From the HPCOP office

The Health Professions Career Opportunity Program (HPCOP) staff would like to take this opportunity to introduce our program to all of our new readers and to re-acquaint our long-time supporters. This is a perfect time to describe our program to you and to direct your attention to the new look of our newsletter.

HPCOP, created through legislation in 1977, is within the Health Care Workforce and Community Development Division of the Office of Statewide Health Planning and Development (OSHPD). The director of OSHPD is David M. Carlisle, M.D., Ph.D. OSHPD is one of the 15 departments and boards governed by the California Health and Human Services Agency.

The primary goal of HPCOP is to aid in the recruitment and retention of economically/educationally disadvantaged students in health professional training. The program motivates, informs, and helps these students prepare for health professional training by contracting with post-secondary educational institutions, and distributing free informational publications.

HPCOP administers activities to assist undergraduate and postbaccalaureate students in their application and admission to California health professional schools, thus increasing the number of economically/educationally disadvantaged students receiving training in medicine, dentistry, nursing, and public health.

Activities concentrate on assisting economically/educationally disadvantaged undergraduate and postbaccalaureate students regardless of race or gender. However, due to the large percentage of African-American, Hispanic, and Native American students within this group, and their current underrepresentation in the health professions, special efforts are made so students from these three ethnic backgrounds are recruited to participate in all HPCOP activities. This assistance results in increased numbers of health professionals practicing in the Health Professional Shortage Areas (HPSA) of California.

(See HPCOP on page 11)

Visit us online at:
www.oshpd.state.ca.us/pcrcd/professions/hpcop.htm

In this issue:

- Scholarship Success
- From R.N. to B.S.N.
- HCTP Insert
- Prep School
California State Loan Repayment Program

The Office of Statewide Health Planning and Development’s National Health Service Corps (NHSC)/State Loan Repayment Program is funded by a federal grant to assist in the placement of primary health care professionals in the Health Professional Shortage Areas (HPSA) of California.

The State Loan Repayment Program is responsible for repaying government and commercial educational loans of primary care providers including medical doctors and doctors of osteopathy in family practice, general internal medicine, general pediatrics, and OB/GYN. Also eligible are dentists, physician assistants, nurse practitioners, and certified nurse midwives who obligate themselves for service in public or private non-profit entities located in defined HPSAs.

Health professionals must meet the following requirements at the time of application:
—Be a U.S. citizen with current and unrestricted California license to practice their profession;
—Be free of unserved obligations for service (local, state, and federal);
—Be free of judgments arising from federal debt;
—Be committed to providing full-time primary medical care or dental services in an urban or rural HPSA for a minimum of two consecutive years.

Health Professionals must complete their education and be close to gaining employment. Those interested should request a list of approved loan repayment practice sites by contacting Delia Santiago, Program Administrator, California Loan Repayment Program, Health Professions and Community Development Division, 1600 Ninth Street, Room 440, Sacramento, CA 95814.

It is recommended that you e-mail your name and address to dsantiag@oshpd.state.ca.us to request a list.

WORLD WIDE WEB SITES RELATED TO HEALTH PROFESSIONS

PHYSICIAN ASSISTANT
The American Academy of Physician Assistants
http://www.aapa.org/

PUBLIC HEALTH
The Association of Schools of Public Health (ASPH)
http://www.asph.org

American Public Health Association
http://www.apha.org

CAREER INFORMATION
Occupational Outlook Handbook
http://stats.bls.gov/oco/home.htm

Health Professions Profile List
http://www.publichealthjobs.com/list.html

MENTAL HEALTH
National Mental Health Association
http://www.nmha.org

GUEST ARTICLES
We welcome contributions. Mail us your ideas, letters, announcements, or stories today! Announcements of scheduled events must be mailed to our editorial office four months in advance to be published. Be sure to include your name, address, and phone number on all correspondence. The Health Pathways editorial staff reserves the right to edit all material.

REPRINTED ARTICLES
Views of contributing writers do not necessarily reflect the policy of the department, agency, or administration. Letters to the editor are encouraged. We do not pay for guest articles. Manuscripts are welcome. The Health Pathways editorial staff reserves the right to edit all material.

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California State Loan Repayment Program

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The professional benefits of continuing your nursing education are numerous. Less numerous may be your options for coming up with the dollars to pay for it. Securing a low-interest student loan is an obvious solution. The U.S. Department of Education is the single largest provider of student financial aid through federally sponsored loan programs.

However, if you want something that you do not have to pay back, a scholarship may be just the thing to finance your education. Colleges and universities are the largest—but not the only—source of academic scholarships. While some awards are based solely on financial need, others are determined largely by a student’s application, so it pays—literally—to follow some guidelines on preparing and submitting your request for assistance.

Take Your Time
Evangelical Community Hospital in Lewisburg, Pennsylvania, offers its Mae F. Keefer Nursing Scholarships to encourage high school students in the state’s Snyder, Union, and Northumberland counties to pursue a professional nursing career. The precise criteria for the awards demonstrate how thorough the selection committee is in choosing recipients. Beth Strausser, administrative secretary at the hospital, explains, “students applying for one of our scholarships are rated on a scale of zero to five, on the basis of nine specific criteria: academic standing, financial need, quality of references, acceptance at a school of nursing, career goals, quality of required essay, community service and/or extracurricular activities, complete application, and previous exposure to health care.”

She notes that a personal interview is no longer required because of the logistics required in pulling both the scholarship committee and the applicants together at one time.

Given such a comprehensive selection process, students must give equal attention to detail in applying for a scholarship. To start the process, contact the financial aid department of your nursing school and find out what it has to offer. Then, give yourself plenty of time and follow your school’s guidelines to the letter, advises Beth Richardson, dean of student affairs at Indiana University.

“Students tend to start the application process too late. They need to start at least six to 12 months ahead of time before the applications are due. Applications are usually due sometime in the fall or spring,” says Richardson.

Students need time to get themselves organized. If the application calls for some kind of an essay, additional time should be set aside to write and review the

(See Scholarship on page 15)

Scholarship Search
Numerous scholarships exist for students involved in undergraduate or graduate work in nursing. However, one challenge for many students is knowing where to look. To help you get started on your search, listed below are a few organizations offering scholarships.

American Association Of Critical Care Nurses Educational Advancement Scholarship
Phone: [949] 362-2000
E-mail: info@aacn.org
Web site: www.aacn.org

Foundation of the National Student Nurse Association
Phone: [212] 581-2215
E-mail: nsna@nsna.org
Web site: www.nsna.org

Minority On-Line Information Service [MOLIS]
Web-site: www.sciencewise.com/molis

Nursing Student Loan Program
Phone [301] 443-4776
Web site: www.hrsa.gov

U.S. Public Health, Health Resources and Services Administration,
Bureau Of Health Professions Scholarship for Disadvantaged Students
Phone: [301]443-0846
Web site: www.hrsa.gov
From R.N. to B.S.N.
Greater career opportunity and increased income are just two reasons to pursue a baccalaureate degree.

By Pamela Palmer, Ed.D.

When Myron Myers, R.N., talks about going back to school for a bachelor’s degree, his reasons are not difficult to understand. Five-year-old Kristian Ashley and five-week-old Myron Carrell, Jr., make the effort worthwhile.

“I want more for my son and daughter,” he says. “I want the best for them so I have plans. For the last ten years, I’ve worked for Baptist Hospital in Memphis, Tenn., but now I’m only working there 12 hours a week and plan to quit soon.”

Myers recently took a full-time position as a charge nurse. “I’m working in community behavior health, and I love it! My supervisor says she will try to work with me on my schedule. I told her I just had to go back to school,” he continues. “I’ve been an R.N. for three years, but I’m not satisfied. I plan eventually to go into anesthesiology.”

A student at the University of Memphis, Myers plans to finish his bachelor’s degree and enter Vanderbilt University’s anesthesiology program. “After the bachelor’s degree, it will take two or three years,” he says. “But, I believe in what I am doing. I tell friends to think about the rest of their lives and base career decisions on that. To make a decent living, you have to choose the right field and the right career. Keep striving to excel and make more money.”

For Myers, as for many other registered nurses who return to the classroom, missing family time is difficult. “That’s the toughest part,” he says. “My wife Alisa is a registered nurse too. Money is not a problem because we have saved since we left school, but I miss being with her and our children. She supports my going back to school. Marriage has truly been a blessing to me.”

‘Hire’ Education
Ambition for a better life is only one reason nurses return to school. Other forces shape the trend. “More and more hospitals and health facilities in this area are restricting their hiring to nurses with a bachelor’s degree,” says Lynette Merriman, director of admissions and student affairs at the University of Southern California’s Department of Nursing in Los Angeles. “From what I hear, they are retaining nurses who were hired without the degree, but some are asking nurses to go back and work toward their bachelor’s degree. New hires, though, are required to have the degree by some facilities.”

Nowhere is the trend clearer than at the U.S. Department of Veterans Affairs, the nation’s largest employer of registered nurses. In late 1998, the VA announced the National Nursing Initiative, setting the bachelor’s degree as the minimum required educational level. New professional nurse hires face a 2005 deadline.

Dan Mezibov, Director of Public Affairs at the American Association of Colleges of Nursing, reports that graduates of R.N. to B.S.N. programs may have an advantage over traditional B.S.N. graduates. “Employment commitments for registered nurses to baccalaureate programs are higher than for graduates coming out of traditional B.S.N. programs,” he confirms. “While schools in all regions estimate that 98.6 percent of R.N. to baccalaureate graduates had jobs waiting at graduation, they estimate that 76.8 percent of graduates from traditional B.S.N. programs had a job waiting. This is a dramatic difference.”

Gaining access to new opportunities is another reason nurses are returning to school. As Merriman explains, “our R.N. to B.S.N. curriculum focuses on community and home health nursing, which I think is the future of nursing. It also focuses on leadership and administrative roles—and students did not get this from their associate degree programs.”
The U.S. Department of Health and Human Services confirms the trend. They project a shortfall of over a quarter of a million baccalaureate-prepared nurses by next year—just at a time when the public expects nurses to be educated at that level. According to a June 1999 Harris Poll sponsored by Sigma Theta Tau and NurseWeek Publishing Inc., 76 percent of the public thinks nurses should have four or more years of education past high school.

Money, too, is a factor. The Health and Human Services Division of Nursing looked at annual full-time earnings at various levels of education preparation in its report on the Registered Nurse population. The department reports that in 1996, a staff nurse with an associate’s degree averaged $36,763 per year, while one with a baccalaureate degree averaged $39,790. As an administrator or assistant, the difference is even more pronounced—$44,101 per year for nurses with associate degrees and $50,984 for those with a baccalaureate degree.

**Choosing a Program**

“Can I do this and still work?” That’s a question Kathy Keasler hears often from registered nurses considering the University of Iowa program. “How flexible is this program?”

When seasoned registered nurses head back to school, they look for degree plans tailored to their specific needs. Keasler, program associate for the R.N. to B.S.N. Program at the University of Iowa in Iowa City, tells prospective students, “our program is designed to accommodate nurses that continue to practice, and it is our recommendation that they continue to work. Part of the student advising process is to develop an individual plan. We work with each student on details.”

“We are committed to distance education,” she adds. “Many of our courses incorporate the Web though none are totally Web-based. Our primary strategy to deliver to distant sites is the Iowa Communications Network, a statewide system that links higher education, plus a number of libraries. In the nursing major, our faculty here in Iowa City connects with three or four remote sites where there is a faculty member available for on-site advising and practicum.”

At the University of Central Florida, the R.N. to B.S.N. program is totally web-based. Popular with some students who love its flexibility, the program has a downside for others. “Most like the convenience of working from home as opposed to driving to campus, fighting traffic, and juggling work schedules,” says Dr. Linda Henning R.N. to B.S.N. program coordinator. “But, the regularly expressed dislikes include comments that it is more time-consuming than a traditional class and takes more work than expected. Some students feel they need more structure and discipline than a web-based course provides.”

Students must also give thought to earning classroom credit for prior experience, a process that varies dramatically among schools. At the University of Southern California, students in the R.N. to B.S.N. program “have been allowed to challenge certain courses to get credit for experiences either before or after they enroll. This policy is currently being reviewed by the University and may be revised to limit the challenges [that may be made] before enrollment,” says Merriman.

“We do not offer credit for life experiences,” says Dr. Martha Greenberg, assistant professor of the Leinhard School of Nursing at Pace University in Pleasantville, New York. “But, if nurses have obtained credentials or certification through the American Nurses Credentialing Center in, for example, human development or neurological nursing, we give nursing credit as an elective.”

Variations exist, too, on how much time it takes to earn the degree, though two years is common. Howard University in Washington, D.C., requires a minimum of two years of study for their R.N. to B.S.N. program. At the University of Southern California, there is a 64-credit-hour rule, a period equivalent to two years of full-time study, says Merriman. “The University wants to make sure the students have the full USC experience.”

Openness to student input is another issue to consider in choosing a program. At focus group meetings, Pace University nursing students tell administrators what they like and dislike. “I think the R.N. to B.S.N. program is becoming more tailored to student needs,” says Greenberg. “Nurses who come back to school want more independence and fewer highly structured clinicals.”

“They want choices,” she adds. “Some want distance education via computers and an equal number want classes where they are face to face with the instructor. Most of all, they want to be treated as adult

(See B.S.N. on next page)
At the University of Central Florida, R.N. to B.S.N. Program Coordinator Henning understands that nurses move through the program at different paces. “After beginning a program, some nurses realize they might need to slow down and take only one course per semester,” she says.

“Others want to hurry up and get finished. Then, there are those who have a boost in their self-esteem for academic achievement. Many realize they have the capacity for graduate education and quite a number go on for a master’s degree.

“I advise students not to overload themselves with too many credits,” Henning says. “Taking a three-credit course requires a lot of outside preparation, reading, and library work. I tell them to slow down and enjoy the learning process. Going part-time is okay; look at things through different lenses. Go back to school because you want to do it. First, make the commitment, then start working toward the goal.”

Henning also advises a realistic look at the requirements when considering which program to select. “Depending on prior education, many nurses need a lot of general education credits before beginning the B.S.N. classes. Some will need to take a foreign language. Choosing a program that is regionally accredited will prepare you for advanced education in nursing if you decide to continue your education. Talk with a faculty member at the school and ask questions.”

Will the Nursing Shortage Stop the Degree Trend?
Though some speculate the nursing shortage will halt the trend toward degrees, Dr. Dorothy L. Powell, associate dean of nursing at Howard University, disagrees. She admits that the R.N. to B.S.N. program there experiences enrollment fluctuations saying, “the size varies from year to year depending on the nature of the nursing shortage in the area. When people are being hired, often there is a decrease. When there are fewer jobs and health facilities are more selective, people think they need to get the bachelor’s degree.”

Ultimately, however, Powell feels the need for baccalaureate-level nurses will not cease. “I think the degree emphasis is a continuing trend,” she says. “When you think about the nursing shortage we have now, sure, part of it is numbers. But, if you look at it closely, it is having insufficient nurses with the level of education that is required for the complexities we find now, particularly in the hospitals.”

Powell cites the impact of technology and the trend for patients to be sicker and of a more complex health status as driving the long-term need. “Therefore, you need a nurse who is educated, at a minimum, at the level of the bachelor’s degree,” she says. Powell continues, “the best investment we can make in nursing is to give the nurse a broad education and a good understanding of a holistic approach to health care, not just individual performance but also the political and social environment’s impact on how health care is delivered. And that comes at the baccalaureate level.”
What is the Allied Health Grants Program?

The Association of Schools of Allied Health Professions (ASAHP) has developed a Web site devoted to a wide variety of national allied health information. In addition to conference and meeting announcements, scholarship and award listings, and allied health publications, ASAHP’s site includes a federal Government Relations section. In this section, the ASAHP provides fiscal appropriation outlines, contact information for legislators, and a listing of current federal legislative issues pertaining to allied health.

Currently, ASAHP’s Web site is covering the federal Allied Health Grants Program issue. The following information is provided by ASAHP’s site, and summarizes what the federal grant program has accomplished in recent years.

The allied health grants portion of Section 755 under Title VII of the Public Service Act, was established to fulfill certain aims which include:

- Expanding enrollments in allied health professions with the greatest personnel shortages.
- Expanding or establishing clinical training sites for allied health professionals in medically underserved or rural communities.
- Developing curricula that will emphasize knowledge and practice in the areas of prevention and health promotion, geriatrics, long-term care, home health and hospital care, and ethics.
- Establishing demonstration centers to link research, clinical practice, and education.

What has been achieved by the allied health grants program?

Congress began to provide funds specifically for allied health in Fiscal Year 1990 after a decade of no funding. Starting with $737,000 in that year, funding increased to a level of $5,553,000 in Fiscal Year 2000. During that period, more than 900 applications were received by the Public Health Service, but money was available to fund only about 10 percent of these proposals. Using this relatively small amount of money, the following achievements have occurred as a result of this program. These results include grants that were awarded in August 1999.

- More than 68,000 practitioners and 7,300 patients have been involved in geriatric assessment and rehabilitation activities.
- Sixty-four percent of these grant programs have entailed developing curricula in areas such as geriatrics and 44 percent of the grants include interdisciplinary training involving 1,200 allied health students.
- Fifty thousand monographs and 750 videotapes describing methods to improve quality of life for geriatric patients are being distributed to allied health education programs throughout the United States.
- Twenty-eight grant programs involve distance learning, making it possible for rural students to complete their professional coursework in their own communities and be employed in rural settings (800 students have been trained for rural settings).
- Approximately 45 percent of graduates practice either full-time or part-time in medically underserved or rural areas. This figure is expected to increase significantly because 81 percent of programs in the Fiscal Year 1999

Visit us online at:
www.oshpd.state.ca.us/pcrcd/professions/hctp.htm
As part of the Health Careers Training Program’s attempt to provide you with information regarding allied health occupations, each issue will focus on at least one allied health profession and will include specific information regarding: job duties, working conditions, employment trends, salaries, entrance requirements, and advancement opportunities.

## Surgical Technicians

### TRENDS

During the past 25 years, the nature of most surgical procedures has become so complex that more staff are required to be a part of the medical team during surgery. Due to the growth in population, an increased life span, and improvements in medical and surgical procedures, there is a growing need for surgical technicians. Additionally, as efforts to control health care costs become an issue, a shift toward performing minor surgery on an outpatient basis should contribute to a further need for surgical technicians.

### THE JOB

Surgical technicians, also called surgical technologists, assist surgeons and anesthesiologists before, during, and after surgery. They work under the supervision of registered nurses or operating room technician supervisors.

Surgical technicians prepare operating rooms with surgical instruments, equipment, and sterile linens that will be needed during an operation. Technicians also may prepare patients for surgery by cleaning, shaving, and disinfecting body areas where the surgeon will operate. They may transport patients to operating rooms, help position them on the operating table, and drape linens over the patient to prevent any exposure.

During surgery, surgical technicians pass instruments and other sterile supplies to surgeons and surgeons’ assistants. They hold retractors, cut sutures, and keep inventory of sponges, needles, and instruments used during the operation. Technicians also help in the care and disposal of specimens removed for testing during operations and help apply dressings or bandages. They may also operate sterilizers, lights, suction machines, and diagnostic equipment.

After an operation, surgical technicians help transfer patients to the recovery room and assist nurses in cleaning and restocking the operating room for the next operation.

### WORKING CONDITIONS

Surgical technicians work in hospitals or other institutions that have operating room and emergency room facilities. Some technicians, often called “scrubs,” work directly for specific surgeons, assisting them in surgery.

Surgical technicians work in a clean, well-ventilated, and well-lighted environment. The work requires a substantial amount of standing and strict attention to proper surgical procedures. At times, the work can be fast-paced and stressful.

### EMPLOYMENT OUTLOOK

Employment in this field is expected to grow faster than the average for all occupations in the coming decades. Factors that will generate strong demand for other health workers will also spur demand for surgical technicians, such as population growth, the aging of the population, greater health consciousness, and widespread ability to pay for hospital and surgical care under public and private health insurance programs.

Also contributing to the growth and demand for workers in this occupation is the practice, in some hospitals, of assigning surgical technicians a greater number of routine operating room tasks. Due to the relaxation of certain government regulations and to cost containment efforts by hospital administrators, surgical technicians are performing more and more tasks under the supervision of operating room nurses.

### WAGES, HOURS, AND FRINGE BENEFITS

Wages for surgical technicians vary according to experience, location,
and size of the hospital. Hourly wages for beginning technicians range from $6.50 to $13. Those with little experience can earn between $11 to $16 per hour. Wages for technicians with three or more years with the same hospital range from $15 to $18 hourly.

A 40-hour, five-day work week is normal for technicians, although many are required at times to be on-call, to be available to work on short notice, and to be able to work overtime as needed to finish scheduled cases. Emergency surgery units require 24-hour coverage.

Benefits provided by most employers include paid vacation and sick leave; health, medical, vision, dental, and life insurance; and retirement programs. A few employers also provide child care benefits.

**ENTRANCE REQUIREMENTS AND TRAINING**

Surgical technicians must be high school graduates. They must complete a one year surgical technician/technology training program offered at a vocational technical school, community college, or at a hospital. Some community college programs, however, last two years and lead to an associate degree. The program must be accredited by the American Medical Association’s Committee on Allied Health Education and Accreditation (CAHEA).

Students receive classroom training as well as supervised clinical experience. They study anatomy, physiology, and microbiology. Other courses include the care and safety of patients, use of anesthesia, and nursing procedures. Students also learn how to sterilize instruments, prevent and control infection, and handle special drugs, supplies, and equipment.

Upon graduation from the training program, students are eligible to apply for certification by the Liaison Council on Certification of Surgical Technologists. The Liaison Council certifies surgical technologists who pass a comprehensive written examination. Since January 1997, the exam has been offered year round. Technicians can call the Liaison Council to apply for the examination, and upon the Liaison Council’s approval, they can schedule a date to take the exam.

A surgical technician does not have to be certified by the Liaison Council; however, it is well advised to become certified since some hospitals require certification before hiring. A certified surgical technologist is recognized as competent in the field and may be paid a higher salary.

Re-certification is required every six years. A surgical technologist must have at least 80 credits of continuing education within the six-year period to be eligible for recertification. Continuing education credits can be earned by attending seminars, conferences, home-study, vocational classes, or by retaking the certification exam.

Surgical technologists can become members of the Association of Surgical Technologists. As a member, the association will process the application for recertification without charge. The association also offers continuing education classes and has information of other classes or conferences.

Skills required to perform successfully the work of surgical technicians include:

— Ability to interact with different kinds of patients and other health professionals.
— Skill to follow technical instructions.
— Ability to work precisely and accurately.
— Ability to work as a team member.
— Capacity to perform well under stress or in emergency situations.

**ADVANCEMENT**

Some surgical technicians advance to assistant operating room administrators and assistant operating room supervisors. Assistant operating room administrators deal with the administrative aspects of running an operating room, such as ordering supplies and arranging work schedules. Assistant operating room supervisors actually direct other technicians in the operating room.

(See Technicians on next page)
FINDING THE JOB

Surgical technicians who are graduates of formal training programs and are certified by the Liaison Council will have the best opportunities for the job openings that will occur. Those without these qualifications can expect to face competition for jobs of their choice. Some training programs offer job placement. Job seekers should check hospital job postings and the classified ads in newspapers.

ADDITIONAL SOURCES OF INFORMATION

Liaison Council on Certification of Surgical Technologists
7018-C South Alton Way
Englewood, CO 80112
(800) 707-0057

Association of Surgical Technologists
7018-C South Alton Way
Englewood, CO 80112
(303) 694-9130

Source: State of California, Employment Development Department, Labor Market Information Division, Information Services Group, (916) 262-2162.

Grants from page 7

grant cycle included either community-based activities or used distance-learning technologies.

- Grants have been awarded to academic institutions, hospital-based education programs, and consortia involving 42 different allied health disciplines in more than 31 states and the District of Columbia, with 14 percent of these awards going to historically black colleges and universities.
- Student recruitment and retention activities have affected more than 9,000 individuals, with 95 percent of these students being either minority or disadvantaged.
- Close to 2,600 academic/clinical faculty have participated in workshops and short-term training programs.
- More than 16,400 students have or are being educated as a result of expanded enrollment.

Funds have been used to support national conferences devoted to topics such as delivery of primary care, core curricula, the impact of changes in health care delivery, education reform, outcome-based research, and leadership development.

Source: Association of Schools of Allied Health Professions. www.asahp.org

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Sacramento, CA 95814
Fax: (916) 654-3138

The Health Careers Training Project insert is published four times a year as part of the Health Pathways Newsletter. HCTP is designed to help promote both public and private-sector collaborates that identify and develop health career training resources, funding resources and jobs for the unemployed, targeted layoffs, and dislocated workers. These partnership efforts help meet today’s workforce demands of California’s healthcare industry.

Editor: Andrea Alvarez
Karen Munsterman, program administrator, oversees all HPCOP activities with critical support from the program secretary and student interns.

**Contracts**

By contracting with post-secondary educational institutions, health organizations, public and private agencies, and others, HPCOP provides funds for a wide range of preparatory and developmental activities. These activities are aimed at increasing the number of minority students preparing for and receiving health professional training. HPCOP’s awards are used to administer the following activities across California:

- MCAT Preparation Courses
- DAT Preparation Courses
- Survival Skill Conferences
- Dental School Applicant Conferences
- Public Health Conferences
- Medical School Reapplicant Conferences
- Postbaccalaureate Programs
- Nurse Outreach and Development Programs

(look for the “2001-2002 HPCOP Contract Awards Announcement” in an upcoming issue of Health Pathways to find out which academic institutions will be offering these activities).

**Publications**

In addition to the contracts, HPCOP produces and distributes 12 free publications geared to health professional students, counselors, recruiters, and others. Our most popular publication is the Health Pathways newsletter. It has aided in the success of our program and is at the core of staff efforts to communicate timely and useful information regarding health professions.

Health Pathways is created “for students by students” with the intention of providing an informal means of distributing information on financial aid, student health organizations, health professional school admissions, and the health care industry. (In the midst of all the text books and medical journals, who would not appreciate an easy read?)

The Health Pathways editorial staff does its best to produce an informative and interesting newsletter every quarter. We pack it full of interesting articles, inspiring profiles, and helpful success tips that make acquiring health professional training and education more manageable.

**The new look**

This quarter we are introducing our “new” Health Pathways, designed for a more updated look and feel. Now that our resources are available on the Web, we have decided to use the print edition of Health Pathways as a bridge between traditional academic and electronic resources. Look for interesting articles regarding web-based exams, online student organizations, and much more. Health Pathways still will feature the same information as in the past, but now it will include outlets to more innovative resources. Our Web address will always be on the cover of our newsletter, so add it to your “favorites” folder so that you can access us from your computer too!

Additional publications we offer are:

- Financial Advice and Health Career Resources Directory
- The Physician Assistant: A Guide for Minority Students
- Minorities and Public Health Careers
- Minorities in Medicine: A Guide for Premedical Students
- Educational Survival Skills Study Guide
- Time Management for Students
- Third World Student Organization and Health Groups Directory
- Dentistry Brochure (available winter 2001)
- The Many Roles of Nursing (available in winter 2001)

HPCOP has been involved with health professional students and faculty for over twenty years. We take advantage of every opportunity to help students succeed in the health professions. Through our loyal Health Pathways readers, we are motivated to continue producing quality publications that assist in successful completion of health professional training. We would like to encourage all Health Pathways readers to inquire about our free publications and health career preparation programs.

Congratulations to all who wrapped up a hot summer session, and good luck to those preparing for the fall 2002 term. Thanks for all the support we receive from our readers, and remember to pass Health Pathways on to a friend. Visit us online to access archived Health Pathways, HPCOP information, and other great resources.
For prospective graduate students, admission test success can be a passport to top programs. Are you prepared?

Ah, senior year. Time to finish up and wind down. Time to focus on the light at the end of the tunnel or harvest the rewards of a lifetime of study.

Or, it’s about more studying.

Just as they’re putting the finishing touches on the four- or five-year “project” that is their college career, many graduating students look to the future, only to see...more school. And, while some of these students welcome—or can at least stomach—the idea of beginning another school year the following fall, they can’t wait until then to address the tasks involved in applying to the graduate programs of their choice. Perhaps the most intimidating and agonizing of these tasks is to take the Graduate Record Examination (GRE).

It’s understandable. Your GRE score—that triad of numbers that rate your demonstrated aptitude in verbal, quantitative (mathematical), and analytical (logical) problem-solving—can be the lock or key to your success in getting into grad school. Every one of the top 50 graduate programs in engineering (as ranked by U.S. News & World Report) requires applicants to submit scores from the GRE General Test. And while the average scores of all people intending to go to graduate school in engineering are 456 in the verbal, 687 in the quantitative and 578 in the analytical sections, scores for applicants accepted to the top 20 schools average significantly higher.

Nervous yet?

You’re not alone. In fact, test anxiety is a legitimate reason that smart, able people weigh in with lower test scores than accurately reflect their abilities. The best way to approach such a test, experts say, is to prepare yourself in advance of the test date.

When dealing with a standardized test, preparation doesn’t mean learning material. It means learning what to expect from the format of the test, the nature of the questions and the testing environment.

Today, the GRE is changing. Historically, it was a written test administered several times per year at selected sites. Having registered weeks in advance, students arrived at the specified test site on the scheduled date and hour, No. 2 pencil in hand, and sat for seven timed sections of the 3 ½-hour test, surrounded by dozens, maybe hundreds of agitated strangers, any number of whom might be throat-clearers, pencil-tappers, or nonspecific fidgeters.

The paper-and-pencil GRE, however, was offered for the last time in April 1999. Now, the Educational Testing Service (ETS) uses only computer-adaptive testing (CAT). The GRE CAT takes approximately 2 ¾ hours. There are usually only four sections, although sometimes a fifth section appears which is not factored into your score but is used by ETS for research purposes.

Without having to coordinate sites, proctors, test material deliveries and so on, tests are offered practically every day of the year at established centers. Students register to take the test at their convenience and in relative privacy, as centers ordinarily accommodate no more than about 12 test-takers at once, each at a personal computer carrel.

And here’s an improvement: When taking the GRE CAT, there’s an all-you-can-scrrawl policy—you’re allowed to have as much scratch paper as you need. With the paper-and-pencil GRE, you had only the white space available in the test booklet.

Now that you know all the perks of the GRE CAT, it’s time you knew the rest. While the questions are similar in type to those on the paper-and-pencil test, the presentation is totally different. “Scrolling down” is an unnatural way to read and interpret the long passages in the classic reading comprehension exercisers. Also, not only do you have to answer every question in order to proceed, the computer doesn’t allow you to go back to change answers. And, of course, it can be hard to keep your place and concentration while looking up and down between your screen and the paper.

The scoring method is also different and complicated. Remember, the CA in CAT
stands for computer-adaptive. That means the computer adapts to its user, which further means that the level of difficulty of the question is determined by the user’s performance. So, the first question in any section is considered to be of medium difficulty. If you answer it correctly, the next question is harder; if you answer incorrectly, the next question is simpler.

Sounds unfair, doesn’t it? But CAT questions are weighted. Your score rises with every right answer, and subsequent harder questions are worth more points. Wrong answers get you easier question, but they also lower your score.

This brings us back to the question, “How do I approach this crazy thing?” The answer is, prepare. Since you don’t know what’s going to be asked, you shouldn’t spend too much energy studying world history and classic literature. Instead, you should educate yourself about the types of questions and the philosophy of test-taking. For this, you can use the traditional avenues—Kaplan and Princeton Review courses and myriad workbooks filled with valuable expert advice, dozens of model exams, hundreds of sample questions—the works.

But, it wouldn’t be a cliché if it weren’t true: It’s practice that makes perfect. Sitting down at a computer and taking a simulated GRE CAT is the best way to know what you’re in for.

So, where do you get your hands on one of these electronic sample tests? There are a number of sources, including:

**Product:** Powerprep Software  
**Cost:** $40.00  
**Format:** CD-ROM or software downloadable from the ETS Web site.

This software package comes straight from the horse’s mouth, so to speak. Created by the same people who create the actual GRE, it offers not one, but two computer-adaptive sample tests that run and are scored exactly like the GRE you’ll take for all the marbles. You can elect to be timed, or you can practice in the untimed tutorial mode.

Beth Moreno, coordinator of the reading/writing/study skills lab at the Learning Skills Center, University of Texas at Austin, recommends that her students stick with ETS software, “Who knows better what to expect on the test?” she notes. “I think it’s well worth the cost.” And, all ETS practice tests are constructed from previously administered exams. The questions are more than just similar to what students see on the GRE; they are what students see on the GRE.

Just to sweeten the pot, Powerprep also includes the tutorials and strategies that you’d typically find in printed how-to books. There are 400 practice questions with explanations of their answers and two “paper-based” sample tests. Obviously, these are not on paper, but they simulate the paper-and-pencil GRE, allowing you to skip a question and go back—which can still be beneficial for learning the style of questioning.

**Kaplan educational centers www.kaplan.com**
**GRE 1998-1999**  
**Cost:** $29.95  
**Format:** Paperback book with CD-ROM

Kaplan has been in the business of preparing test takers for more than 60 years, so it’s pretty safe to say that they’re experts. As for practice tests, this product offers three full-length GRE that functions like the paper-and-pencil version allowing you to go backward and forward, skipping questions and changing answers—good practice but not reflective of the GRE CAT.

If there were a catch here, it would be that this isn’t an ETS product. “So?” you ask. First, Kaplan writes the questions themselves, which means that they are like the actual GRE questions, but are not from the source that knows best. Compare it to preparing for a final exam using a study guide created by a teaching assistant rather than by the professor. Also, because ETS doesn’t release the algorithm they use for scoring the GRE CAT, the scores you receive on a non-ETS practice test are not guaranteed predictors of what you’ll receive on the actual test. As Moreno says, the difference between ETS products and those of competitors probably is not fatal, but you should be aware of it.

The fringe benefits delivered with this product include a special math review section to help you bone up on the types of questions you’ll see in the quantitative section. And, interactive lessons lead to a personalized study plan designed to address your individual needs.

(See **Prep** on next page)
Higher Score on the GRE, GMAT, & LSAT  
Cost: $29.99  
Format: CD-ROM

For a measly four cents more than the product above, you can prepare yourself for business and law school admission tests as well. The GRE disc of this three-CD set is the same one that’s in the GRE 1998-1999 book. But, if you’re thinking about business or law degrees too, this is a good product to know about. According to Kaplan, it’s the single best selling graduate test prep software available, with more than 90% market share in 1997.

Product: Tester  
Cost: Free  
Format: On-line

Unless you’re a Princeton student, you only get one shot with this one. One of the two most renowned test-prep agencies, the Princeton Review offers a sample GRE CAT to any and all takers—just register through the web site. And, while this is the least expensive practice test you’re likely to find, once you’ve taken your turn, you can’t go back for another freebie.

 Tester has a feature that would interest anyone who plans to enroll later in a Princeton Review course; it keeps track of your responses. When you’ve finished, you’ll not only get feedback on your performance, but the report of your responses will be stored to preclude you from seeing the same questions on subsequent sample test that are a part of your coursework.

As with Kaplan’s products, there’s a hitch. The questions are written by The Princeton Review, not ETS. Also, while the computer-adaptive element is there, meaning that later questions are determined by earlier answers, scoring methodology isn’t 100 percent no-doubt-about-it identical to that of ETS. “Regardless, the results our clients see on actual tests are typically right in line with what they saw on their practice tests. And, they’re also in line with the results of students who use ETS prep materials,” assures Stuart Reed of The Princeton Review’s Chicago office.

Cracking the GRE CAT 1998,  
By Karen Lurie  
Cost: $29.95  
Format: Paperback book with CD-ROM

What you’re really interested in here is the CD-ROM. Like Tester (above), the questions on this electronic practice test are written by the Princeton Review rather than by ETS. Also, like Tester, the scoring methodology is not guaranteed to be identical to the method ETS uses.

The CD-ROM’s RevieWare software allows you to take a simulated complete test, do drills on certain types of questions or review a test for answer explanations. The full test cannot be suspended once it’s begun, so have a snack, take a bathroom break, and get comfortable before you get started.

Last thing: All three of these supplier’s web sites are excellent repositories of general information about the GRE CAT. Even if you’re not at the stage of taking practice exams, you can get a lot of your preliminary questions answered by visiting these on-line resources.

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Liz Harmon is senior editor for CASS Recruitment Media
essay. “Be sure to have other people read and critique your essay so you can be confident that you have done it well,” she offers.

The University of Wisconsin, Madison’s School of Nursing offers both undergraduate and graduate scholarships. Carol Rosga works in the office of the assistant dean for student services and stresses that students also need to read the application instructions carefully.

“For our scholarships you have to have at least a 3.0 grade point average. It says right on the first page of the application,” says Rosga. “Once in a while we get applicants that don’t read that part. These applications are just discarded, because they are not eligible. Applicants have to read that first page of the application.” In addition, “sometimes students don’t know what their GPA really is, or they apply for the wrong scholarship,” says Rosga.

Susan Wong, staff specialist at the Foundation of the National Student Nurses Association, recommends that applicants be neat and thorough. “They don’t complete the application in its entirety,” she says when asked about students’ most common mistakes. “They leave something out.”

Sloppy applications are a surprisingly widespread problem. Richardson says that the students need to type or complete their applications on a computer. “Everybody thinks that their handwriting is legible, but it’s not,” she notes. “The point is to fill out your application so that people can read it.”

**Digging for Gold**

Experts agree that students should never pay for information listing available scholarships because you can get all you need free. To find scholarships that are sponsored by organizations other than their school, students can use scholarship search databases to find potential sources of money.

“Students need to be very organized about their search. They need to ask local businesses, banks, churches and other places because lots of times they will have small scholarships. Those are good places to begin a search process,” says Richardson.

Officials note that students tend to go after the scholarships that offer large lump sums of money and ignore smaller ones. Combining several smaller scholarships into an amount that equals one large award works equally well at financing an education.

An added appeal: Often, other students do not know about the much smaller awards, so those who do apply have a better chance of success. “There is not as much competition,” says Richardson.

She notes that Indiana University’s nursing program administers an annual scholarship that is sponsored by a local historical society and another one that is funded by a veteran’s group.

Once you have identified specific scholarships for which you are eligible, contact the sponsoring organization for an application and ask about the deadline for consideration, as well as the method by which students will be informed whether or not they have received the scholarship.

When you receive the application, confirm that it relates to the scholarship for which you want to apply, because many organizations offer several different awards. Then be sure to answer each question thoroughly. Don’t leave any blanks.

California continues to face a serious energy challenge. Dedicated conservation efforts, and mild temperatures have reduced energy consumption significantly statewide, but your conservation efforts still are needed both at work and at home. Continued conservation along with new power plants coming on-line, reduces the possibility of outages, especially during hot weather months, and helps decrease our reliance on out-of-state generators. Remember every kilowatt-hour saved is money saved. Let’s make Energy Conservation a way of life. www.flexyourpower.com

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