

TRENDS

Association of
Schools of
Allied Health
Professions

HIGHLIGHTS

JUNE 2004

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VANGUARD OF
ALLIED HEALTH EDUCATION

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ALLIED HEALTH WORKFORCE LEGISLATION INTRODUCED IN U.S. SENATE

S. 2419, the *Allied Health Reinvestment Act*, was introduced in the U.S. Senate on June 2 by Maria Cantwell (D-WA), Jeff Bingaman (D-NM), and Joseph Lieberman (D-CT). The bill consists of the following major components:

Section 799C1-2	Public Service Announcements
Section 799C-3	Recruitment Grant Program
Section 799C-4	Grants for Health Career Academies
Section 799C-5	Education, Practice, and Retention Grants
Section 799C-6	Developing Models and Best Practices
Section 799C-7	Faculty Loan Program
Section 799C-8	Scholarship Program
Section 799C-9	Grants for Clinical Education, Residencies, Internships
Section 799C11-12	Training for Diversity

Certain provisions are aimed at meeting the needs of underserved areas by providing scholarships to students in exchange for their serving in those locales. The faculty loan program is designed to enable faculty to obtain higher degrees. As much as \$30,000 per recipient would be offered per year with the opportunity to have as much as 85 percent of the loan forgiven, depending upon the number of years each person agrees to serve in full-time employment.

The section dealing with health career academies is aimed at creating programs that form education pipelines to facilitate the entry of students of secondary educational institutions, especially underrepresented racial and ethnic minorities, into careers in the allied health professions.

Section 799C-11 would enable the Bureau of Health Professions to develop a system for collecting and analyzing allied health workforce data to determine educational pipeline and practitioner shortages and project future needs for such a workforce.

PRESIDENTS' MESSAGE

By David D. Gale, ASAHP President



The Association's website was greatly enhanced recently by the addition of a feature that will enable ASAHP members and any other parties with an interest in allied health public policy to contact elected officials in Washington, DC via the Internet. Sample text messages have been included that make it possible to send an e-mail communication to a member of Congress in less than five minutes time. Simply inserting one's own zip code is sufficient to trigger a series of easy steps that culminate in the message being sent. A follow-up telephone call to a legislative aide on that official's staff a few days later may be enough to trigger co-sponsorship of allied health legislation.

If you have been reading this newsletter, you are aware that bills have been introduced in both the U.S. House of Representatives and the Senate that are designed to address allied health workforce problems. Depending on the profession involved, there may be a pipeline shortage in the form of declining student applications and enrollment or a current, insufficient supply of practitioners. Clinical laboratory science provides an example of deficits in both these categories.

The numbers that have been assigned to the allied health bills tell a significant story all by themselves. For example, H.R. 4016 was introduced in the House on March 23, 2004. As of June 22, another 634 bills had been introduced. S. 2491 was introduced on June 2. Three weeks later, 69 more bills had been introduced. So far, these 7,210 pieces of legislation have resulted in the enactment of a total of 237 laws.

A tremendous amount of effort went into preparing S. 2491 and H.R. 4016. An ASAHP-led coalition of 34 different organizations, including the American Hospital Association, was formed. Reaching agreement on something as basic as what to call the legislation required an enormous amount of discussion and persuasion. Not every profession represented in the coalition is enamored with the term allied health, but it proved to be the best one among the alternatives considered. Deciding on the scope of the bill was another challenge that had to be surmounted. The Senate bill is more comprehensive, a fact that reflects more closely what that body is likely to approve compared to what might pass in the House.

The next major step in this overall endeavor is to add to the number of co-sponsors of each bill. The only way for that to occur is for Members of Congress to hear from their constituents. ASAHP held its Spring Meetings in 2003 and 2004 for that purpose so attendees could visit offices on Capitol Hill. Coalition partners such as the American Association for Respiratory Care also have sent delegations of their members to these same offices.

Apart from face-to-face meetings, e-mail messages and telephone calls represent the next line of influence. Thus, I encourage all who visit our website to take advantage of the capability to send a message to their respective elected officials in both chambers. Another useful feature on the site is the ability to insert as many as six e-mail addresses in the form of "Tell A Friend." If each person who contacts the Hill is successful in convincing a half-dozen other individuals to do likewise, then political influence is magnified accordingly. Deans and directors at member institutions are in a good position to encourage faculty to take advantage of this valuable tool for seeking co-sponsors. Faculty, in turn, can do likewise with students. The site also is structured in a way that allows voter registration. The rest is up to all of us. If we really care about obtaining more federal support for allied health, then the time to take action is now.



ALLIED HEALTH LEGISLATION UPDATE

The June 8 issue of the *Congressional Record* contains remarks by Senator Maria Cantwell (D-WA) about the Association of School of Allied Health Professions (ASAHP) and the rationale it developed for the Allied Health Reinvestment Act. The *Record* is published daily when Congress is in session and the document serves as a mechanism for disseminating the result of proceedings and the content of debates.

The information about ASAHP appears on pages S6625-S6626 and may be obtained by referring to the Association's home page on the World Wide Web at www.asahp.org. Apart from the publicity and exposure generated by the appearance of this item in the *Congressional Record*, two other noteworthy developments occurred during the early part of June.

The previous page of this newsletter in the article by ASAHP President **David D. Gale** describes the first achievement, which entails the newfound capability of using the Association's website to send messages directly to Congress. A related feature makes it possible to send Op-Ed pieces to media outlets around the United States. Many ASAHP member institutions are located in less populated areas of this country. The chances of an article being published in a newspaper in those regions are much higher than something directed at dailies such as *The Washington Post* and *The New York Times*. The same holds true for local broadcasting stations. These venues provide an excellent opportunity for deans and directors to transmit information to such communication centers about the extent of local allied health workforce problems such as declining enrollment of students or acute practitioner shortages.

The next major development was the addition of the American Hospital Association (AHA) to the ASAHP-led coalition to have an Allied Health Reinvestment Act become law. That organization played a vital role in the enactment of the Nurse Reinvestment Act, P.L. 107-205, which was enacted on August 1, 2002. The AHA became the 34th group to join the coalition.

Already, members belonging to different Associations that are partners in the coalition have gone to Capitol Hill to advocate passage of S. 2491 and H.R. 4016, the allied health legislation that was introduced in each chamber. Those groups include the American Association for Respiratory Care, the American Society of Radiologic Technologists, the Association of Surgical Technologists, and the National Athletic Trainers' Association. The more that elected officials hear from ASAHP members and from these other organizations, the higher the probability that they will co-sponsor the two bills. As the degree co-sponsorship assumes higher proportions, the likelihood of passage becomes all that much greater.

INSTITUTIONAL PROFILE SURVEY

Data collection for the 2004 ASAHP *Institutional Profile Survey* will begin on **September 13** and end on November 5. Deans and directors at member institutions must submit data in order to obtain access to the final report. This year, for the first time, there will be an optional component to the survey that, assuming there are enough participants, will yield a wealth of additional benchmarking data involving scholarship and research.

BOARD ACTIONS

The ASAHP Board of Directors met in Washington, DC on June 23-24, 2004. The following actions were among those taken:

- Approved the Minutes of a conference call on May 26.
- Accepted the Treasurer's Report and approved the budgets for FY 2005 and the 2004 ASAHP Annual Conference in Tampa, FL on October 20-23.
- Approved a motion to not renew a special membership position in the Association of Academic Health Centers. Instead, the possibility of having reciprocal, non-dues paying memberships between ASAHP and that organization will be pursued.
- Approved the contents of an RFP for editor of the Journal of Allied Health for the period beginning July 1, 2005. The RFP will be mailed to member institutions and placed on the ASAHP website.
- Agreed that ASAHP will not take the lead in planning a world congress of allied health in either 2005 or 2006. An effort will be made to explore linking such a meeting with an international public health conference.

ACCREDITATION SUMMIT

ASAHP hosted an Accreditation Summit that was held at the headquarters of the American Speech-Hearing Language Association on June 25. The purpose was to work together to explore ways of increasing the value of accreditation by making it as cost-effective as possible. Attending the meeting were representatives of the following organizations: Accreditation Council for Occupational Therapy Education, Commission on Accreditation in Physical Therapy Education, Commission on Accreditation of Allied Health Education Programs, Council on Accreditation in Audiology and Speech Pathology, Joint Review Committee on Education in Radiologic Technology, and National Accrediting Agency for Clinical Laboratory Sciences.

Christopher E. Bork (Dean of the School of Allied Health at the Medical College of Ohio at Toledo), chairperson of ASAHP's Accreditation Committee, led the discussion that occurred. He was assisted by ASAHP Board Member **Gregory H. Frazer** (Dean, John G. Rangos, Sr. School of Health Sciences at Duquesne University), who made the arrangements for the meeting.

An underlying theme of the gathering was that accreditation should never be viewed as a We-They relationship between accreditors and academic institutions, but a mutually beneficial partnership aimed at enhancing the quality of education. While from the academic side of the equation it is possible to discern a certain amount of redundancy in the activities of regional and specialized accreditors, the fact is that the latter two groups have no control over certain facets of the proceedings. Their actions are dictated by mandates from the U.S. Department of Education.

Processes and outcomes are closely linked. Indeed, the prescriptive aspect of the process is at the heart of the matter. Agreement was reached on the need to enable educators to state what their processes are rather than have accreditors prescribe such processes for them. If outcomes aren't being met, then steps should be taken to adjust the processes to achieve the desired results.

ECONOMIC AND SOCIAL IMPACT OF ALLIED HEALTH INSTITUTIONS

During the ASAHP Board Meeting that was held in Washington, DC on June 23-34, a discussion occurred regarding the role that the Association might play to assist member institutions to produce evidence of the economic and social benefits that they bring to the parent university, the community, and the State by allied health both as an absolute entity and in comparison to other campus units. Initially, an effort will be made to identify what indices should be used to develop a composite picture of such contributions.

As soon as some indicators have been identified, the intention is to issue an RFP to have a White Paper developed that would provide some guidance on what methodology might be used at each institution to gather meaningful data. Another possibility is to examine to what extent the ASAHP *Institutional Profile Survey* could serve as a tool for gathering information of this nature.

As an example of what is achieved in other arenas, Ohio's seven medical schools and 60 affiliated teaching hospitals contributed \$20.7 billion to the state's economy in 2002, according to a new study released by the Ohio Council of Medical Deans. Medical colleges and teaching hospitals had a direct impact on the state's economy of \$9 billion and an indirect impact of \$11.7 billion through job creation, business start-up, investment, and spending. More than 245,000 jobs were directly or indirectly related to the state's academic health centers in 2002. The state's teaching hospitals also provided roughly \$2 billion in uncompensated care through care to the uninsured, forgiveness of bad debt, and Medicare and Medicaid shortfalls.

Another study performed in 14 counties in upstate New York showed the impact that graduates of the State University of New York Upstate Medical University have regarding their achievements at the national level as well the percentage they represent as directors of teaching hospitals in those counties. Clearly, these kinds of information demonstrate the value of health professions schools. The challenge is to be able to develop a means of conveying the achievements of allied health schools more systematically.

DEVELOPMENTS IN CHILD HEALTH

Around the world, polluted air and water and other environment-related hazards kill more than three million children under the age of five every year. To illustrate the impact of the environment on children's health, the World Health Organization (WHO) launched the first-ever *Atlas of Children's Environmental Health and the Environment*, which is on the Web at <http://www.who.int/ceh/publications/en/atlas.pdf>.

Children's Health, The Nation's Wealth is a recent publication of the Institute of Medicine (IOM) that provides a detailed examination of the information about children's health that is needed to help policy makers and program providers at the federal, state, and local levels. This compelling book describes what is known about the health of children and what is needed to expand the knowledge. The book may be accessed on the Web at <http://www.nap.edu/books/0309091187/html/>.

2004 CALENDAR OF EVENTS

SEPTEMBER - NOVEMBER 2004 - **INSTITUTIONAL PROFILE SURVEY** - [HTTP://ASAHP.UAMS.EDU](http://asahp.uams.edu)

SEPTEMBER 14-18, 2004 - **SESSION II LEADERSHIP DEVELOPMENT PROGRAM**

OCTOBER 20-23, 2004-**ASAHP ANNUAL CONFERENCE IN TAMPA, FL**

ASAHP BOARD VISITS HHS EMERGENCY COMMAND CENTER

While the ASAHP Board was in Washington, DC for its meeting, the group visited the Department of Health and Human Services headquarters at the Hubert H. Humphrey Building on June 24 where Secretary Tommy Thompson explained the workings of the Department's new Emergency Command Center. Proudly claiming that there is nothing like it anywhere in the world, including other major federal agencies, he provided concrete examples of the technological capabilities of this unit to detect and respond to any incident that threatens the health of the American people, including weather-related occurrences such as tornadoes and natural disasters such as earthquakes.

Highly trained staff at the center are able to communicate with public health officials around the world on a moments notice as well as with any other key personnel in various federal agencies, depending on the situation.

TEN YEARS AGO THIS MONTH IN TRENDS

The Bureau of Health Professions (BHP) within the Health Resources and Services Administration (HRSA) of the U.S. Public Health Service renamed one of its branch operations the **Allied and Associated Health Branch**.

The Commission on Accreditation of Allied Health Education Programs was incorporated. Five members of ASAHP were appointed as commissioners. **John E. Trufant** (Rush University of Rush-Presbyterian-St. Luke's Medical Center) was elected Treasurer.

FIVE YEARS AGO THIS MONTH IN TRENDS

The importance of allied health funding for the *Section 755 Allied Health Grants Program* under Title VII was shown by listing the number of academic/clinical faculty that participated in workshops and short-term training programs, the percentage of funded programs that entailed developing curricula in geriatrics, and the high percentage of program graduates who went to work in medically underserved or rural areas.

JOURNAL OF ALLIED HEALTH RFP

ASAHP member institutions are eligible to respond to a Request for Proposals for editorial management of the Association's quarterly *Journal of Allied Health*. The contract will be for a three-year period that begins on July 1, 2005. The main functions of the editor will be to: (1) Decide which reviewers should be used to assess a manuscript, (2) Based on the reviews, decide which manuscripts should be accepted without changes, accepted subject to recommended changes being made, or rejected, (3) Decide which manuscripts and in what order they will be published in a given issue, and (4) Make recommendations to the ASAHP Board of Directors at least once each year regarding which persons should serve on the Editorial Board.

RFPs for editorial management have been issued over the years by the Association to determine if there is any interest in having the Journal housed on another campus. The publication has been at Thomas Jefferson University for the past six years, with Associate Dean **Kevin J. Lyons** serving as the Editor.

INVITATION TO ADVERTISE OR SUPPORT A FUNCTION

The deadline for advertising in the *Final Program* for the 2004 ASAHP Annual Conference in Tampa, FL is **September 3**. Spots on the inside/outside covers and the outside back cover will be made available on a first-come, first-serve basis. A second way of advertising is to support a function at the meeting such as a refreshment break or continental breakfast. Additional details may be obtained from the Association's home page on the Web at www.asahp.org.

AVAILABLE RESOURCES

NIDRR Grants

The National Institute on Disability and Rehabilitation Research (NIDRR) under its Rehabilitation Research and Training Centers (RRTC) Program is inviting Applications for New Awards for Fiscal Year (FY) 2004. Academic institutions are eligible to apply. The deadline for the Notice of Intent to Apply is July 9, 2004 and the deadline for Transmittal of Applications is August 3, 2004. Estimated available funding is \$2,100,000 with awards ranging \$675,000-\$700,000. For additional information, go to the World Wide Web at <http://a257.g.akamaitech.net/7/257/2422/06jun20041800/edocket.access.gpo.gov/2004/pdf/04-13239.pdf> .

NIH Launches Expanded Health Information Web Site

The National Institutes of Health (NIH) announced the launch of an expanded health information Web site, which offers links to a wider range of valuable resources, has colorful images to highlight an intriguing range of useful features, and gives readers the chance to test their health knowledge. Favorite health databases, such as Clinical Trials, MEDLINEplus, and PubMed, remain one click away. A new addition, Research In Action, links users to cutting-edge scientific information on topics such as stem cells and genetics and provides readers with an opportunity to meet scientists ranging from high school students to Nobel Laureates. The site may be accessed from the Web at <http://health.nih.gov/>.

AHRQ Makes Access To Hospital Data Easier

The Agency for Healthcare Research and Quality (AHRQ) has redesigned its interactive HCUPnet software tool to make it easier to obtain hospital care trend data for the nation and for individual states. The data represent 90 percent of all hospital stays in the Nation and are drawn from 36 states. HCUPnet's databases include statistics on the conditions for which patients were hospitalized, the diagnostic and surgical procedures they underwent, patient death rates, hospital charges, hospital costs, length of stay, and other aspects of inpatient care. The data are for all patients, regardless of type of insurance or whether they were insured. For example, using HCUPnet to research the impact of the obesity epidemic on hospital care and costs shows that more than 58,000 surgical procedures for obesity were performed in 2001. For more information, go to the Web at www.ahrq.gov/hcupnet/.

Community Colleges Attracted Increased Share Of Undergraduates During The 1990s

The nation's community colleges witnessed tremendous growth in enrollment during the 1990s, outpacing all other major postsecondary institutions, according to a new issue brief released by the Center for Policy Analysis at the American Council on Education (ACE). *Choice of Institution: Changing Student Attendance Patterns in the 1990s* describes where individuals who participated in higher education enrolled and how those patterns changed during the 1990s, using data from the Department of Education's National Center for Education Statistics. The issue brief may be accessed from the Web at http://acenet.edu/resources/HigherEdFacts/issue-briefs/2004student_college_choice.pdf.

Health Care Spending Growth Slows In 2003

Health care spending per privately insured American increased 7.4 percent in 2003, the first major slowdown in spending growth in nearly a decade, according to a study by the Center for Studying Health System Change (HSC), an organization based in Washington, DC. Details of the study may be obtained on the Web at <http://www.hschange.com/CONTENT/679/>.

JEWISH HOSPITAL IS NEWEST INSTITUTIONAL MEMBER



The Association's newest institutional member is the Jewish Hospital College of Nursing and Allied Health. **Michael D. Ward** is Academic Dean of the Allied Health Division. He has a bachelor's degree in radiologic science from St. Louis University, a master's degree in educational administration from the University of Missouri-St. Louis, and a Ph.D. in higher education administration from St. Louis University. A Past President and Chairman of the Board of the American Society of Radiologic Technologists, he currently is on the Board for the Joint Review Committee on Education in Radiologic Technology.

The Jewish Hospital College of Nursing and Allied Health is a component of Washington University in St. Louis and has a close affiliation with the Washington University School of Medicine. The Allied Health Division has the following programs: allied health education, allied health management, clinical laboratory science, cytotechnology, dietetics, raditation therapy, radiography, and respiratory therapy. Depending on the program, they range from associate degree to post-BS certificate to MS degrees.

2004 ANNUAL CONFERENCE HIGHLIGHTS

The Association's 2004 Annual Conference will be held in Tampa, FL on October 20-23. A feature of this year's meeting will be that a portion of the program will be shared with members of the National Network of Health Career Programs in Two-Year Colleges (NN2). The overall theme of both conferences is "*Opportunities for Collaboration: ASAHP-NN2 Articulating the Future.*" Members of the two organizations will engage in several roundtable discussions involving the following: Research and Grant Writing, Transition of Students from Two-Year to Four-Year Institutions, and Clinical Education Issues.

As in previous years, a *Pre-Conference Workshop on Research* will be offered. That activity will be orchestrated by the Association's Research Committee. Once again, an *Oxford Style Debate* will occur. The topic for this year's event is tuition differentials. Another feature is a three-hour dinner cruise on the evening of Thursday, October 21.

The *Mary E. Switzer Lecture* will be presented by **Paul Bach-y-Rita**, Professor at the University of Wisconsin Department of Orthopedics and Rehabilitation Medicine and Biomedical Engineering. He is considered to be one of the most significant and prolific, creative scientists in the 20th century working in the fields of neurorehabilitation and neuroscience.

One of the first projects carried out by this prominent researcher that brought him international attention was his work on "sensory substitution" in which a TV camera secured to a helmet and worn by a blind person provided a set of signals transduced onto a grid of tactile stimulators on the skin of an individual, giving that person information about the surrounding visual world. In addition to his scientific acumen, he is viewed as an exciting and highly stimulating speaker. Professor Bach-y-Rita also is the author of more than 200 scientific publications.

More than 80 abstracts were submitted for this year's conference. They will be apportioned into two kinds of presentations: Concurrent Sessions and a Poster Session. Combined with a reception, the latter mode of delivery of information has proven to be increasingly popular since there is a greater opportunity to interact with the various presenters.