

**National Hispanic Medical Association**

**Hispanic Health Information Dissemination &  
Training Project**

**(D52MP03105-01-0)**

**Final Report**

**For the Project Period  
September 30, 2003 to December 31, 2004**

**Submitted to the**

**Office of Minority Health  
U.S. Department of Health and Human Services**

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## Abstract

This is the final report on the activities of the National Hispanic Medical Association's **Hispanic Health Information Dissemination and Research Training Project** ("the Project"). Despite an ambitious agenda and implementation plan—given the continuing challenge of having few staff—the resources provided to us from the U.S. Department of Health and Human Services' Office of Minority Health via a congressional earmark enabled the National Hispanic Medical Association (NHMA/"the Association") to make comparably noteworthy strides in 2004—a) developing its communications capabilities through organizational development and external partnership development, b) organizing the governing body and developing the regulatory framework and initial infrastructure of the National Hispanic Health Foundation and its Research Training Program, c) identifying and evolving a more aggressive strategy for accelerating the growth of the Association's membership, and d) promoting an organized dialogue amongst an expanding network of Hispanic health professionals seeking more meaningful collaboration in the national effort to reduce health disparities and improve the health of the nation's Hispanic population. Perhaps even more stimulating to the NHMA leadership and members---and beyond the expectations of some—the Association made major leaps consolidating the establishment of the Association's National Hispanic Health Foundation, doing it in a spectacular way before a large gathering of supporters assembled at the Marriott Marquis in New York City on December 2, 2004. This effort included the simultaneous endeavor to create and distribute an attractive poster announcing the NHHF Scholarship Program for circulation amongst the nation's medical schools and graduate programs around the country. Project resources also enabled NHMA to lay the groundwork for this ambitious strategy and receive critical guidance and support from the American Academy of Family Physicians and the Robert Wood Johnson Foundation.

By no means were these accomplishments achieved effortlessly and predictably; nor are they enduring without future efforts to hold these gains. The Project Director labored repeatedly with the Project timetable and seemingly interminable delays. The efforts to conclude the negotiations to affiliate the Foundation with New York University were postponed many times; and the Association's early efforts to use Project resources for a direct outreach campaign to recruit members proved unrealistic—in great measure because of insufficient resources to do much more than a mailing, not a true campaign with reinforced mailers and communications or focus groups to develop attractive/competitive member-services and benefits. Finally, the new interactive MIS system, including NHMA List Serves, an online advocacy program and the planning for the Hispanic health portal, was a much more complex project than anticipated, and due to its postponement until the 3<sup>rd</sup> quarter due to the moving of the NHMA Office, limited the communication outcomes. Clearly, much more remains to be done. There is also no denying the limitations of our embryonic and limited organizational infrastructure, nor the ease with which the Association can overextend its resources, notwithstanding the infusion of Project resources in 2004.

The NHMA and NHHF leadership is acutely aware that it will take much more work and resources to continue building our embryonic infrastructures, member base and MIS systems; to expand our partnerships with national organizations and federal agencies that we are working with to improve the health of our communities; and to sustain our emerging but relatively new network of accomplished and upcoming Hispanic leaders in the health professions. Continuing to build and support our network of partners in academia, our communities, the private sector, and government—and continuing to fortify the Association’s infrastructure to make all this possible remains the foremost concern and focus of the Association’s leadership. Project resources have brought us much closer towards accomplishing this task.

The goals of this project followed the goals of the National Hispanic Medical Association (NHMA/“the Association”) to help address the health care problems facing the U.S. Hispanic population in three ways: a) by supporting the activities of physicians who serve the Nation’s Hispanics, b) by stimulating the emergence of a strong leadership network of Hispanic health professionals, and c) by developing the National Hispanic Health Foundation (NHHF) to develop research, policy analysis, education, scholarship, and publication activities on Hispanic health and the health professions.

From its inception, the Hispanic Health Information Dissemination and Training Project was designed to achieve four major outcomes: a) develop the Association’s infrastructure to support the governance and its priority to exponentially grow its member base, b) develop a functional capacity to network and communicate with an emergent network of Hispanic health professional leaders across the country, c) to develop an MIS system to facilitate information sharing and dissemination, and d) support Hispanic health services research and research training, through the establishment of the National Hispanic Health Foundation and its infrastructure.

Accordingly the Project was organized and approved to accomplish 10 objectives associated with the NHMA project goals:

1. Develop the capacity of the NHMA Executive Office to support strategic planning for NHMA and NHHF and communicate more effectively with the NHMA leadership bodies (the Board of Directors and National Advisory Committee)
2. Develop a leadership network that effectively links regional, state and local Hispanic Medical Societies, nurses, dentists, and health executives, and the OMH consultants with the National Hispanic Medical Association in order to facilitate collaboration on projects and information sharing on Hispanic health
3. Intensify efforts to develop the NHMA Membership Unit and Membership Services Program
4. Develop the NHMA Website as a major source of Hispanic Health information in English and Spanish

5. Publish the NHMA conference proceedings and the History of NHMA.
6. Develop the NHMA MIS System and training program for the NHMA office staff
7. Develop a Speaker's Bureau that integrates a larger number of members amongst the NHMA Leadership
8. Develop a public relations campaign on Hispanic health issues to raise awareness of the Hispanic community
9. Develop the NHHF Organizational Development Plan
10. Expand NHHF leadership and health services research training to include other Hispanic health professional organizations

This final report provides a comprehensive evaluation of all Project activities. A complete analysis of Project outcomes for each objective is provided. The lessons learned from the implementation of the Project goals and objectives are addressed, as are the next steps that the leaderships of the National Hispanic Medical Association and the National Hispanic Health Foundation have concluded must be taken to ensure that both entities thrive into the future. Finally, the dissemination and utilization and lessons learned for future Office of Minority Health projects are presented.

#### Milestones in the 4<sup>th</sup> Quarter of the Project

While this report focuses on the overall accomplishments of the Project, as in the previous quarters, below we summarize the milestones that are specific to the reporting period, September 1 – December 31, 2004:

1. At the invitation of the President of Meharry Medical College, John E. Maupin Jr., DDS, the Project Director and organizational development consultant traveled to Nashville TN in August 2004 for a full-day planning session on recruiting Hispanic students from around the country to the Meharry Medical College, and recruiting other medical schools into this effort. The Project Director followed up with the senior staff of Meharry to develop a future partnership including information sharing and dissemination for the purpose of recruiting more Hispanic and African American students to the health profession careers.
2. In terms of publication efforts, the NHMA completed its Conference proceedings and started the development of the History of the NHMA. In addition, together with the American Academy of Family Physicians, NHMA developed its first peer reviewed journal that was presented with media in August 2004. During this period, the AAFP approached NHMA Project Director to develop a second issue for September 2005. The journal editor is an Advisory Committee physician and the articles were mainly written by NHMA members. This activity responded to the demand for culturally

competent medical care information for primary care physicians regarding the care of Hispanic patients. The Project Director started formal discussions with a consultant to develop the “NHMA Press” and purchased the licenses to 100 ISBN numbers for books which will include the NHMA Leadership Fellowship case study books for graduate schools.

3. The NHMA Board of Directors met on December 3<sup>rd</sup>, 2004 in NYC to assess the development of the infrastructure progress, approve the Emergency and Disaster Plan, accounting manual, and Employee manual, and to assess the NHMA strategy for building its member base.
4. The NHMA MIS system was developed and in October, 2004 the List Serve system was unveiled with staff training to follow-up on the communications among the leadership NHMA Advisory Committee and the Hispanic Health Professional Leadership Network. During the summer, the communications from NHMA to these groups were limited to email and faxes for the campaign efforts focused on the Centers for Disease Control and Prevention’s Futures Initiative and the advocacy efforts.
5. During this period, the membership letters for 2005 were developed for inclusion into the nationwide mailing to over 30,000 announcing the NHMA 2005 Conference, sent for printing in December, 2004. Renewal membership letters were also sent in December to all current NHMA members.
6. The Project Director and the organizational development consultant continued to work closely with the American Academy of Family Physicians Foundation (AAFP/F) developing the regulatory environment of the National Hispanic Health Foundation and strategic planning for 2005. Bobbi Abrams, the Director of Development for the AAFP Foundation facilitated an all-day joint meeting of the NHMA and NHHF Boards of Directors on December 2<sup>nd</sup>, 2004 in New York City. The main theme included the presentation of a board development model, a discussion on prospects for expanding the board of directors, and a review of the board’s structure of officers.
7. The National Hispanic Health Foundation and its Scholarship Program was unveiled before a gathering of 170 people representing NYC hospitals, community health centers, HMOs, and Hispanic physicians organized at the Marriott Marquis in mid-Manhattan. The Deans of the NYU Medical School and the Wagner School of Public Service co-hosted the event. The event was also used to unveil the NHHF Hispanic Health Student Scholarship Program poster for distribution to all the medical schools, nursing programs, and health professions graduate student programs throughout the country.

### **III. Project Narrative**

#### **A. Purpose of the Project**

The purpose of the “NHMA Hispanic Health Information Dissemination and Research Training Project” was to develop the NHMA capacity to share and disseminate health information through list serve, portal, membership and network development and to develop the plan for the NHMA Foundation infrastructure with a focus on the research training component.

#### **B. Objectives**

**1. Changes to original objectives – none.**

**2. Objective Assessment – see below.**

**3. Target Population Contacts –**

Part 1: Number of Persons receiving Services (health information exchange)

NHMA and NHHF Board of Directors (11 physicians, Hispanic, 4 female, 7 male), National Advisory Committee to the NHMA Board of Directors (40 physicians, Hispanic, 20 female and 20 male).

Networks: members of the National Associations associated with the National Hispanic Health Professionals Leadership Network – 5000 Hispanic professionals and 1000 students – Hispanic, 50% male/female.

Medical Society networks:

14 medical societies with average 300 members = 4,200 Hispanic members, 50% male/female

List serves:

NHMA Fellows Alumni= 100

NHMA Resident Alumni = 60

Members = 500

2005 Conference participants = 500

NHMA Board = 5

NHHF Board = 6

NHMA Board Advisory Committee = 40

NNLAMS List serve – 1000 medical students

Mailings = 33,000

**Goal 1: To increase awareness and develop the capacity to increase the dissemination of information about Hispanic health issues among the National Hispanic Medical Association network**

**Objectives:**

- a. **Objective 1a: To develop the Executive Office capacity to communicate more effectively with the NHMA Board of Directors and Advisory Committee by enhancing staffing pattern**

Outcomes Assessment:

The addition of an executive assistant and program officer to support the activities of the NHMA Executive Office had an unequivocally major impact on the productivity of the NHMA leadership with external parties, contributing substantially to its capacity to communicate and follow-up regularly on its commitments, providing timely responses to queries and requests, and expanding exponentially its efforts to develop strategic partnerships. Since the hiring of the executive assistant, the Board of Directors moved from meeting on a quarterly to a monthly basis, and deciding recently to move to biweekly meetings in response to a myriad of growing demands. Underlying this progress have been significant improvements in the organization of the work of the Executive Office—improved communications, scheduling, planning, and improvements in the ability to respond expeditiously and formally (in writing) to partnerships and networking opportunities.

Some material examples of the improved performance of the Executive Office include:

- Meetings with Verizon, a national communications company, to explore support for NHMA and the dissemination of health care information to health professional organizations and community-based organizations throughout the nation.
- Pursuing a partnership with the President of Meharry Medical College, John Maupin DDS, to develop information and dissemination to recruit Hispanic medical students to Meharry and expanding the partnership to include other medical colleges around the country.
- Facilitating communications and coordination of activities between the Executive Office, the NHMA Board of Directors and the NHHF Board of Directors
- Facilitating communications between the NHMA Executive Office and the NYU Wagner School of Public Service, leading to the signing of a formal affiliation agreement between the NHHF Board of Directors and the Wagner School
- Facilitating the work of the Hispanic Health Professional Leadership Network including organizing conference calls with Network leaders

- Working with the National Highway Traffic Safety Administration to find partners in a campaign to address seat belt usage and child safety seat usage among the Hispanic population in Austin Texas
- Acting as a liaison and facilitating internal communications between the NHMA Executive Office and Board of Directors, and the NHMA National Advisory Committee
- Coordinating a series of planning sessions commencing in late 2003 and into 2004 with the leadership of the AAFP and the AAFP Foundation on developing the operational structure of the National Hispanic Health Foundation
- Responding to press inquiries regarding NHMA communiqués regarding emergent health policy issues
- Facilitating the preparation of letters of support and successfully nominating qualified Hispanic physicians in 2004 to:
  - The USDHHS Advisory Commission on Childhood Vaccines (ACCV)
  - The USDHHS Advisory Committee on Training in Primary Care Medicine and Dentistry
  - The AMA 2<sup>nd</sup> Expert Committee on Childhood Obesity
  - Committee on the Study of the Future of Emergency Care in the USA
  - The USDHHS Primary Health Care Policy Fellowship
  - The USDHHS National Health Service Corps Advisory Committee
  - The Cancer Research and Prevention Foundation Laureate for Outstanding National Leadership
  - The Komen Foundation Policy Advisory Committee
  - The Komen Foundation Hispanic Advisory Committee
  - IOM Study to Evaluate the NIH Health Disparities Activities
- Facilitating the preparation of letters of support in 2004 for the successful promotion of qualified Hispanic physicians to the faculty of:
  - The University of Texas Medical Branch at Galveston
  - The School of Medicine at UCLA
  - The University of Medicine and Dentistry, New Jersey Medical School
- Facilitating communications with the President and CEO and her committee assignments, CMS and its Physician campaigns, the Medicaid Coalition, the National Hispanic Health Coalition, the National Hispanic Leadership Agenda, the AMA Disparities Commission, the Partnership for Prevention, and new requested partnerships such as “Together Rx Access Program” partnership to educate the National Hispanic community in an effort to make essential medicines available to Hispanics in need.

- Identifying and developing a database of over 100 foundations supporting infrastructure development for non-profit organizations.
- Coordinating collaborative activities between NHMA, major federal agencies, and foundations: the USDHHS Office of Secretary, the Office of the U.S. Surgeon General, the USDHHS Office of Minority Health, the Institute of Medicine, the Centers for Disease Control, SAMHSA, the Food and Drug Administration, the NIH National Center on Minority Health and Health Disparities, the Office of Women’s Health, the Robert Wood Johnson Foundation, the Commonwealth Fund, the California Endowment
- Participating in the Cultural Competence Field Review organized by the Center for Substance Abuse and Treatment

In addition to supporting the work of the executive office and coordinated related project activities, the program officer hired by NHMA through Project resources, manages the NHMA website and a growing number of list serves that have been prepared as a result of the growth in networking activities, particularly the work of the subcommittees to the National Advisory Committee and the emerging National Leadership Network of Hispanic Health Professionals.

**b. Objective 1b: To develop a Speaker’s Bureau for the NHMA Leadership**

Outcomes Assessment:

As stated in an earlier report, the outcomes associated with this objective—the recruitment and training of a cadre of NHMA members to serve as regional spokesperson, the development of policy guidelines and kits, a database of issues papers and speeches—were completed by the third quarter of the Project year. In the Project Year, the Association enlisted 60 physicians from amongst its membership ranks to serve on the Speakers Bureau. Speech templates were developed during the 2004 calendar year providing information on Hispanic trends in health disparities, an overview of Hispanic cultural competence, and from recommendations made at the congressional summit sponsored by the Commonwealth Fund convened at Harvard University’s Kennedy School of Government in January 2004. The Board of Directors also developed and approved the “NHMA Spokesperson Policy”.

Advancing the activities of the Speakers Bureau as a core program of the Association is a major objective of the NHMA leadership fore 2005 and future years. Indeed, the Association’s leadership the potential that this program has as a unique service offered to its members in the future. The leadership and NHMA chief executive officer also believe that it will be a function of the growing demand that NHMA is currently experiencing to participate in regional and local health events and the Association’s own concerted effort to project its agenda for reducing health disparities in the coming and future years by identifying opportunities in the regional and local media for

Project Director developed the following protocols to implement the speaker's bureau:

### **NHMA Speakers Bureau Protocols - 2004**

#### 1. Speaker List

NHMA Board of Directors  
NHMA Advisory Committee  
NHMA Leadership Fellows

#### 2. Selection of Speaker

Request for availability and match to specialty  
Collect updated bio  
Letter of request with attached information  
(Sample letter)

#### 3. Tracking List to make sure the speakers are rotated

#### 4. Reporting

Report (see form)  
To Board of Directors file for Annual Report agenda

#### 5. Evaluation Protocol

Evaluate after each report submitted  
Evaluate project at end of year

#### 6. Filing

Maintain the files in Administration Files  
Keep by date, match to calendar

#### 7. Adjust the Policy and Procedure Manual

Honorariums  
Travel reimbursement  
Travel reimbursement by NHMA  
Travel Voucher Form

- c. **Objective 1c: To develop a leadership network among regional, state and local Hispanic Medical Societies, nurses, dentists, health executives and OMH consultants**

#### Outcomes Assessment

The development of the Hispanic Health Professionals Leadership Network took its first major step with the assembly of leaders of national organizations at the 8<sup>th</sup>

Annual NHMA Conference in Washington DC on March 19, 2004. The evolution of the network will of course be an ongoing enterprise. This objective was essentially completed in the second quarter of the Project year with the exception of the completion of the databases of Network members and contacts. The delay of this deliverable is associated with the relocation of the NHMA headquarters to a new site and the logistical problems arising from this office move, interfering with office work for an unexpectedly longer period than planned.

**d. Objective 1d: To develop the NHMA Membership Unit**

Outcomes Assessment:

All deliverables for this strategic objective of the Association were completed and reviewed in the previous report. The NHMA Board of Directors, functioning as the committee-of-the-whole, has been actively involved overseeing the development of the Association's membership services. The Association added to the NHMA website a membership page and electronic Access-based membership form during the reporting period. In addition, the Membership Coordinator consultant was hired to track the membership correspondence and to develop the letter, renewal letter, certificate, listings of interest from the members in a database and the updating of the NHMA membership database. During this last quarter, NHMA hired a database consultant to combine 30,000 records of physicians and to rid it of duplicates and design a new database with a set of fields that could be used to enter new updates to the system, including contacts to NHMA for membership tracking.

Notwithstanding these accomplishments, the Association's leadership concluded by the third quarter of the Project year that the development of an 'effective' members services unit, in fact, involves the establishment of a complex configuration of staff and services, requiring a major investment in resources. The most important outcome from this experience has been the substantive learning that took place in 2004 on what it means to develop NHMA's base exponentially, and the decision to augment the membership development strategy by seeking the support of the Robert Wood Johnson Foundation and contracting the assistance of non-profit specialist 'Changing Our World' to assist us with partnership and resource development. Nonetheless, 2004 was an enormously productive year, measured by the considerable amount of learning and strategic planning that took place, and which the Association's leadership believes placed it on the right track toward the ultimate goal of developing an effective membership division, and the achievement of the eventual prize, the exponential growth of the NHMA membership base.

In 2004, the Project Director initiated the important groundwork involved in developing a functional and effective member services unit, including a half day meeting with the Membership staff of the American Medical Association in Chicago discussing the 2 major focus of activities – individual vs. affiliate recruitment and maintenance of members. In addition, the Project Director had an all-day meeting with Colleen Lawler, CAE, Director of the AAFP Division of Membership, and her staff (April 13, 2004), and

a significant amount of research and learning on the mechanics and strategies implicit in the growth of a member organization's base.

The Project Director and the Organizational Development Consultant and student researched the technical dimensions and requirements explicit and implicit to this work, and produced a 19 page technical document "Millennium Membership" for the NHMA Board of Directors, which laid out the technical challenges facing all membership organizations today, and summarized 150 recommendations in the literature for advancing membership development. This document was submitted to OMH in an earlier report. The research identified six key steps that NHMA should undertake in the quest to succeed with the goal of achieving exponential growth of its membership: a) identify the new physician marketplace and learn to deal with it, b) invest in technology and use it to attract and keep members, c) move from mass marketing to mass customization ( particularly, customizing membership communications), d) maintain the 'human touch', d) brand the organization and manage its image effectively, by creating targeted, specific programs that enhance that image, and creating a unique membership experience.

This overall work, particularly the day long discussions with the AMA and AAFP member services staff, led to a significant and early finding for the NHMA leadership—that the development of the member services unit would be the single most important challenge facing the NHMA leadership—and a strategic goal that will take substantial investments in capital and time.

The most important contribution of the Earmark resources to this strategic NHMA imperative has been the acquisition of, and appreciation for the technical know-how implicit to the development of an effective strategy and operational framework for membership development.

The support by the AAFP Division of Membership and of its Director, Colleen Lawler was equally invaluable in helping the NHMA leadership focus on its foremost question, "Where to start?" The day-long meeting and subsequent conference calls has helped the Association to focus on a number of issues and actions—1) joining the ASAE and using their considerable expertise in membership development and cost-effective technologies, 2) canned software as just as effective and considerably less expensive than customized member-services software, 3) the role of membership is to focus on recruitment and retention, 4) identifying the keep membership indicators to track, 5) it is essential to develop a standardized database, 6) the database must contain prospective members, 7) the identification of a basic staffing pattern [research and information services staff, a database person, a website manager, 8) establish a member-only section of the website with access to publications, reports, and member resources, 9) the development of a an 'active' recruitment plan (AAFP shared a copy of their current plan), 10) the organization of an NHMA membership/marketing group that looks at related tactics, 11) the development of 'market-share reports analyzing the member database, 12) the focus on giving "individual attention to NHMA members i.e. quarterly targeted mailings, 13) the focus on the 'culture of staff' and the 'organizational culture' as a

critical management issue in the success of membership attraction, recruitment, and retention, 14) the popularity of ‘advocacy’ as a member service amongst AAFP physicians, 15) the AAFP member-services division of answering phones within 3 rings, 16) the success of AAFP membership recruitment primarily through the management of “institutional relationships, 17) the importance of viewing communications ‘broadly”, not just a newsletter, 18) the organization of NHMA exhibits at student meetings and dedicating NHMA resources to this objective, 19) dedicating a resource to working with medical schools, 20) evaluating membership strategies by ‘coding’ applications, and 21) keeping member categories simple.

**NHMA Membership Protocols – 2004 – developed by the Project Director and Membership consultant during this project.**

Membership by Mail  
 Membership online  
 Accounting Office – deposits, financial records of membership  
 Accounting sends list to coordinator  
 Coordinator sends office Membership List  
 Coordinator sends new Member letter, certificate

P: Drive Databases - Members  
 Up to 2002     400  
 2003            250  
 2004            300  
 2005

Members List used at Annual Conference for discount benefit  
 Members List used for Advisory Committee efforts

Renewal Membership Project	November 1
Develop the Letter, Form	
Develop the List and Labels	
Mailing, Copying, Labels, Envelopes, Stamps	

New Membership Project	December 1
Develop the Letter, Form	
Add into the Conference Brochure	
Mailing started after printing – Dec. 15	

Membership Requests  
 Form

Membership List Serve in Operation	November
Scholarship and Contribution request	
Newsletter	

## Membership Renewal

Membership File - Membership Correspondence  
Analysis and Trends in Membership

### e. **Objective 1e: To develop the NHMA Website as a key source of Hispanic Health information in English and Spanish**

#### Outcomes Assessment:

This construction of the NHMA website, as noted in an earlier progress report, was achieved by the third quarter of the Project Year. 2004 saw a significant increase in traffic to its website, indicating a very successful online strategy. A web-statistics report is not available due to training-related issues—pointing to a major deficit in the implementation of this objective. Website content has been gradually increasing as the Association leadership has taken a gradual approach towards posting its documents until security measures and controls are fully worked out.

Throughout the project year and in this reporting period, the Association continued working with its IT consultant Mike Weaver to complete the knowledge acquisition underlying the use and populating of the NHMA website, and continued need for performance improvements with its management. The Project Director also enlisted the assistance of consultant Donna Lynn to help develop a planning document identifying the specifications involved in the development of the [www.HispanicHealth.info](http://www.HispanicHealth.info) portal, and the Association's communications needs and options for the development of the NHMA Hispanic Health portal.

The development of the portal is still in progress. On October 6, 2004, the Project Director and organizational development consultant met with the President of the Verizon Foundation in NYC, Mr. Patrick Gaston, who expressed interest in exploring a partnership with NHMA and NHHF in developing the [Hispanic Health.info](http://HispanicHealth.info) portal. This meeting led to the scheduling of a planning session with another Verizon senior executive, Mr. Emilio X Gonzalez, in the Verizon Washington DC headquarters, to define the parameters of a partnership with the Project Director in November 2004.

### f. **Objective 1f: To develop the NHMA MIS System structure and training program for the NHMA office staff**

#### Outcomes Assessment:

In 2004 NHMA saw significant upgrades to its IT infrastructure. All association data was streamlined and consolidated onto an in-house, LDAP-based system.

- o Working with MIS staff, the Project Director identified and removed obsolete, redundant and irrelevant data from the network server.

- A new login-based model was installed, resulting in significantly increased security.
- A new, server-based IMAP email system was installed, and training provided to NHMA staff.
- NHMA staff assumed editorship of its website, and significantly reduced its web server management costs.
- A new state of the art backup system was installed and has proven much easier to use the previous tape system. NHMA now handles all of its backup needs with in house; an MIS consultant checks the system during routine service visits.
- NHMA has installed, developed and sponsored several list-serves, and went live in January 2005.
- As part of its move, NHMA negotiated a significantly reduced rate for its Internet connectivity while increasing access speed fourfold over the previous connection.
- 2004 saw a significant increase in traffic to its website, indicating a very successful online strategy. Web-stats will be provided with a full breakdown.
- The Project Director has identified forward goals and written a roadmap for future data management and utilization: including an association-wide contacts database; a Microsoft Project-based project management system and a comprehensive, easily searchable portal to all of NHMA's digital information. These resources will be tied together under Microsoft's industry-standard Outlook email and data manager, and will provide an easy to navigate "NHMA Desktop" for all staff.

The major challenge faced with the completion of this objective has been in the area of training. While rapid progress was made from the outset with the installation of a new website in September 2003 and the IMAP server in February 2004, the training of staff was postponed until April. The training was done sporadically and not reinforced for staff to pick-up in a short time and it was decided to train in stages – website updating, then email, then contacts, then calendar, then list serve. Due to staff turnover in November, it was agreed that the MIS consultants would restart training into December 2004 and the beginning of 2005 with new NHMA staff.

**g. Objective 1g: To disseminate key information from the NHMA Annual Conferences, including the Proceedings and CME programs**

Outcomes Assessment:

The transcripts for the plenary session, "Cultural Competence Curriculum—Evaluation Tools", held at the NHMA 8<sup>th</sup> Annual Conference March 21<sup>st</sup>, 2004 was received at the time of the writing of this report and can be found in the appendices section to this progress report (appendices 2). The Project Director will request a carry-

over into October-December 2004 quarterly period to submit the final edited form. This document is being prepared in time for a panel of evaluation experts from major accrediting bodies that will assemble at the Crowne Plaza Hotel in Washington DC on September 9, 2004.

- h. Objective 1h: To develop a public relations campaign on Hispanic health issues to raise awareness of the Hispanic community, including media outreach, speakers bureau and the publication of the History of NHMA Book.**

Outcomes Assessment:

Please see the attached seven-page report “NHMA Assessment of 2004 Media Coverage for a comprehensive review of the media reporting on NHMA events. This report is based on and internal staff analysis of reports provided by the public relations firm Castaneda Global Communications (CGC) and media articles on file at the NHMA Headquarters of media coverage generated by NHMA activities in 20034. This article listing indicates that NHMA received coverage in fifty-one cities in twenty states. In addition, NHMA stories were carried by 5 major wire services, 4 national magazines, and twenty two internet news sites. A partial listing of topics included stories on six major themes, including: health disparities among Hispanics (obesity, hypertension, heart disease, cancer, HIV-AIDS, Women’s Health), access to primary and preventive care services (and insurance coverage), Hispanics in clinical trials, Hispanics and medical research, Hispanics in health professions, and socio-economic and cultural barriers.

The Project Director during this period, began writing the History of NHMA Book. See appendix for draft chapter outline. This will be drafted in 2005.

**Goal 2: To plan the development of the National Hispanic Health Foundation organizational infrastructure**

- a. Objective 2a: to design an implementation plan for the NHHF infrastructure, including governance, NYU affiliation agreement, and office capacity**

Outcomes Assessment:

Please see appendix for a full draft of the NHHF Implementation Plan which was submitted to the NHHF Board of Directors at its December 2, 2004 meeting in NYC. Given the core agenda of this meeting, Board Development, facilitated by Ms Bobbi Abrams, the Director of Development of the American Academy of Family Physicians Foundation, this implementation received a cursory review and was tabled for a more complete review and eventual approval in early 2005.

The development of the National Hispanic Health Foundation will be a continuing endeavor into the foreseeable future, but the scope of this objective has essentially been

met. As reported in the previous report, a formal affiliation with the NYU Wagner School of Public Service was successfully negotiated by the NHHF Board of Directors in April 2004, and was finalized during this quarter with meetings that included the lawyers from both parties.

Project Director and Organizational Development Consultant continued meeting and working closely with Sandy Panther, the Executive Vice President of the American Academy of Family Physicians throughout 2004—developing the regulatory environment and operational infrastructure of the National Hispanic Health Foundation. Considerable work has gone into the development of the NHHF governing body. Given this fact, emphasis was instead placed on benchmarking the structure AAFPF, especially the onerous body of regulations that Foundations must comply with, in order to brief the Board of Directors on its fiduciary and regulatory responsibilities.

Resources are still insufficient to support a full-time administrative staff or establish the core research and training programs. Given the current constraints, the Board of Directors of the Foundation decided to develop concepts for research training through the physician focus group at the Annual Conference in 2004 (see Appendix Research Draft Implementation Plan) and from the NHMA Leadership Fellows policy team project due in March. The Research Training Program plan also consists of compiling processes developed through the proposal discussion and writing efforts of the Project Director and Organizational Development Consultant throughout the project period.

**b. Objective 2b: to develop a technical assistance plan with the American Academy of Family Physicians to develop the NHHF infrastructure**

Outcomes Assessment

Since the commencement of the Project (October 1<sup>st</sup>, 2004), The Project Director and Organizational Development Consultant convened participated in seven meetings with the leadership of the American Academy of Family Physicians Foundation, the American Academy of Family Physicians, and attended a network meeting of national medical societies and their foundations, to gather information on the operations of foundations and their regulatory environment , receiving nearly 72 hours of technical assistance.

- December 2-3, 2004 NHHF/NHMA Meeting facilitated by Bobbi Abrams, Director of Development, AAFPF
- August 15, 2004 NHHF Meeting, NYC facilitated by Sandy Panther
- April 15, 2004 Joint NHMA/NHHF Board Meetings facilitated by Sandy Panther
- April 13, 2004 AAFP Membership Structure Meeting in Kansas City chaired by Colleen Lawler, Director, Division of Membership, AAFP
- February 26, 2004 Meeting in Washington DC with Sandy Panther, Executive Vice President AAFPF, and Lori Foley Director of Corporate Relations, AAFPF
- February 9-11, 2004, Medical Society Fundraising Network of medical associations and foundations, facilitated by Sandy Panther

- o 12/15/03 Meeting in Kansas City MO with Sandy Panther

Earlier in 2003, in anticipation of the need to seek assistance, the Project Director participated in two days of planning (May 15, 2003). This meeting led to the first the drafting of the first technical assistance plan [“Benchmarking the AAFP Structure/Informing the NHHF Development Process”], and the identification of a compendium of policy and procedures, and regulatory documents essential to the development of the NHHF regulatory environment and organizational structure. This report summarized served as the initial framework for ongoing technical assistance from the AAFP Foundation and a checklist for the Board of Directors of the NHHF Board of Directors. This report as well, as earlier reports prepared in 2003, will serve as the base for evaluating the future technical assistance needs and revisions to the plan.

#### Policies provided by the Foundation to NHHF

1. Department of Health and Human Services Office of the Inspector General OIG Compliance Program Guidelines for Pharmaceutical Manufacturers
2. Proprietary Practices—Policies and Positions Related to Proprietary Practices [addressing industry/physician relations, direct-to-consumer advertising, The FDA “Guidance on Industry-Supported Scientific and Educational Activities, the AMA Council on Ethical and Judicial Affairs “Gift to Physicians from Industry”, and the Accreditation Council for Continuing Medical Education (ACCME) “Guidelines for Commercial Support of Continuing Medical Education.”
3. The American Medical Association E-8.061 Gifts to Physicians from Industry
4. AAFP Foundation Code of Ethical Principles and Standards of Professional Practice
5. AAFP Guidelines for Corporate Membership
6. Advance Medical Technology Association (AdvaMed) Code of Ethics on Interactions with Health Medical Technology Association
7. PhRMA Code on Interactions with Healthcare Professionals
8. Policy on Cultivating and Soliciting Planned Gifts and Sharing of Planned Gift Revenue
9. Major and Deferred Gift Acceptance Policy
10. Investment Policy
11. Conflict of Interest and Disclosure Statement (AAFPF Trustee)
12. Position Description AAFP Trustee
13. Invoices
14. Letter of Agreement to Support AAFP programs
15. Letter of Agreement regarding the terms, conditions, and purposes for contributed funds and in-kind support from a commercial source for CME activities
16. AAFP Foundation Explanation of Corporate Member Benefits
17. AAFP Foundation Program of Work
18. Resident Repayment Program
19. Student Research Externships
20. Joint AAFP/F-AAFP Grants Award Program

21. Research Stimulation Grants
22. Health Education Program
23. Park-Davis Teacher Development Awards
24. Nutrition Team Spokesperson Program
25. Thomas L. Stern, MD, Lectureship
26. International Initiatives to acquire medical and pharmaceutical supplies to needy areas of the world
27. Archives for Family Practice

**c. Objective 2c : to develop the NHHF MIS System Plan**

Outcomes Assessment:

The Project Director reported in the previous progress report that the NHHF Board of Directors was weighing two options for the development of the Foundation's MIS system—leasing MIS time from NYU or sharing the new NHMA IMAP community server with the Foundation. At the time of this writing, the Foundation faces significant financial constraints, and has decided to accept the offer of its parent organization, the National Hispanic Medical Association, to share the new NHMA MIS system with the National Hispanic Health Foundation. In addition, the successful conclusion of an affiliation with the New York University Wagner Graduate School of Public Service includes access to NYU resources, including use of the NYU management information systems for email and intranet of the university. In fact, the affiliation will allow the NHHF professional staff to be appointed to faculty status and the non-professional staff to be appointed to NYU staff with the benefits – library services and research reference services.

**d. Objective 2d: to develop the Hispanic Health Services Research Training Program Implementation Plan**

Activities in the Reporting Period

The first draft “NHHF Research Training Program Draft Plan (March 2004)” was included in the appendices section of the 4/30/04 progress report. However, the absence of funding for advancing the development of the research training program itself has slowed down the planning process in the interim, with efforts focused on remedying this situation for the remainder of 2004 and 2005. The Organizational Development Consultant met with faculty from the Wagner School's Center for Public Health and Health Research in 2004 to discuss the initial staff and resource needs of different types of research projects. The Project Director plans to request future funding to complete the outcomes related to this objective.

**e. Objective 2e: to develop the Hispanic Leadership Training Program at the NHMA Annual Conference each year**

### Outcomes Assessment

The objective was met and addressed in the 04/31/04 progress report. NHMA plans to continue Leadership Training at the Annual Conference in March 2005 with the Hispanic Health Professional Leadership Network.

- f. Objective 2f: to develop and maintain a database of speakers including federal, state, and local policy makers, private sector leaders, national organization directors, Hispanic physician leaders and other potential collaborators**

Outcomes Assessment:

The objective was met and will be provided to the participants of the March meeting.

### **C. Program Plan**

1. **Identify staff & consultants:** Elena Rios, MD, Project Director, Vicente Samaniego, Program Officer, Alexandra Jimenez, Administrative Assistant, Emilio Morante, Consultant developing the NHHF Infrastructure, Membership project planning and meeting with the AAFP Consultant, Mike Weaver, MIS Consultant, Paula Woods, Senior Accountant, Keith Caleb, Accountant Assistant.

2. **Describe how participants were identified and selected. Number of Hispanic targets.** Participants in the project were identified from the leadership and closest networks to the development of the NHMA organization. See above for numbers.

3. **Process used to interact with the target population**

The NHMA staff used phone, email and phone calls to interact with the network and the NHMA website, newsletter sent by email and mail bimonthly. At the end of the project period, the planned Email List Serve system was finally implemented.

4. **Training for outreach targeting Spanish speaking residents** – none. The Research Training was only a planning activity for the infrastructure of the NHMA Foundation.

5. **Describe teaching and educational materials used to implement the project** –

Educational materials included information about cultural competence and delivery medical care to Hispanic patients at conferences, recommendations from Hispanic health meetings coordinated during the project period, advocacy information about disparities in health legislation that occurred during the project period. Other educational material used to implement the project included the information from the American Academy of Family Practice Executive Vice President to teach the Boards of Directors of NHMA and NHHF on how to strategically develop the future infrastructure of both.

## **6. Identify any modifications made to the planned activities**

The major modification to the planned activity is the lesser degree of infrastructure planning for the National Hispanic Health Foundation that limited the Research training from being developed or implemented. The activity remained as planning and meeting with other key consultants to discuss the strategic planning at the Board of Directors level to garner support for the planning to develop national research institute with key partners in California, Texas and New York. Indeed, unplanned, the NHMA President did receive the written support from the Dean of the UCLA School of Public Health and the San Antonio based Director of Redes en Accion as well as finalized the Affiliation Agreement during this project period with the Dean of the Robert F. Wagner Graduate School of Public Service, New York University to place the NHMA Foundation at the school. This was the most important modification that allowed the Research and Think tank to become a reality, although, in the future.

## **7. Describe problems in the development of each activity and lessons learned.**

A major lesson learned included the limitation of an overambitious list of objectives without clear understanding of how other associations have developed based on their experience. We realized, from our meetings with other association staff and extensive research about an objective, that the development was more complex than the preliminary steps that we had in our plans.

The research was extraordinary and the major lesson learned with this project is the importance of benchmarking and having realistic goals and objectives.

Another major lesson learned was that there was greater enthusiasm and interest in activities in this project because they were unique. The timing was critical for the development of information sharing about Hispanic health for this project. In the U.S., there had not been any known plans for an Internet portal or a national network of Hispanic health professionals. This project allowed NHMA to develop list serves and the beginning of communication of a national network that had never communicated before. These activities will only strengthen the ability for NHMA to continue to provide leadership for OMH and the Federal government in the future.

## **D. Evaluation**

The project was evaluated by both process and outcome evaluation.

### **Process Evaluation**

Process evaluation was done through weekly meetings among staff at the NHMA office and with consultants, where key issues were discussed and planning was adjusted.

Checklists were developed and followed (quarterly and for each core component). Quarterly progress meetings were held to assess progress in communications, meetings, deliverables for each component and a report to the Project Director. This report was the final in addition to the 2 progress reports submitted to the Office of Minority Health as requested at the end of April and the end of August, 2004.

### **Outcome Evaluation**

The outcome was assessed as specified in the methodology section and by questionnaires to assess the following:

#### **NHMA Executive Office Capacity Development**

NHMA assessed implementation of the policies and procedures for the Executive Office by performance evaluation of the staff.

**Outcome:** The policies and procedures for the Executive Office were developed through this project. The policies include the following topics:

- Schedule of Meetings for President
- Travel and logistics review with Administrative Assistant
- Correspondence procedures
- Filing procedures – Committee Files, Nomination Files, Partner Files, Media Files
- Media and interviews and background work
- Preparation for Speeches
- Nominations process for physicians
- Speakers Bureau process
- Membership process
- Grants Management Meetings with Program
- Accounting Meetings with Accountant and CPA
- Staff Meetings

NHMA assessed efficacy of Executive Office capacity development and the level of satisfaction of the staff and the Board and Advisory Committee with the service provided by the Executive Office staff.

**Outcome:** Survey by phone to Board, Advisory Committee done and feedback reflected satisfaction with increased communications. Limitation remains the workload as reflected and the need to have an Executive Director and Executive Assistant full-time in the Executive Office.

NHMA documented level of involvement of Board and Advisory Committee members in meetings and conference calls and in written input to documents developed and website information submitted.

**Outcome:** The List Serve system, that was not functional until December, was not able to be used for evaluation. NHMA has the potential now to grow communications tremendously with the List Serves set up in the MIS system to the Board and Advisory Committee members.

### **Media**

See text for the number of media accomplishments.

There has been increased growth in numbers of interviews requested to NHMA.

Major papers requesting interviews –relationships being built  
AMA News, Florida Miami Herald, NY Medical Herald

**Outcome:** Minutes were used to document all Board meetings and Advisory committee conf calls. Policy Committee provided written input to policy statements issued by Executive Office for 3 major policy papers developed over the project period –Medicare Bill, Coalition Access section, NHLA Report.

### **Membership Unit Development**

NHMA will assess implementation of the membership protocols by tracking the activities (by date) and the meetings with the membership coordinator by collection of minutes for the year.

**Outcome:** The following activities occurred during the year of this project:

- President met with membership consultant monthly to assess progress and to review all correspondence related to membership – note that more responses and requests for membership occurred this year with the targeted and continuous attention to membership. Protocols set up with Accounting office –
- Protocol: Online Info, Check + Form – goes to Accounting; then list info goes to Jeanne; she processes membership (sends Welcome Letter, certificate) and develop membership database and sends database back to office (note need to review the 2 different databases we have ---Jeanne has larger database with fields representing interests for participation; Office now must get completed database to add into List Serve (started in October)
- Membership Letter, Renewal Letter, Reminder Letter written and distributed twice
- Membership Letter sent with Conference mailing (30,000)
- Membership Letter in Conference Program
- Membership Letter in Scholarship Dinner Program
- Renewal notice via email and Letter sent to all 2003 members, 2004 members

- Notice sent via Email to all NHMA Board, Advisory Committee Members who had not paid dues in 2004 to join in 2005.

NHMA will assess the efficacy of membership development by tracking the number of new members in the year.

**Outcome:** Give the number and comment that the trend shows a minimal growth in membership from previous year. We need to increase visibility of NHMA in localities across the country. We need to enforce that all Advisory members become members. NHMA intends to hold focus groups of Hispanic medical societies, residents, medical students to plan the next phase of membership.

NHMA assessed level of satisfaction of the members by calling some of them.

**Outcome:** members on list serve at end of project should increase satisfaction.

NHMA will document level of involvement of staff and consultants in the process of membership development, mailings, database development.

**Outcome:** Staff and consultants spent a month in developing a Membership Office procedures and membership services for the NHMA Website as well as a proposal for the future.

A full-time membership staff (at least 2 persons) needed to increase the membership and tracking needed for a more viable membership that supports the core central office activities and that becomes engaged in more NHMA national activities.

### **State and Local Hispanic Medical Societies**

NHMA will assess implementation of the communication with the Hispanic medical societies by questionnaire. NHMA will assess level of satisfaction of the Presidents of the local Hispanic medical societies for the growth of partnership activities.

**Outcome:**

NHMA will document level of involvement of members of the societies attending the NHMA conference, submitting information for the website

NHMA President has had discussions with each President, including face to face meetings after the conference with the President of San Antonio Hispanic Society in DC, Past President of SWAHOP in El Paso in October 15<sup>th</sup>, President of MAPA in San Antonio in April, President of CALMA at their Board Meeting in July New Mexico over the phone.

**Outcome:**

Texas Meeting – summit planned

MAPA

Hispanic Society

El Paso group

New Mexico group

CALMA

New York

Planning for the bringing together of the group in 2005 at the conference to discuss a survey requesting their input for priority actions from NHMA and with each other and to discuss formalization of affiliate status.

Summary bullet points from meetings;

Charlie Corral – NHMA should have presence at local society annual meeting to increase visibility of NHMA activity and to ask for membership

Mexican American Physician Association, San Antonio – interest in Leadership recruitment for NHMA program

San Antonio Hispanic Medical Society – interest in formal affiliation agreement

New Mexico Hispanic Medical Association – needs help with staff resource development

California – concerned at not duplicating efforts with funders; help with conference – get out the word, speakers

Reception in Los Angeles, September 1 –

Congresswoman Solis, Robert K. Ross, MD, CEO, California Endowment, Larry Lucas, Vice President of the Pharmaceutical Research Manufacturers Association

PhRMA, Mario Molina, MD, CEO of Molina Health Care, Inc.

100 participants

**Information Dissemination – Leadership Network**

NHMA will assess implementation of the communication with the national Hispanic health professions groups.

**Outcome:**

Congressional Hispanic Caucus brought them together in DC – September

Hilda requested a group come together - Rios reminded her that we did through this project.

NHMA will assess level of satisfaction of the participants in the network by questionnaire at the conference. NHMA will document level of involvement of the members of the groups.

**Outcome:**

List serve development and announcements – protocols were developed to share information on a weekly basis from Washington, DC office. However, the group has been encouraged to share information as often as needed but encouraged to focus on information for the development of the network leadership.

The NHMA List serve system was designed to track announcements put on the system and to be able to identify who was the messenger. At the end of a year, in time for the report to the group at its next meeting at the NHMA Annual Conference in March 2005, there will be a report of the information shared and the activities of the network.

**NHMA Website** as a major source of Hispanic Health information in English and Spanish

NHMA will assess implementation of the website.

**Outcome:**

Advisory Committee discussed website. Very satisfied except for the suggestion to develop linkages for more Hispanic sites with patient education material in Spanish. Project Director has requested this from the MIS consultant. Website designed with RESOURCES Section to accommodate links to other websites, until we have the staff to develop our own resources, collection, development of materials. We have trained staff and purchased the software (Acrobat) to develop PDF materials.

**NHMA MIS System** and training program for the NHMA office staff

NHMA will assess implementation of the MIS system in the office by interviewing staff (Office Manager to track issues and work with vendor).

**Outcome:**

NHMA program officer to track hits on website and requests and types of information – this needs to be done with training from MIS consultant.

However, we did use the MIS system to track Registration for the Annual Conference and the Registration for the Office on Women's Health successfully.

**NHMA Speaker's Bureau** that integrates a larger number of members amongst the NHMA Leadership

NHMA will assess implementation of the speaker's bureau by documenting and monitoring summary reports of speaker's speeches and interviews

**Outcome:**

Executive Assistant has been instrumental in working with staff to compile the list of media trained NHMA members from previous media projects. We have assembled a list of 50 doctors who have been confirmed for their interest in a speakers bureau.

NHMA will assess level of satisfaction of the physicians who participate as speakers for NHMA by questionnaire.

### **Leadership Development Program**

The following are the outcomes for the NHMA Leadership Development Program:

The first Leadership program was held at the eighth annual conference, March 2004. See attachment for the list of participants. The agenda included developing priorities for shared activities to start the network supporting the leadership development of the participating organizations.

The group decided that the 2 priorities for the year were: 1. to develop a network of key members to promote in leadership positions; and 2. to develop a resource list of items from each organization that could be shared in a website –NHMA website and in the future, the NHMA portal.

In addition, a luncheon was held with the group and Dr. Cristina Beato for leadership development. There was no other agenda item and evaluation was by oral feedback. The group did overwhelmingly approve of the continued development and activities together.

NHMA will develop a Leadership Program Resource Book focused on the U.S. Department of Health and Human Services

Done – provided to each participant.

### **NHHF Implementation Plan and Organizational Development**

NHHF Board of Directors will assess clarity of the implementation plan and the recommendations for organizational development.

### **NHHF Research Training Program Implementation Plan**

NHHF Board of Directors will assess the clarity of the implementation plan and the recommendations from strategic planning in a Board Meeting.

#### **Outcome:**

PD to report to NHHF Board of Directors for review of these 2 infrastructure plans on April 1, 2005.

## **E. Results and Outcomes**

### **Overall Project Level Evaluation Outcomes**

The following overall project outcomes were accomplished:

- Develop new curriculum model for health professionals to advance their ability to become better prepared leaders for the future U.S. health system.
- Develop new partnerships for NHMA for information dissemination.
- Develop the National Hispanic Health Foundation Implementation Plan.
- Develop the NHHF Research Training Program Implementation Plan.
- Increase the visibility of NHMA with other health care professionals and policy makers.

### **Extent of long-term impact on health issues affecting the Hispanic community**

The development of the organization and its capacity will definitely impact the future of Hispanic community health policy development. Indeed, the NHMA can serve as a catalyst to develop health policy reforms as it is positioned in the national arena, increases its network and is accepted for its leadership ability.

The NHMA President and Organizational Development Consultant discussed the importance of future strategic planning to continue this activity. We have secured the promise of support for a request for a second congressional earmark from Congresswoman Hilda Solis in March 2005. We have secured the partnership for the NHHF with NYU and the partnership with the UCLA School of Public Health to develop the Research Training. We have secured the support of the NHMA Board of Directors to seek new partnerships to develop a new Hispanic portal in order to develop the ability to disseminate information on Hispanic health care in English and Spanish.

### **The future major activities as a result of this project:**

NHMA Office Development ---Executive Director, increase Executive Assistant time  
Membership Office Development  
Board of Director Governance and Strategic planning  
New Advisory Committee and Strategic planning  
Portal Project  
NYU Development of Partnership  
NHHF Office Development  
NHHF Research Training Program Development  
Strategic Partnership ---Changing our World endowment development  
Hispanic Medical Societies  
Hispanic Health Professional Leadership development

## **F. Dissemination and Utilization of Results**

NHMA will continue the dissemination activities developed through this project primarily through the website and portal that will continue to be forums for information exchange to improve the health of Hispanics and the underserved.

In addition, the development of a National Hispanic Health Professional Leadership Network and the NHMA Speakers Bureau are examples of unique activities in the nation that will continue the utilization of shared information developed through the website and portal.

Another major accomplishment of this project was the planning for policies based on the awareness of the regulatory environment for the National Hispanic Health Foundation. This knowledge will continue to enable the Board of Directors and management to continue giving guidance to the development of the infrastructure.

During this project, NHMA recognized the growing demand for technical assistance, health care information and the development of research in the area of Hispanic health. This project allowed us to begin to respond to a variety of demands from private sector, government and academia. As a result of these project activities, NHMA developed the plans for research to be housed at the National Hispanic Health Foundation. The NHMF Board of Directors and management will continue to develop Hispanic health research training and research for the nation.

## **G. Products**

- Information Dissemination
  - Book on the History of NHMA
  - List of outreach activities, including Media Articles in electronic and print media, results of speakers bureau, focus group recommendations for outreach through Hispanic organizations and key contacts to public
  - List of Hispanic Medical Societies in U.S.
  - Directory of Key Hispanic Leader Contacts (NHMA LIST)
  - Website Links to Hispanic Health Information – in English and Spanish (PENDING)
- Training
  - Curriculum of Leadership Training for Health Professionals (design based on Fellowship 2004 notes ---see Dr. Boufford lectures, Dr. Rios lectures and HHS, Hispanic health lecture of the 2004 NHMA Leadership Fellowship Program in New York Institute)
  - Directory of Participants for Leadership Training
  - Research Training Program Implementation Plan for the National Hispanic Health Foundation

## **Appendices**

1. MS Project Checklist for the NHMA Information Dissemination & Research Training
2. NHMA Assessment of 2004 Media Coverage
3. First Draft Chapter List for History of NHMA Book
4. National Hispanic Health Professional Leadership Network List
5. NHHF Infrastructure Implementation Plan [Draft Organizational Development Plan for the National Hispanic Health Foundation]
6. NHHF Research Training Program Draft Plan December 2004