.
 - **Collaborative Leaders:** Prepared to contribute to effective interprofessional teams, as well as invested in providing leadership on matters of community health.
 - **Life-long Learners and Problem-Solvers:** Practiced in using critical thinking to approach all health matters including clinical, community, and social issues.

SUCCESS





UTRio Grande Valley™

School of Medicine

Students

Uniting

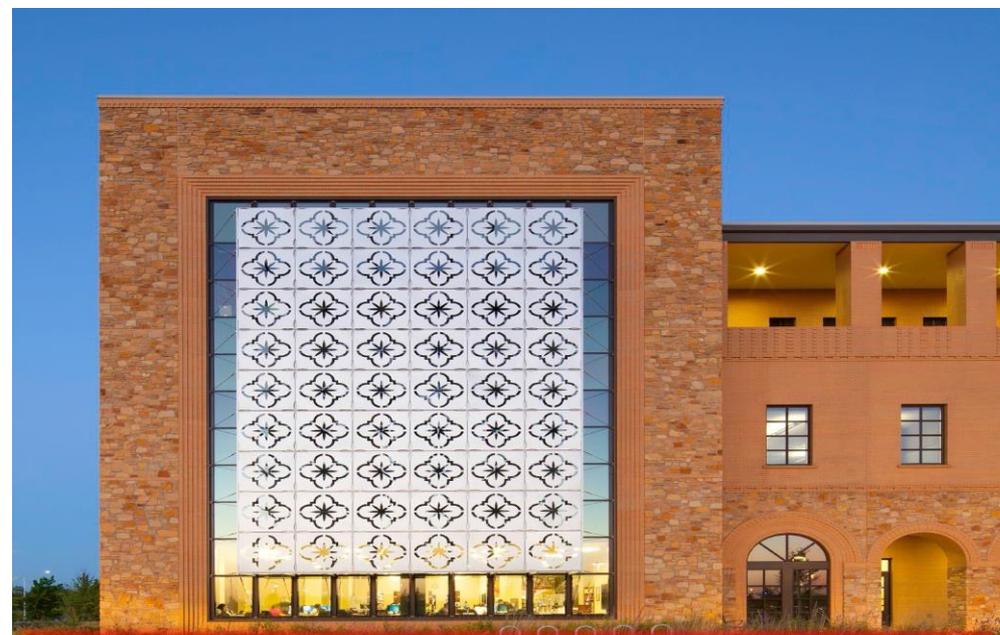
Care

Culture

Empathy

Science

Skills



***UTRGV School of Medicine: Science, Knowledge,
Change, Life, Healing, and Compassion
One Community, One Mission, One Solution***



Colonia Care Program

- Continued established care through regular mobile clinic for health assessments inclusive of baseline screening tests and results at Colonias Cameron Park, Indian Hills, Las Milpas and Monte Alto
- Interprofessional health initiatives focused on chemical dependency and substance abuse, diabetes, exercise/diet, oral health, prevention of mosquito borne disease, hearing and vision screens
- Follow-up assessment for compliance with diet, exercise, domestic violence, depression, oral hygiene, eye health was recorded.
- We provided education by way of presentations on Substance Abuse to ten different organizations community wide that included virtual reality goggles
- In collaboration with TAMU National CHW training Center and South Texas College, we created a Promotora (CHW) network – The South Texas CHW Collaborative
 - We produced two training modules:
 - A mental health curriculum
 - An oral health curriculum
 - Received approval by the Texas Department of Health for training
 - We held a regional conference in conjunction with the National Rural Health Association on oral health
 - Approved by STC for college credit and CHW/promotora credentialing for High School Students Colonia Enhancement program
 - At PSJA-ISD we offered a 160-hour course to Senior Students to obtain a CHW certificate
- Introduced IT to improve health literacy, access to care, and increase participation in health promotion and health maintenance for the residents in the colonias we serviced

In 2018 added 6 more colonias through AHEC

**Proyecto
Juan Diego
2216 Eduardo**



Your Gateway To A Better Life ...

The University of Texas Rio Grande Valley School of Medicine



What impact do health disparities, preventive care and social justice have on health and wellbeing?

Part II: Why is this important?



The Road to Health Disparities

“A health disparity is a type of health difference that is closely linked with social, economic, and/or environmental disadvantage.”

Centers for Disease Control

Contributing Factors

“Race”
Gender
Ethnicity
Labor roles and social class markers
Nationality, language, and legal status
Sexual orientation
Insurance
Disability status
Geography
Religion

Impact

Differences in life opportunities, exposures, and stresses that result in differences in underlying health status

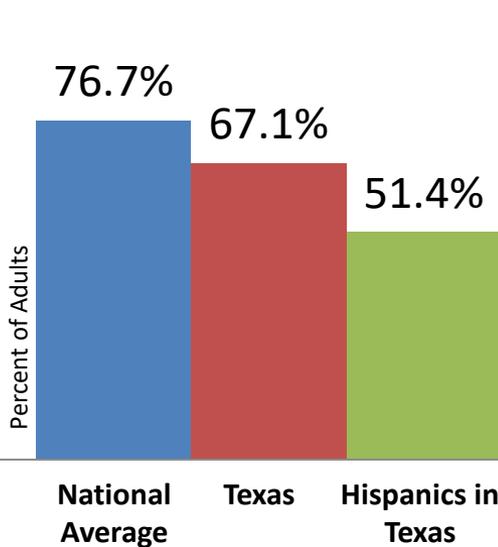
Differences in access to health care, including preventive and curative services

Differences in the quality of care received within the health care system

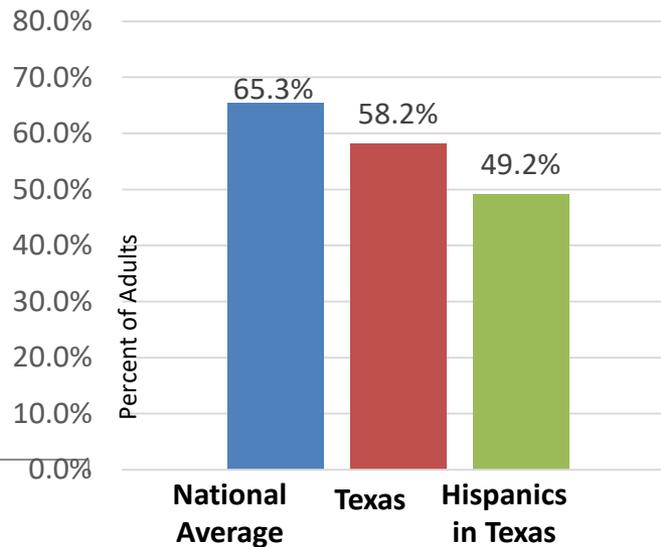
Access Key to Overall Prevention

Don't forget
mental visit!!!

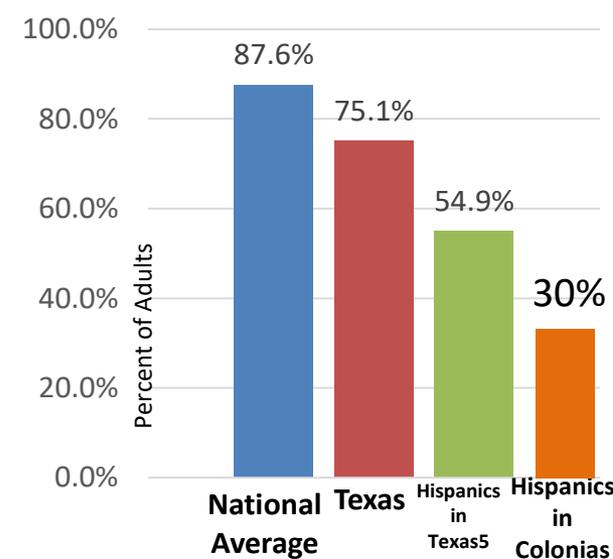
Percentage of Adults Who Have a Dedicated Health Care Provider¹



Percentage of Adults Who Have Had an Annual Dental Visit in the Past Year¹



Percentage of Adults with Some Type of Health Insurance¹



America's Health Rankings® Spotlight: Prevention, 2016

¹⁶United States, 2014.



International Electives in Community Pediatrics

UTRGV-SOM sponsored international elective in community pediatrics on the Texas-Mexico border. Its focus is to train young physicians to address social justice issues.

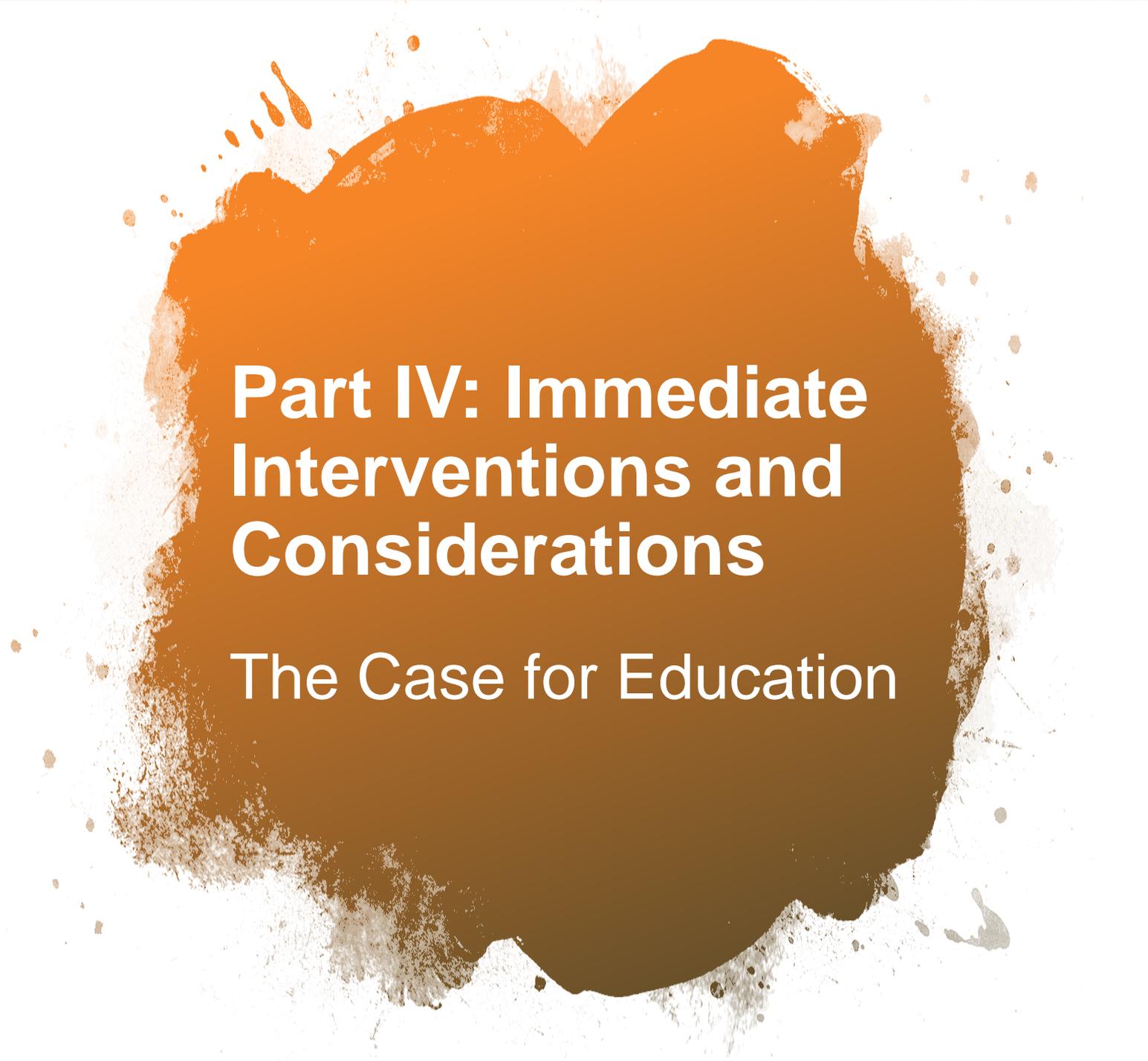




Part III: Changing Perspectives on Medical Education

The Good, The Bad and The Ugly

- **First Place:** UNTHSC 240 Points (C2 191 Points)
- **Second Place:** El Paso 236 Points (C2 196 Points)
- **Third Place:** Southwestern 227 Points (C2 180 Points)
- **Fourth Place:** UTRGV 221 Points (C2 180 Points)
- **Fifth Place:** Baylor 203 Points (C2 156 Points)
- **Sixth Place:** Texas A&M 198 Points (C2 191 Points)
- **Seventh Place:** UT Dell 176 Points (C2 168 Points)



Part IV: Immediate Interventions and Considerations

The Case for Education

Desired Outcomes I³E

- Improve educational opportunities
- Improve community health
- Improve access to care
- Empower Hispanics to be better health consumers

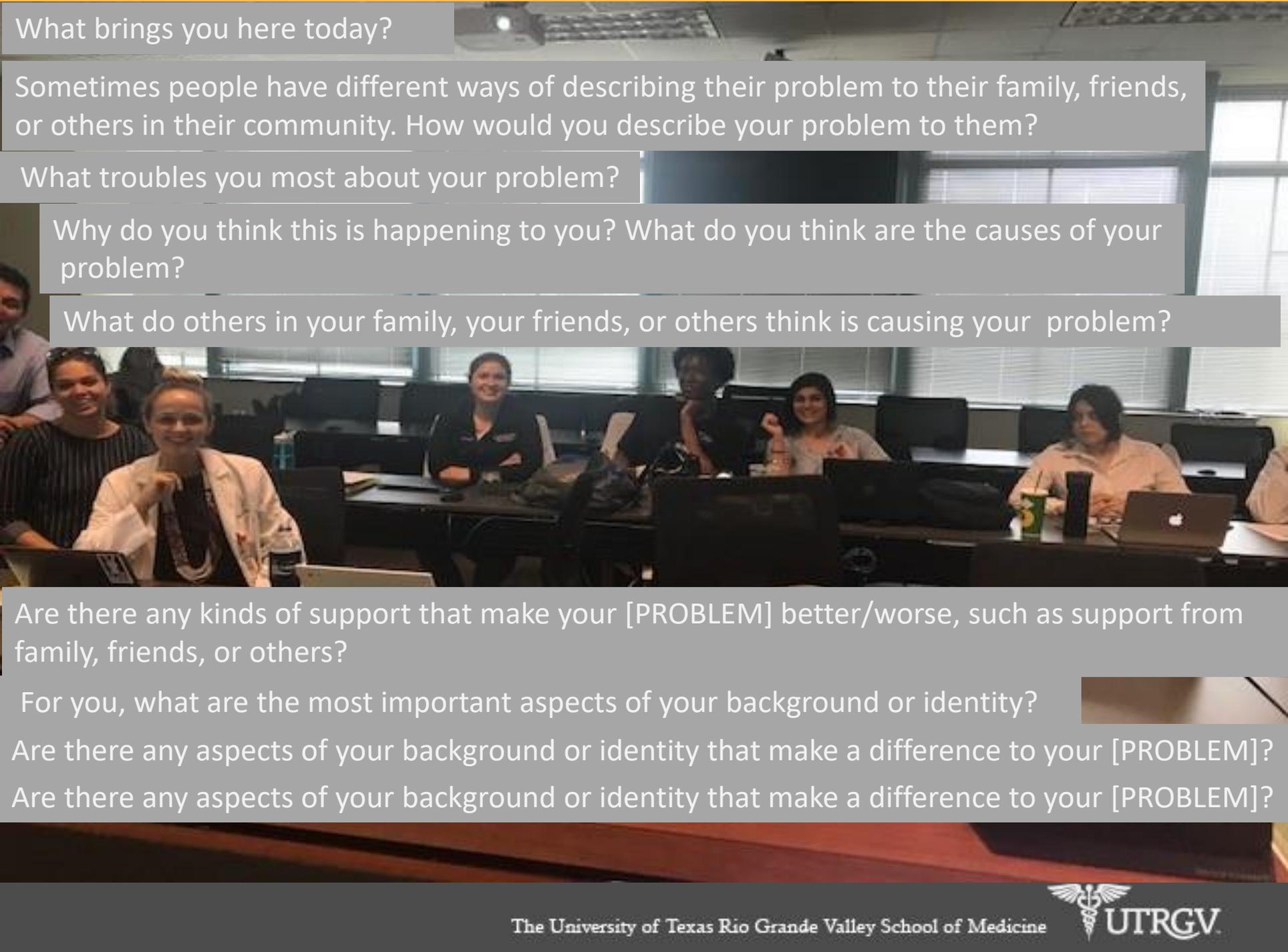


What is Culture?

Values, orientations, knowledge, and practices that individuals use to understand their experiences

Aspects of a person's background, experience, and social contexts that may affect his or her perspective

The influence of family, friends, and other community members (the individual's *social network*) on the individual's illness experience



What brings you here today?

Sometimes people have different ways of describing their problem to their family, friends, or others in their community. How would you describe your problem to them?

What troubles you most about your problem?

Why do you think this is happening to you? What do you think are the causes of your problem?

What do others in your family, your friends, or others think is causing your problem?

Are there any kinds of support that make your [PROBLEM] better/worse, such as support from family, friends, or others?

For you, what are the most important aspects of your background or identity?

Are there any aspects of your background or identity that make a difference to your [PROBLEM]?

Are there any aspects of your background or identity that make a difference to your [PROBLEM]?

JOHN AUSTIN PENA

Traditional Clinic Model



Nurse practitioners.
Nutrition/exercise/yoga.
Social Work.
Educational psychology.
Case management.
Occupational therapy.
Mental health.
Physician assistant.
Pharmacy.
Laboratory medicine.
Communication disorders.
Rehabilitation counseling.

Team Based Collaborative → Primary Care, Behavioral Health, and Addictions

Part V: Then what about

The essentials
versus
other tangibles ...





- Increase Latinos in the healthcare fields through a variety of educational programs (CHW, M2M, SUCCESS, GME).
- Improve access to primary care services (STITCH, Pena Clinic, UniMovil, CRU).
- Improve RGV communities planning to enhance health promotion, preventive, primary care & behavioral health services (VIDAS, Integrated Colonia Care).
- Empower Latinos to be better healthcare consumers through production of accurate & culturally-linguistically appropriate information (TAMU, South Texas College, UTRGV).

***One Community, One
Mission,
One Solution***

Improving Access to Care in the Hispanic Community



UTRio Grande Valley™

School of Medicine

***Feel your passion,
find your heart,
come to the Rio Grande
Valley
and be part of our start!***

1. To start a medical school in an underserved area;
2. To understand the challenges of innovating in education in an underserved community; and,
3. Establish effective ways to capture and document the quality and impact of our work.





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