

Part II Curriculum Development

How to develop a Proposal

In early spring of each year AHEC grant contacts will be asked to begin the planning process for the following year. AHECs should use their region's needs assessment and routine planning to achieve "fit" between the needs of the region and the grant priorities. Over the span of this 5 year grant it is hoped that most AHECs will select to pursue projects in the majority of the priority areas. This should be achievable given that these areas are broadly defined. These priorities again are continuing education in:

- Falls Prevention
- Health Literacy
- Mental Health
- Core Competencies in Geriatrics
- Special Topics in Aging

Outcomes and Infrastructure development projects:

- Tracking Practice Change
- Coalition Building

The proposal should have a mix of activities designed to meet local service area needs.

Step 1. Review current year activities. Use your quarterly reports as a good narrative summary plus your course evaluations, and attendance.

Step 2. For each activity in the current year evaluate low, medium or high level of success.

Step 3. Identify any new needs in Geriatrics that have surfaced throughout the current year

Step 4. Determine the mix of activities to include in the planning year

e.g. number of continuing education events

A goal for number trained

A goal for trainee demographics e.g. targeting MD's? Nurses? Rural providers? Etc.

Step 5. Explain if you will maintain, increase or decrease level of continuing education training and a rationale for this action.

Step 6. *Consider* adding a project in tracking practice change. (Mountain and Southern Regional have tackled this important research component during Years 1 & 2) HRSA priorities are moving more and more in the direction of documenting outcomes in practice change and as a result the CGEC is placing priority on these types of proposals however this is not required at this time.

Measurements of practice change is quite basic at this point in time. Measure some aspect of a practice for 3 months ahead of training. Train and then measure the same component in the same way for 3 months afterwards. This is the design of currently funded projects around falls prevention.

Approval from an accredited Institutional Review Board will be required for these projects. Additional consultation on research design is available through Dr. Tiffany Shubert and Dr. Cristine Clarke at the CGEC.

Step 7. Include a statement regarding coalition building and activities

Step 8. list your deliverables by focus area in your proposal

Step 9. Submit a budget aligned to your deliverables. Assistance with budget development is available through the CGEC contact Cristine Clarke

Goals and budgets must be specific, measurable, attainable, realistic, and timely SMART Goals. For more tips on SMART GOALS see

http://www.youtube.com/watch?v=uThBb3kGf4k&feature=player_embedded#!

Site Visits

CGEC staff and faculty intend to conduct site visits at least annually as a means of building coalitions and aligning missions. Site visits are a mechanism for AHEC staff to receive technical assistance. CGEC staff are available more often for consultation on curriculum, program planning, data management, evaluation or other area as requested.

Education Projects

Training is the primary focus of both AHEC programs and the CGEC. Training health care providers in Geriatrics is the greatest priority area and as such, the CGEC expects each AHEC to conduct a significant scale of training.

Overall the CGEC's goal is to reach at least 1,000 participants across the span of health care disciplines per year. AHECs are key partners in this endeavor. The CGEC understands that Geriatrics is an emphasis for AHEC programming in addition to what is funded under this grant. As an average, AHEC's should plan on reaching between 130- 150 trainees per year using CGEC funds. Past trends have shown each AHEC can easily achieve this goal with between 4 to 6 continuing education events per year. This is intended as a ballpark of productivity and not a minimum or maximum requirement as individual AHECS may plan differently due to their local priorities. However, if your area is going to perform significantly fewer (or more) continuing education events prior written notice to the CGEC staff is required.

Needs Assessments

It is expected that AHEC's will perform their usual and customary periodic needs assessments in the field. CGEC funded projects should be aligned with the needs as documented through these assessments. CGEC staff are willing and eager to assist in these assessments as need be.

Curriculum review

The CGEC works in partnership with each AHEC to produce high quality curriculum grounded in evidenced based research. As part of the grant process in addressing the needs of the entire state, the CGEC reserves the right to conduct periodic curriculum reviews. Our goals are along the same lines as those of AHEC: avoid duplication of effort, avoid commercial bias, and verify presenter credentials.

Online Curriculum Review

Curriculum review is particularly salient for online curricula as they will continue in perpetuity. It is especially important to avoid duplication in the online format. Therefore before completing online development please send a 1 page outline of course objectives, intended audience, topics to be covered, faculty name and credentials along with proposed teaching methods (lecture, case presentation, simulation, web based interactive read and respond, etc) The CGEC will respond within 30 days with approval or revisions requested.

Course Objectives	Intended Audience	Topics	Faculty Name and Credentials	Teaching Methods
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*Adapted from Eastern AHEC Department of Nursing Education Activity Documentation Form

The CGEC reserves the right to decline to fund any educational programs which does not maintain accurate information or which misrepresents in any way. In keeping with AHEC policy and philosophy commercially biased programs are also strongly discouraged.