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The Future of Health Care: Education

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Every shift in health-care delivery prompts some change in the academic programs that are preparing tomorrow's practitioners. In some cases, the programs at colleges and universities need to anticipate what the needs will be so their graduates will be ready to respond when the demands come.

Leaders from three of the area's institutions with established and expanding health-care programs participating in a recent Panel of Experts discussion at Buffalo Business First addressed how their students are poised to practice in an ever-changing, ever-challenging field.



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The panelists in Buffalo Business First's Future of Health Care: Education roundtable.

Panelists were:

Adam Grupka, assistant vice president of academic affairs, director of health care education, D'Youville University

Aimee Larson, clinical assistant professor and program director of Physician Assistant Studies, Canisius College

Whitney Mendel, associate professor and program coordinator, master of Public Health Program, Daemen University

Improving access

The educators were of one mind on the shift to taking care to patients where they live.

At Canisius, it has meant adding telehealth to the curriculum so that students will learn how to address patient needs remotely and not be tied to what is done at a clinic or hospital, Larson said.

D'Youville's efforts to move care closer to the patient included establishing on its West Side campus the Health Professions Hub.

The facility, which opened in 2021, includes a full-service pharmacy offering home delivery, the Sisters Health Center that provides primary care and physical therapy, occupational therapy, chiropractic care and nutrition services and a food pantry.

Grupka said all services are available to the university's West Side neighbors.

"We know we are preparing our students to be the future health care professionals in line with the needs of our medical partners and our community," he said.

Online learning

Just as industries everywhere adjusted to remote work during the pandemic, so did the institutions. The immediate switch to online enrollment and learning created a steep learning curve at first for faculty, staff and students as they

continued their work despite the disruption, the leaders said.

The shift strengthened the institutions' continual online course development and enrollment from outside the Buffalo area, while they seek to maintain the on-campus experience.

"People come to Daemen, much like D'Youville and Canisius, because they want a smaller institution, they want a connectedness," Mendel said, "and so we continue to grapple with how we maintain that while growing our accessibility. It is a unique way to learn when you're in a smaller institution."

Teaming up

Partnerships with Buffalo-area providers are becoming increasingly important with these institutions, as exemplified by the relationship between D'Youville and Sisters of Charity Hospital that created the primary care clinic at the university's health hub.

But greater initiatives and more inclusiveness are needed ultimately to better prepare practitioners.

"By nature, we have to have relationships with clinicians in the area. We need clinicians who are training our students, and we as program directors are having conversations with them.," Larson said. "But when the head of Catholic Health meets with the head of the university, we're not invited to the table. It's not intentional. It's just that leadership meets with leadership. What they really should be doing is creating new spaces for community clinicians and the health care educators and the health care students to share their thoughts."

Bring in New York State Department of Education as well, Mendel said.

"There needs to be a larger table where everybody's sitting down to say, here's where we are going, here are the gaping holes. This is how we're going to fix them," she said. "There's a willingness, there's just not a habit of doing that."

To improve communication, Grupka said he formed a clinical placement committee that included all the academic programs so that they all talk and share their connections. He has served as a liaison between clinical coordinators and administrators and medical partners to strengthen the university's partnerships.

Interdisciplinary approach

The online learning experience in school is preparing the students for their practices that very well will involve reaching patients remotely, the leaders said. There are other ways the institutions are addressing evolving health-care careers.

One is teaching with nursing, pharmacy, physician assistant and other health-care departments at D'Youville, all leading to an understanding of each discipline's role and a team approach to patient care, that should carry over to their eventual practices, Grupka said.

At Canisius, the physician assistant students are learning how to broaden the traditional role as a bridge between patient and physician to include multiple disciplines, Larson said.

She is hopeful for continued relaxation of regulations that during the pandemic allowed physician assistants a greater role in the interdisciplinary approach to patient care. The students are becoming more aware of and active in the state legislative process that could lead to making permanent those changes in regulations, Larson said.

Post-pandemic challenges

The effort to improve enrollment will continue in the future, Mendel said.

"Accessibility to online programs is wonderful, it also comes at some cost to smaller institutions who are known for their more personal, family-centered way of doing things," she said. "That is something that is plaguing all institutions of

higher education.”

A related enrollment challenge pre-dates the pandemic, and that is preparing students for rigorous and competitive health-care position, such as physician assistant, well before they enter college, Larson said.

The system favors the advantaged student and will take years to shift to level the playing field, so that higher education is sending into communities practitioners with whom residents can identify culturally and racially, the panelists said.

“It’s going to cause us some struggle,” Larson said. “Who else wants to buy in? Who wants to finance that? Who wants to talk to us from K through 12 in the inner-city schools? My hope is better connectivity between K through 12 and the health care workforce.”

Additionally, the panelists are hopeful that in the coming years their institutions will broaden and strengthen their online course offerings and their partnerships with medical partners so that the pipeline to the workforce continues vigorously.

“Collaboration is the name of the game, from partner institutions to K through 12 education to workforce industries to providers to payers – all of the above, so that we are at least closer to being on the same page so that we’re helping to construct and support and empower the next generation of leaders,” Mendel said. “I’m also hoping in the next few years we will see a far more representative group of folks in leadership.”

Grupka also would like to see greater collaboration among the academic institutions. An example is getting the local physician assistant program students together on joint health care projects. The focus should not be on how to out-do each other, but ways to work together.

“We are not going to survive as competitors,” he said. “Just as on campus we have broken down the silos of

departments, we have to do that institution to institution. We have to support each other.”