

### GLOBAL VIRTUAL DAY

December 3, 2015 is designated as *International Day of Persons with Disabilities*. A 24-hour virtual day of allied health and rehabilitation will be hosted on that date by the International Chief Health Professions Officers (ICHPO) Group, an international network of government advisors with responsibility for allied health and health care scientists.

The event will consist of a combination of live presentations, pre-recorded sessions, blogs, expert opinion, and discussion involving a wide range of health professionals working in academia, policy development, and service delivery from all over the globe. More information about this initiative can be accessed at

<http://www.un.org/disabilities/default.asp?id=111>.

Expressions of interest can be registered at <https://knowledge-gateway.org/rehabilitation/>.

Outcomes from this endeavour will be disseminated through the Global Community of Practice for Rehabilitation (GCoPR) to promote further comment and input, followed by a two-week discussion period in January 2016, which will focus on the most popular topics.

### 2015 ASAHP ANNUAL CONFERENCE

ASAHP's Annual Conference, "*Innovations and Entrepreneurship in Health Care Education and Practice*" comes at a particularly important time when both the Obama Administration and Congress are examining the future of higher education in a post-Affordable Care Act world. The need for a highly skilled allied health workforce has accelerated quickly as an aging baby boomer generation seeks vitally needed health care along with millions of newly insured Americans.

The conference will examine the future of higher education with a focus on using creative approaches in health care to ensure a well-educated and trained allied health workforce that can meet the demands of the 21<sup>st</sup> century world. Registration and related kinds of information can be accessed at

<http://www.asahp.org/>.

### INSTITUTIONAL PROFILE SURVEY

The data collection period for ASAHP's 2015 iteration of the *Institutional Profile Survey* opened on September 8. The deadline for submitting data is **November 30**. Deans and Directors, especially those individuals whose schools or colleges have joined ASAHP in the last 12 months, are encouraged to make every effort to have their institutions included in this important study.

Over the past few decades, administrators at member institutions consistently have cited the high value of this undertaking by the Association. The more institutions that furnish data, the richer the findings will be that result from the survey. Each year, the salary data component that is generated proves to be of immense value. There were 89 participants last year and a major objective this year is to surpass that amount.

The 2015 study is administered by staff at Creighton University. Technical assistance regarding how to interpret survey questions and enter data can be obtained by contacting Associate Dean **Brenda Coppard** at [bcoppard@creighton.edu](mailto:bcoppard@creighton.edu).

Each school has an ID Code, which can be furnished by contacting **Jacoby Lawrence** of the ASAHP staff at [jacoby@asahp.org](mailto:jacoby@asahp.org).

### ALLIED HEALTH PROFESSIONS WEEK

*Allied Health Professions Week* in 2015 will be celebrated on **November 1-7** to honor educators and providers in the allied health professions. A wide variety of activities may be undertaken that week on campuses at ASAHP member institutions to highlight the allied health professions and achievements undertaken at each school. Examples of these activities were listed in the ASAHP UPDATE on August 31, 2015.

Members are requested to inform ASAHP staff about events that occur during *Allied Health Week*. This information and any photos will appear in upcoming issues of the newsletter TRENDS.

## TEACHABLE MOMENTS

During an address to Congress by Pope Francis last week, he focused on contemporary issues that have an overall bearing on the loneliness of the soul and the human heart in conflict with itself. He took this speaking opportunity to cite the accomplishments of four Americans whose life work enhanced the cause of personal liberty. One of them was Thomas Merton.

In *Conjectures of a Guilty Bystander*, Merton wrote, “one morning before Prime, in the early morning sky, three antiquated monoplanes flew over the monastery with much noise, followed by a great heron.” This occurrence triggers a thought that although technology has since transformed primitive flying machines into supersonic aircraft and rockets that soar far into outer space, the simple image of a graceful bird aloft still has the capacity to arrest the mind and enrich the spirit.

Health care in recent decades also has undergone monumental transformations. A contemporary element is that in large, health care centers where patients with complex medical problems are treated, the role of health professionals working as effective members of a team has become critical, a role that has implications beyond the laying of hands.

Diagnostic procedures may create situations when patients have to sit for hours over the course of a testing period. On such occasions, they may focus keenly on their health while experiencing a need to know more about their condition. In effect, they become ideal candidates for teachable moments, but unfortunately, many sit around waiting unattended.

Allied health professionals can play a useful role in this regard. Such occasions are ripe for discussions pertaining to health promotion and disease prevention topics, such as diet, exercise, abuse of harmful substances, and symptom recognition. These educational and preventive interactions will not occur, however, unless health providers come to see them as integral to their own professional role identity and as a necessary part of their jobs.

In order to obtain fruitful outcomes that benefit patients, health practitioners must possess both the knowledge and the degree of comfort required to interact with patients in this fashion. Viewed from this perspective, it is apparent that health professions schools have a key role to play in producing graduates who have both a strong inclination and the intellectual tools needed to make essential contributions in the area of patient education.

## CDC TASK FORCE INVITATION

The Centers for Disease Control and Prevention (CDC) within the Department of Health and Human Services (HHS) invites nominations of individuals qualified to serve as members of the Community Preventive Services Task Force (CPSTF). The purpose of this entity is to identify population health interventions that are scientifically proven to save lives, increase lifespans, and improve quality of life. The CPSTF produces recommendations (and identifies evidence gaps) to help inform the decision making of federal, state, and local health departments; other government agencies; communities; healthcare providers and organizations; employers; schools; and research organizations. Nominations must be received by **November 9, 2015**.

Additional information can be accessed at <https://www.federalregister.gov/articles/2015/09/25/2015-24470/request-for-nominations-of-candidates-to-serve-as-members-of-the-community-preventive-services-task#h-4>.

## IMPROVING HEALTH CARE DIAGNOSES

Following three years of postponements, the newest version of the International Classification of Diseases (ICD-10) will be implemented on October 1, 2015. Approximately 70,000 diagnostic codes for physicians and 72,000 codes for hospitals will be used by private and governmental insurers to judge whether health care services are necessary and the extent to which they should be reimbursed.

In a related vein, last week the National Academy of Medicine released a report, *Improving Diagnosis in Health Care*. It exposes a critical type of error in health care—diagnostic error—which garners relatively little attention because data are sparse, few reliable measures exist, and often errors are identified only in retrospect.

The health care system itself is partly to blame. The complexity of health and disease combined with the increasing complexity of health care demand collaboration and teamwork among and between health professionals. Since health care professional education and training do not take into account advances in the learning sciences fully, the report emphasizes training in clinical reasoning, teamwork, and communication. Several recommendations also are made to improve the utility of health information technology. The report can be accessed at <http://iom.nationalacademies.org/>.