

A Comparison of Pacific the AETC Training Activities and Performance with the National AIDS Education and Training Centers

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The Division of Training and Technical Assistance, HIV/AIDS Bureau, Health Resources and Services Administration issued a report in the summer of 2006 describing the characteristics and accomplishments of the National AIDS Education and Training Center program for the fiscal year of July 1, 2003-June 30, 2004. The report included data from all eleven regional AIDS Education and Training Centers (AETCs) and the national minority AETC reporting on training levels, duration, participant background and topics covered. The report concluded that the National AETC program is achieving the goals set by Congress and the HIV/AIDS Bureau (HAB) including educating providers working with underserved and minority populations as well as those employed at Ryan White CARE Act funded agencies. The authors of the report were impressed with the proportion of physicians and nurses who are racial and ethnic minorities.. They also pointed out the National AETC program not only enhanced the knowledge and skills but also provide advance clinical management topics relevant to the special populations being served by the trainees.

The Pacific AIDS Education and Training Center (PAETC) receives a significant proportion of the funding of the National AETC program to cover four western states (Arizona, California, Hawai'i, and Nevada) and the Pacific Islands. The PAETC is unique among the other AETCs not only for the territory covered but also by the populations served. This report compares the Pacific AETC training activities and performance to all AETC's covered by the National data report for FY 2003-04.

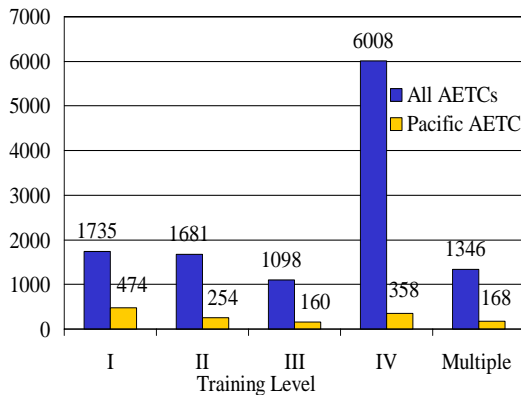
Training Events

For the 12 month reporting period, all AETCs conducted 11,868 Level I-IV individual training events. Specifically, the Pacific AETC conducted 1,414 events which were about 12% of the national total. Training events can be as brief as five minutes or as long as several weeks like some Level III clinical training programs. Nationally, Level IV consultation represented 51% of all training events, for the PAETC it represented 25%. The Level IV clinical consultation category includes group consultations (similar to other training events where several providers discuss patient care cases) and individual clinical consultations (typically these are brief, one to one encounters regarding an individual patient case). Thus, by its very nature, individual consultation represent the single most common training event. In terms of percentage of total training events, the Pacific AETC conducted over twice as many Level I training events as reported nationally (35% vs. 15%). For all Training Levels, Table I shows the difference between the number of training events between Pacific AETC and all AETCs. The following charts further illustrate the differences.

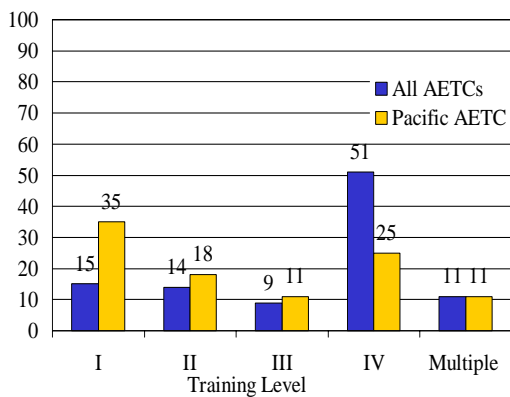
Table I: Training Events

	ALL AETCs		PAETC		PAETC Percent of National
	N	%	N	%	
Level I Only	1735	15	474	35	27
Level II Only	1681	14	254	18	15
Level III Only	1098	9	160	11	15
Level IV Only	6008	51	358	25	6
Multi- Level Training	1346	11	168	11	12
Total	11,868		1,414		12

Training Events



Training Events: Percent of Total



Hours of Training

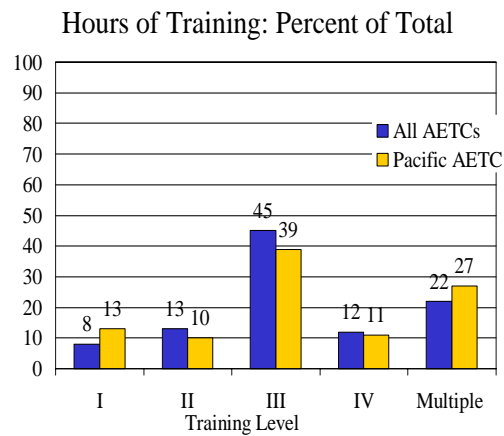
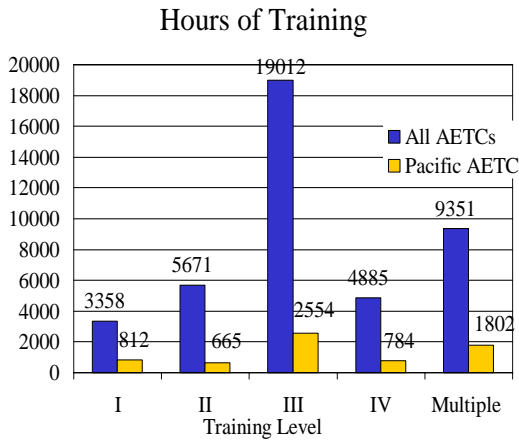
In addition to measuring effort by the number of training events the National AETC reported the duration of training events as another measure of effort. In fact hours of training is a superior measure of work efforts since the length of events vary widely among training levels and AETCs. For the 12 month reporting period including all training levels, all AETCs conducted 42,278 hours of training, the Pacific AETC recorded 6,617 hours. The percentage of total training hours shown in Table II illustrates

Pacific AETC’s devoted more effort to Level I didactic programs than for all other AETCs (13% vs. 8%).

For all AETCs including the Pacific AETC Level III clinical trainings constituted the largest proportion. Nationally Level III clinical training represented 45% of all training hours. For the Pacific AETC, 39% of all training hours were devoted to Level III clinical trainings. Nationally, Pacific AETC accounted for 16% of the training hours. Table II and the companion charts compare the hours devoted to training for all AETCs and the Pacific AETC.

Table II: Hours Devoted to Training

	ALL AETCs		PAETC		PAETC Percent of National
	N	%	N	%	
Level I Only	3359	8	812	13	24
Level II Only	5671	13	665	10	12
Level III Only	19012	45	2554	39	13
Level IV Only	4885	12	784	11	16
Multi- Level Training	9351	22	1802	27	19
Total	42,278		6,617		16



Number of Attendees

For the 12 month reporting period, 142,393 individuals were recorded as attending one or more training events or receiving clinical consultation nationally, of that 17,973 individuals attended Pacific AETC trainings or consultations. Not surprisingly more individuals attended Level I (didactic) trainings than any other type (33% all AETCs and 51% for Pacific AETC). The difference between Level I training attendance is not so significant for the Pacific AETC and all AETCs if one takes into account the percent

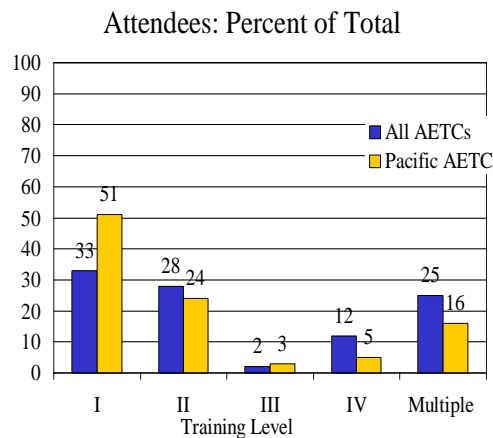
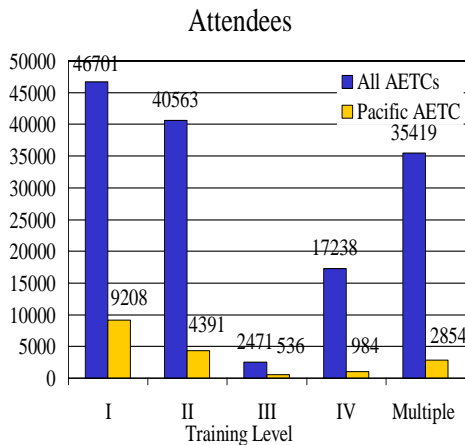
attending multi-level events. Multi-level events typically include mostly Level I didactic components along with one other training level.

Two percent of all AETCs and 3% of Pacific AETC trainees attended Level III clinical training programs. While Level III trainees represent a small proportion of all trainees, it will be shown later in this report that these trainees receive nearly 8 times more educational time per program than is true for the other training levels.

On average the Pacific AETC reported 16% of trainees received clinical consultation while all AETCs reported a quarter of all attendees received clinical consultation. Altogether the Pacific AETC accounted for 13% of all attendees nationally. Below are Table III and the related charts that compares the number of attendees at Pacific training events with all AETCs.

Table III: Attendees

	ALL AETCs		PAETC		PAETC Percent of National
	N	%	N	%	
Level I Only	46701	33	9208	51	20
Level II Only	40563	28	4391	24	11
Level III Only	2471	2	536	3	22
Level IV Only	17238	12	984	5	6
Multi- Level Training	35419	25	2854	16	8
Total	142,393		17,973		13



Average Number of Attendees

A comparison of effort can be made by looking at the number of attendees per each type of training event. Table IV and the accompanying charts, show these comparisons. Average attendance at Level I didactic events was 27 for all AETCs while the Pacific AETC average attendance was 19. Level II events averaged 24 participants for all AETCs and 17 for the Pacific AETC. The Pacific AETC averaged 3.4 participants for Level III clinical training while the average was 2.3 for all AETCs. Both the Pacific and

all AETCs recorded nearly 3 participants per Level IV clinical consultation session. Finally, the average number of attendees at multi-level training events was 26 for all AETCs and 17 for the Pacific AETC. Except for clinical training and clinical consultations, the Pacific AETC averaged fewer attendees per event than was the case for all AETCs nationally. Smaller sessions usually mean that the sessions are focused and there is opportunity for exchange among the attendees and the presenter.

Average Length of Training Events

Another way to compare effort is to look at the average number of training hours per event or session. Table IV and the accompanying charts compare the Pacific AETC with all other AETCs nationally. There are some significant differences between the Pacific and all other AETCs. These differences are found with Level IV clinical consultations and multi-level training events. The average Pacific AETC consultation session was over twice the length of the average session for all AETCs (2 hours and 12 minutes for Pacific vs. 48 minutes for all AETCs). It should be noted that clinical consultations range from a few minutes to hours to days in length. Given that the typical Pacific AETC consultation session is over 2 hours long, it may be reasonable to say that most Pacific's consultations are more comprehensive and perhaps more intensive than is experienced nationally.

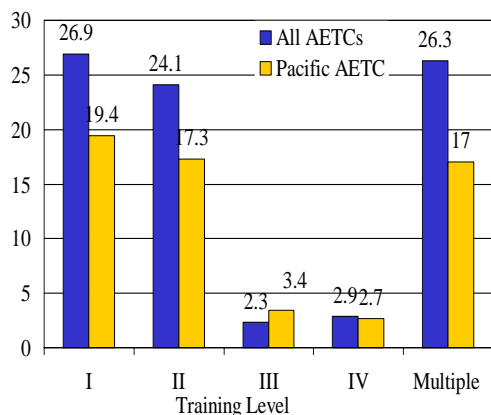
Likewise, the average length of a Pacific AETC multi-level session was 11 hours while the average length for all AETCs was 6.9 hours. The national report does not breakdown the components within multi-level sessions: thus, it is not possible to know if most of the multi-level trainings are comprised of clinical training or workshop experiences. For the Pacific AETC most of the multi-level hours are comprised of clinical training combined with didactic sessions.

Essentially instructional time for Levels I, II, and III events are nearly the same for both all AETCs and the Pacific AETC. The average Level I event contained 1.9 hours of instruction for all AETCs and 1.7 for the Pacific AETC. Likewise Level II workshops average was 3.4 hours for all AETCs and 2.6 hours of the Pacific AETC. For both all AETCs and the Pacific AETC, more instructional hours are devoted to Level III. The average number of Level III instructional hours is 16 for the Pacific AETC and 17.3 for all AETCs.

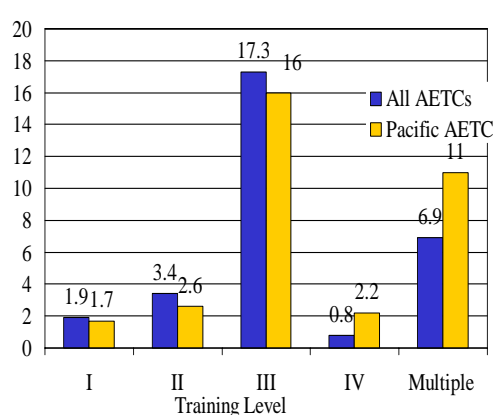
Table IV: Mean Number of Attendees and Training Hours of each Event

	Mean # of Trainees		Mean Hours of Training	
	All AETCs	PAETC	All AETCs	PAETC
Level I Only	26.9	19.4	1.9	1.7
Level II Only	24.1	17.3	3.4	2.6
Level III Only	2.3	3.4	17.3	16
Level IV Only	2.9	2.7	0.8	2.2
Multi- Level Training	26.3	17	6.9	11

Average # of Attendees at each Event



Average Hours of Training at each Event



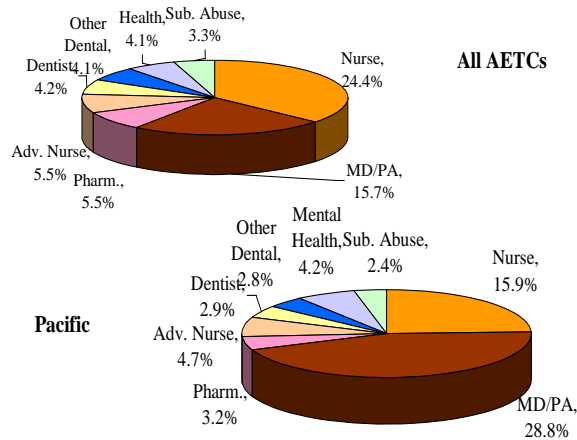
Profession of Attendees

Table V illustrates the differences in the professions targeted between all AETCs and the Pacific AETC for the eight most common professions trained. The AETCs are to focus on seven targeted professions (physicians, physician assistants, pharmacists, nurses, nurse practitioners, dentists, and other dental professionals). It is clear that all AETCs nationally and the Pacific AETC in particular are targeting these professions. With all AETCs showing that 59% of attendees are from the targeted professions and Pacific AETC reporting that 58% of attendees are those targeted seven professions. The Pacific AETC had a larger proportion of physicians and physician assistants (28.8%) among attendees than was found for all AETCs (15.7%); however, the Pacific AETC had a smaller percentage of nurse attendees (15.9%) than all AETCs nationally (24.4%).

Table V: Most Common Professions

	All AETCs	PAETC
Nurse	24.4%	15.9%
Physician/PA	15.7%	28.8%
Pharmacist	5.5%	3.2%
Adv. Nurse/NP	5.5%	4.7%
Dentist	4.2%	2.9%
Other Dentist	4.1%	2.8%
Mental Health	4.1%	4.2%
Substance Abuse	3.3%	2.4%

Most Common Professions Trained



Background of Attendees

One goal of the national AETC program is to reach health care professionals that are racial and ethnic minorities as well as professionals that work in underserved communities and who provide care to ethnic and racial minority patients. The data set for FY 2003-2004 shows that the national AETC program is achieving these goals and the same is true for the Pacific AETC. Table V compares the racial/ethnic backgrounds of Pacific attendees with those of all AETCs. African-Americans constituted 18% of all AETC and 11% of Pacific attendees. Hispanics were 9% of all AETC and 33% of Pacific attendees. Asians were 9% of all AETC and 18% of Pacific attendees. Pacific has a smaller proportion of white attendees as compared to all AETCs (57% vs. 65%). It is clear that the Pacific AETC attendees match the demographics of its region. Taken altogether, Pacific trained a larger proportion of minority health care professionals than all AETCs.

For all AETCs, 71% of attendees were women and less than 1% are transgender identified. For the Pacific, 61% of attendees were women and nearly 2% were transgender identified. Table VI shows the differences in the background of Pacific as compared to all AETC attendees.

Table VI: Gender and Racial/Ethnic Background of Attendees

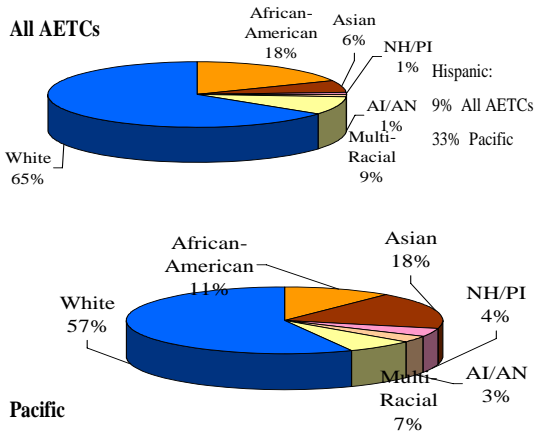
	All AETCs	PAETC
African-American	18%	11%
Asian	6%	18%
NH/PI	1%	4%
AI/AN	1%	3%
Multi-Racial	9%	7%
White	65%	57%
	100%	100%

Hispanic	9%	33%
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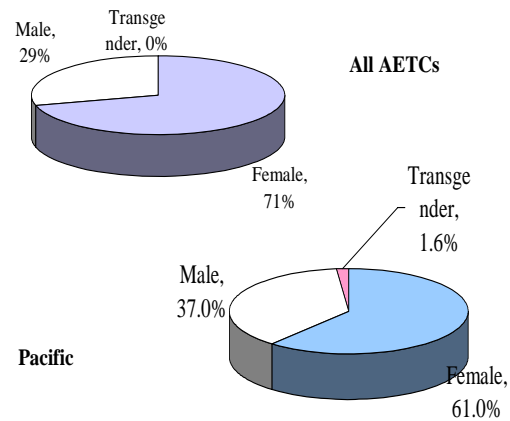
Gender

Female	71%	61%
Male	29%	37%
Transgender	<01%	1.6%

Background of Attendees



Attendee Gender



Profile of Attendee Patients and Clients

A major goal of the national AETC program is to train health care professionals who provide services to racial/ethnic minorities, the underserved and care for HIV infected patients. Table VII shows the type of patients seen by the attendees. For all AETCs 58% of attendees reported having caseloads of 50% or more that are racial/ethnic minorities and 30% of attendees reported caseloads of 50% or more uninsured individuals. For the Pacific AETC, 44% of attendees reported having caseloads of 50% or more racial/ethnic minorities and 32% reported having 50% or uninsured patients/clients in their caseloads.

Training individuals that actually provide direct care to HIV infected patients is a priority for both the national and Pacific AETC programs. Thirty-seven percent of Pacific attendees reported not seeing patients or clients while 23% of attendees of all AETCs reported not seeing patients or clients. On the other hand, 77% of all AETC and 78% of Pacific AETC providers (i.e., those who see patients) saw at least one HIV infected patient during a previous month. Finally, 33% of all AETC attendees and 47% of Pacific attendees were from Ryan White CARE Act funded agencies.

Table VII: Attendees' Patients/Clients

Patient/Client	All AETCs	PAETC
Racial/Ethnic Minorities (50%+)	58%	44%
Uninsured (50%+)	30%	32%
Don't See Patients/Clients	23%	37%
1+ HIV patient during the previous month*	77%	78%
From RWCA Agency	33%	47%

* Providers Only

Topics Covered at Training Events

The AETC collect data on the topics covered for all levels of training. It is not a surprise that Levels I-III events usually include more than one topic. The single most common topic at both all AETCs and the Pacific AETC was antiretroviral treatment (discussed at 53% of training all events for all AETCs and at 59% of training events for Pacific). Table VIII shows the top 10 training topics for both all AETCs and the Pacific AETC.

Table VIII: Ten Most Common Training Topics

	All AETC Events	PAETC Events
Antiretroviral Treatment	53%	59%
Diagnostic tests/disease progression	47%	47%
Clinical manifestations of HIV	45%	56%
Basic science and epidemiology	36%	39%
Adherence	35%	50%
Co-morbidities	35%	42%
Risk assessment	30%	33%
Prevention methods	27%	**
Opportunistic infections	26%	**
Early interventions	25%	**
Treatment/NonART medications	**	35%
Racial/ethnic issues	**	32%