

South Texas Expansion Psychiatric Capacity Project (STEPP)

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Funding:

- STEPP was funded through the US Bureau of Nursing Advanced Education Nursing Program.
- Bureau of Health Professions' mission of increasing access to health care by providing national leadership in development, distribution, and retention of a diverse, culturally competent health workforce that can adapt to the population's changing health care needs and provide the highest quality of care for all.



Partnership

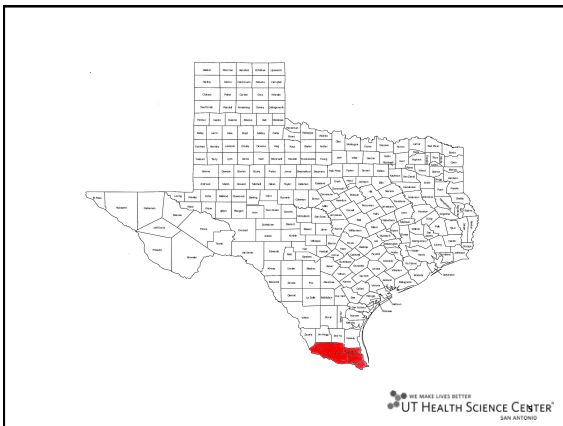
- The School of Nursing at The University of Texas Health Science Center at San Antonio (UTHSCSA) partnered with University of Texas at Brownsville and Texas Southmost College (UTB) Department of Nursing



Aim of the Project:

- Address the severe shortage of psychiatric providers especially providers who can provide psychiatric- mental health services to children and adolescents.





Target Area:

- A highly impoverished four-county area which makes up the Lower Rio Grande Valley.
- This region, one-third larger than the state of Rhode Island with a population of 1,170,776, is 88.7% Hispanic with 82.1% speaking a language other than English at home.



The State of Texas is ranked :

- 50th in per capita spending for mental health (\$38 versus national average of \$85-old statistic).
- 3 designated mental health facilities exist in the target region.
- 2 full-time practicing psychiatrists and one PMH CNS are available to meet the psychiatric needs of the four-county region.
- 2 counties have no community-based mental health services.



Texas is Ranked #1 in Percentage of :

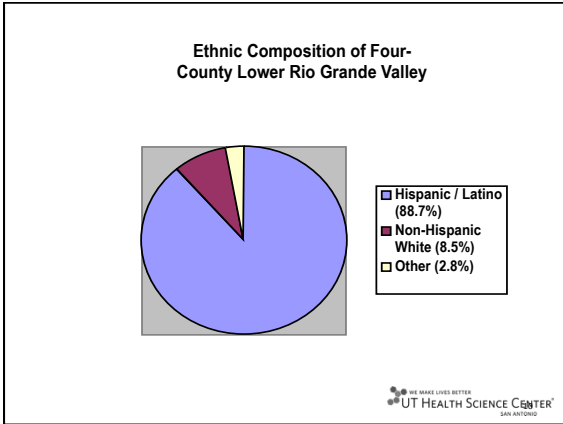
- Overall Population Uninsured
 - Children Uninsured
 - Non-elderly Uninsured
- AND
- 49th in Low income covered by Medicaid
 - All counties designated as underserved for mental health



Latino/Hispanic People are:

- more likely to be depressed and have lower scores on the SF- 12 Mental Composite Score than other ethnic groups.
- report greater use of alcohol, heroin, and cocaine than their non-Hispanic peers.
- make far fewer visits to mental health professionals.
- issues magnified for rural people with language barriers.





Population Characteristics	Lower Rio Grande Valley Region				State of Texas	United States
	Cameron County	Hidalgo County	Starr County	Willacy County		
2006 Population	387,717	700,634	61,780	20,645	23,507,783	299,398,484
Percent Hispanic Residents (2006)	86.1%	89.5%	97.4%	86.6%	35.7%	14.8%
Median Household Income (2004)	\$26,719	\$26,375	\$19,775	\$24,451	\$41,645	\$44,334
Per Capita Money Income (1999)	\$10,960	\$9,899	\$7,069	\$9,421	\$19,617	\$21,287
Percentage Of Persons Below FPL (2004)	29.4%	30.5%	34.8%	29.6%	16.2%	12.7%
Percent Who Speak a Language Other than English at Home (2000)	79.0%	83.1%	90.7%	78.1%	31.2%	17.9%
Percent of Persons 25 and Older Who Have Graduated High School	55.2%	50.5%	34.7%	48.7%	75.7%	80.4%

Selected Characteristics of Lower Rio Grande Valley, Texas, and the US

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Work Plan for Project:

- Post masters certificate students are recruited /enrolled in UTHSCSA's FPMHNP program via distance learning methodologies.
- APRNs, faculty, and psychiatrists collaborate to provide precepted clinical experiences in the Valley.
- A key project outcome is to build capacity needed for UTB to launch a FPMHNP program of its own in the academic year following expiration of the grant.
- It is anticipated that 12 post masters certificate completers will become locally-based FPMHNPs who will then serve as preceptors and faculty in subsequent years.

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Nursing Category	Cameron County	Hidalgo County	Starr County	Willacy County
Clinical Nurse Specialist	8	10	0	0
Nurse Anesthetist	30	45	0	1
Nurse Midwife	13	12	0	0
Nurse Practitioner	56	100	0	1
Total	107	167	0	2


Advanced Practice Nurses of all types Working in the Lower Rio Grande Valley



- Lessons learned: Years 1-2:**
- Different Cultures despite Sister UT System Schools
 - Different Admission Policies and Procedures
 - Different Curricula
 - Selected Technology
 - Angst and woes navigating differences
 - Success Stories about overcoming differences
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School Cultures:

UTHSCSA	UTB
Academic Health Science Center	Academic Campus combined with Community College
20 yr HX of NP education	No NP education
Rigid rules for admission, progression	Flexible movement
Early MSN with BSN given	MSN program for RNs, no BSN given
Admission requires BSN	
Web enhanced curriculum	Web-based
5 classes in campus each semester	No classes on campus
Basic web technology	Sophisticated web technology



Admission Policy and Procedures

UTHSCA	UTB
Admission date moved up to 1/10	Admission dates are flexible
Use of outside vendor to screen applicants	Admissions done by program director
DNP begun, dropped post MSN certificate program from the website without warning	
MSN required for admission to start in May	MSN completed in May



Curricula Differences:

UTHSCA	UTB
Established NP program	No NP program
3 P's long running courses	3 P's not in curriculum
Mental Health Concepts Course required of all clinical majors and prerequisite	Mental Health Concepts not a part of curriculum
Coding and billing part of basic coursework	Coding and billing not in curriculum



Selected Technology

- GoToWebinar issues:
 - Hearing questions in small versus large classrooms
 - Feedback: noise
 - Interaction
 - “Technology interferes with my learning” reported from on campus students



Angst and Woes: Navigating Differences

- Communication Breakdowns
- People not in the know
- Unintended Consequences
- OMG.....



Success Stories: Overcoming Differences

- 3 Completers in May
 - 1 MSN
 - 2 Post MSN Certificates
- 2 interested in Teaching and DNP
- 1 wants to precept once she gets experience
- 11 Preceptors (10 MDs, 1 MSN)
- New Settings: Hospitals, Outpt Clinics, Private MD offices



Final Message for those who go where we have feared to tread:

- Communication is the key to success
 - Institutions
 - Faculty
 - Students
 - Families
 - Cultures
 - Technologies
- As Psych Nurses, we can do this