

# TRENDS

Association of  
Schools of  
Allied Health  
Professions

## HIGHLIGHTS

### MAY 2004

President's Message	2
Congressional Update	3
Capitol Hill 2004	4
Prevention Blueprint	4
News From The Colleges	5
2004 Calendar	5
Board Actions	6
Past TRENDS Issues	6
Available Resources	7
CAAHEP Meeting	8



VANGUARD OF  
ALLIED HEALTH EDUCATION

Trends is the official newsletter of the Association of Schools of Allied Health Professions (Suite 500, 1730 M St. NW, Washington, D.C., 20036, 202-293-4848) Trends is published monthly and available as a service to Association members. Annual subscriptions are available to nonmembers for \$55. For more information and/or subscriptions, contact the editor, Thomas W. Elwood, Dr.PH.

## ASAHP RESEARCH INITIATIVE BEGINS TO TAKE SHAPE

ASAHP members and invitees from several professional organizations met in Washington, DC on March 17 to explore the possibility of enhancing allied health research as a means of improving scientific understanding, clinical excellence, and health care in the United States. A more robust science base that leads to accelerated translation into enriched clinical practice has the potential to produce gains in both individual and community health status.

This effort is being coordinated by Association Board Member **Gary S. Neiman**, Dean of the College of Health & Human Services at Ohio University. During the session in March, the group identified several challenges that will serve as a basis for constructive action such as the following:

- Establish and continue a model program at the national level to create scientific pairings between active research mentors and new Ph.D.-level tenure track faculty wishing to add to their research skills and experiences.
- Develop plans to address doctoral personnel shortages where they exist among certain professions.
- Create models for specific skill training for pre- and post-doctoral researchers.
- Produce an overall increase in the number of post-doctoral positions.
- Specify key themes for discipline-specific and interdisciplinary research that are consonant with federal research funding initiatives.
- Identify barriers to forming a strong research culture in many higher education settings and devise ways to overcome such impediments.

Other ASAHP members involved in the project are: Board Member **Randall S. Lambrecht** (University of Wisconsin at Milwaukee), Research Committee Chairperson **Mark S. Sothmann** (Indiana University), **Estela Estapé** (University of Puerto Rico Medical Sciences Campus), **Kevin J. Lyons** (Thomas Jefferson University) and **Richard E. Talbott** (University of South Alabama). Future meetings are in the process of being planned. The endeavor is receiving financial support from the Association.

## PRESIDENTS' MESSAGE

By David D. Gale, ASAHP President



Mention the word accreditation at one of our conferences and the ensuing reactions can range anywhere from eyes beginning to glaze over to elevated levels of blood pressure. Unlike other health professions academic institutions that undergo a single kind of accreditation, our member schools are blessed with multiple forms of accreditation, depending on the disciplines housed on each campus.

Efforts to simplify accreditation and make it less onerous and costly as measured in time, energy, and dollars have not met with total success. The most recent initiative in this regard is about to be launched next month. Spearheaded by ASAHP Board Member **Gregory H. Frazer** (Dean of the John G. Rangos, Sr. School of Health Sciences at Duquesne University), a meeting will be held at the headquarters of the American Speech-Language-Hearing Association in Bethesda, MD. Attendees will include executive directors and chairpersons of specialized accreditors. They represent professions that served as the basis for the Institute of Medicine study that resulted in *Allied Health Services: Avoiding Crises* that was published in 1989.

Recognizing that the topic of accreditation covers a wide gamut of concerns, it is likely that the following issues will be part of the discussion that occurs then: size and breadth of self-study, cost, role of the dean, increasing the amount of dialogue with accreditors, identifying common elements, minimizing variability, site visitor training and quality control, international accreditation, and fostering closer ties among ASAHP and both specialized and regional accreditors.

Our Association's interest in such matters has a rich history. As recently as September 1993, we convened a *Summit on Allied Health Accreditation* that was held in Washington, DC. The agenda was built around defining issues from the perspective of constraints and opportunities, specifying recommendations, and establishing an action agenda. Participants strived mightily to reach agreement on a subsequent course of action, but in the end there was not a majority that would accept a proposal to have "A series of meetings to be convened by ASAHP to respond to higher education regulations, implement Summit recommendations, examine implications of and respond to the paradigm shift in accreditation and health care reform. It would also seek funding and work with and add to the Summit task force to identify content of sessions and groups to attend." Since no other entity could be identified to carry out these roles, the Summit failed to result in breakthroughs considered necessary and desirable.

That event was followed by a meeting in St. Louis on September 12-14, 1995 that was convened by **Frances L. Horvath**, who at the time was Dean of the School of Allied Health Professions at Saint Louis University. The gathering was sponsored by ASAHP's Committee on Accreditation with financial support from the Association's RFP Fund. Twenty-six individuals representing specialized and institutional accrediting agencies, two- and four-year educational institutions, hospital-based programs, and related professional organizations attended. Site-visitor selection, education, and evaluation were chosen as the focus of the conference, with the expectation that the meeting itself represented only the first step in an ongoing project to improve the quality of site-visitor preparation.

Unfortunately, the next step was not taken in the form of a follow-up meeting. Much remains to be done in the area of accreditation and next month's gathering will add one more chapter to a long saga.



## PACE OF INACTION CONTINUES IN WASHINGTON

Some things never seem to change in Washington. One of them is the difficulty each year in having the two Congressional chambers agree on a concurrent budget resolution. Typically, the budget resolution is used to guide the appropriators who have to allocate funds annually year in 13 different categories. With or without an agreement on a budget, spending is another story in itself that will be told in subsequent issues of TRENDS.

Whether or not agreement can be reached following the Memorial Day recess is open to conjecture. Initially, the House and the Senate arrive at their own respective versions of a budget. Differences are settled by a conference committee that consists of members from both sides of the Hill. The final product, known as a conference report, then is voted on by each group of legislators. The report was adopted by the House on a vote of 216-213 on May 19.

As much as Senate majority Leader Bill Frist (R-TN) would like to have a vote called, he faces opposition from GOP colleagues John McCain (AZ), Susan Collins (ME), and Olympia Snowe (ME). Their objection is that budget negotiators weakened Senate pay-as-you-go language that would place obstacles in front of any new tax cuts.

Impasses of this nature have occurred previously. Regardless of the presence of a budget resolution, appropriators will have to begin moving ahead with spending bills. Lacking a budget in place, Republicans will not have points of order available as a means of preventing amendments by Democrats that would exceed limits imposed by a resolution. Appropriations legislation will go forward in earnest, beginning in June.

Overall, there appears to be a sentiment that little of any consequence will occur prior to the November elections. As important as it is to enact appropriations by the start of the new fiscal year on October 1, that deadline has meant little in recent years. Waiting until as late as the following January or February is becoming more commonplace.

Each political party may introduce legislation on a variety of fronts as a tactic for influencing the outcome of the upcoming election. For example, either group might try to have a bill passed that the opposition can be counted on to block. The latter group then will be tarred with the brush of obstructionism in preventing the common good from being achieved. Republicans may be inclined to float legislation aimed at making Democratic candidate John Kerry take a stand. Whether he votes for it, against it, or not at all will serve as a basis for turning the matter into a campaign issue.

### INSTITUTIONAL PROFILE SURVEY UPDATE

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.

## CAPITOL HILL 2004

Dolores G. Clement, Associate Dean  
School of Allied Health Professions  
Virginia Commonwealth University

In addition to our push for the Allied Health Reinvestment Act, we need to continue being heard by Congress for continuation of the federal funding allied health receives. The Health Professions and Nursing Education Coalition (HPNEC) held its annual Leadership Hill Day in Washington, DC on April 28, 2004. I had the pleasure of representing ASAHP at the HPNEC Hill Day for the fourth consecutive year. HPNEC is a coalition of 43 professional and educational societies that have joined together to have more influence on policy than any single organization. All of the organizations that are members of the coalition have similar interests under the federal appropriations for Title VII and VIII Health Professions and Nursing Education Programs.

The morning briefing was held in 325 Russell, one of the Senate Conference rooms. It began with a call to order by David Moore, Associate Vice President of the Association of American Medical Colleges (AAMC). Erica Froyd of AAMC who organizes the coalition hill day oriented participants to the schedule of the day, presented background information including objectives for the health professions that are critical to our lobbying efforts, and went through the schedule of our visits to Capitol Hill.

Bill Olden, the Budget Director for Senator Bill Frist (R-TN), Majority Leader, addressed the participants prior to the individual visits to members. He gave an update of where we are in the budget process. As most of us knew, the President's FY 2005 Budget had "zeroed out" nearly all of Title VII funding – only \$11 million of \$294 million remained). The proposal for Title VIII (nursing) reflected an increase. He noted that emphasis due to the current world situation was on defense for discretionary allocations and that he had to be somewhat circumspect due to the changing nature of the budget process. Because this is an election year, it makes the budget process even more critical as any changes may impact reelection of incumbents. He was pleased that the health professions came together on this issue rather than separately trying to approach members of Congress.

The participants then visited their respective Representative and Senators on Capitol Hill. The thirty-one meetings had been prearranged by participants before coming to Washington and took the remainder of the day.

## PREVENTION: A BLUEPRINT FOR ACTION

During his tenure as DHHS Secretary, Tommy Thompson has met with many individuals and hosted a series of roundtable sessions with business leaders, researchers, providers, insurers and other interested parties to discuss health promotion and disease prevention issues and strategies. He also convened several departmental workgroups on obesity, diabetes, tobacco use, health literacy and health messaging to review current programs and progress.

*A Blueprint for Action* represents the product of these various efforts and outlines simple action steps to guide individuals in their quest for healthier lifestyles. A copy of the Blueprint may be accessed on the World Wide Web at <http://aspe.hhs.gov/health/blueprint/>.

---

## NEWS FROM THE COLLEGES

The School of Health Professions at the University of Missouri-Columbia celebrates its 25th anniversary this year. When established, the action formally grouped five “allied health” programs into one school, an upper division undergraduate unit, administered by the School of Medicine. The University’s decision also created Missouri’s only state-supported school of health professions on an academic health campus, a status that continues today. Since that time, the school has built and maintained a strong reputation for providing quality professional education and outreach services. Moreover, it is ranked as one of the nation’s leaders in health professions research.

Offering the nation’s only master’s degree program in diagnostic medical ultrasound and developing a doctoral program in physical therapy are two examples of the school’s mission to provide advanced educational opportunities that will prepare students and alumni for future developments in health care. The School of Health Professions will honor these achievements during the 25th anniversary celebrations.

In 2000, the school received independent status and changed its name from the School of Health Related Professions to the School of Health Professions. **Richard Oliver** was appointed the school’s first dean. In 2001, the school added the Department of Health Psychology.

Today, when compared to other health-professions schools, the university's School of Health Professions is ranked 15th nationally in National Institutes of Health (NIH) research funding. The school currently has more than 650 undergraduate and graduate students and approximately 6,000 alumni, most of whom have remained in Missouri to work in a health-professions career. Several alumni hold critical positions in educational and health-policy organizations such as the Missouri Coordinating Board for Higher Education, the NIH, and the American Speech-Language-Hearing Association. Eight different professional programs within five departments are offered, including: cardiopulmonary and diagnostic sciences, communication science and disorders, health psychology, occupational therapy, and physical therapy

### 2004 CALENDAR OF EVENTS

May 26, 2004—**ASAHP Board of Directors Conference Call**

June 2004 - **Secretary's Award** winners announced

June 1, 2004 - Deadline for **Outstanding Health Educators Award** applications.

June 17, 2004—**Deadline for Submission of Abstracts for 2004 ASAHP Annual Conference**

June 23-24—**ASAHP Board of Directors Meeting**

June 25, 2004 - **Accreditation Consensus Conference**

September - November 2004 - **Institutional Profile Survey** - <http://asahp.uams.edu>

September 14-18, 2004 - **Session II Leadership Development Program**

October 20-23, 2004-**ASAHP Annual Conference** in Tampa, FL

March 17-19, 2005—**ASAHP Spring Meeting** in Washington, DC

## BOARD ACTIONS

The ASAHP Board of Directors had a conference call on May 26. The following actions were among those taken:

- Approved the Minutes of the Board Meeting on March 15-16..
- Accepted the Treasurer's Report.
- Agreed on the activities that will occur during the 2004 Annual Conference in Tampa, FL and where they will appear on the schedule.
- Received an update on an Accreditation Consensus Conference that ASAHP will host on June 25, 2004 in Bethesda, MD.
- Discussed next steps in conducting a Research Consensus Conference.
- Identified topics for the next Board Meeting.

The Board will meet in Washington, DC on June 23-24. Topics on the agenda will include: the next World Congress on Allied Health; recruitment of new institutional members; developing a response to the National Accrediting Agency for Clinical Laboratory Sciences (NAACLS) on the impact that genomic health care, informatics, and emerging technology will have on the laboratory workforce; and making arrangements for the Deans' Council to meet in Tampa next October during the Annual Conference.

## TEN YEARS AGO THIS MONTH IN TRENDS

Four Association members were named to participate on the 12-member *National Commission on Allied Health*. These individuals are: **Judith T. Barr**, Director of the Master of Health Professions Program at Northeastern University, who is ASAHP's President-Elect; **Leopold G. Selker**, Dean of the College of Associated Health Professions at the University of Illinois at Chicago; **Harry E. Douglas, III**, Dean of the College of Allied Health at the Charles R. Drew University of Medicine and Science; and **Deborah Bailey McFall**, Immediate past President of the American Dental Hygienists' Association.

## FIVE YEARS AGO THIS MONTH IN TRENDS

ASAHP conducted a Government Relations Forum in Washington, DC. The group met with Rep. Henry Bonilla (R-TX), a member of the House Appropriations Subcommittee on Labor, Health & Human Services, Education and Related Agencies. On visits to Congressional offices, Forum participants advocated for increased federal support for allied health and for passage of H.R. 1483, the Medicare Nursing and Paramedical Education Act of 1999, a measure aimed at preventing allied health education programs from losing money each time a beneficiary switches to managed care from traditional Medicare.

---

---

## AVAILABLE RESOURCES

### Care Giving In The U.S.

A study was conducted by the National Alliance for Caregiving and AARP and funded by MetLife Foundation to update and expand knowledge about the activities caregivers say they perform, the perceived impact of caregiving on their daily lives, and the unmet needs of this population. Its findings are based on a national telephone survey of 1,247 caregivers age 18 or older, including approximately 200 African-American, 200 Hispanic, and 200 Asian-American caregivers. The report may be accessed from the World Wide Web at [http://research.aarp.org/il/us\\_caregiving.pdf](http://research.aarp.org/il/us_caregiving.pdf).

### DHHS Creates Task Force To Encourage Medical Technology Innovation

DHHS Secretary Tommy G. Thompson announced that the department is forming an internal task force to weigh new ideas and promote new solutions to encourage innovation in health care and to speed the development of effective new medical technologies such as drug and biological products and medical devices. The task force will involve the directors of the Centers for Disease Control and Prevention (CDC), Centers for Medicare & Medicaid Services (CMS), Food and Drug Administration (FDA) and National Institutes of Health (NIH). Secretary Thompson has charged the task force with issuing a report this year on appropriate steps that can be taken across the department to speed the development and availability of new medical technologies. To assist the task force's efforts, comments are sought from the public on how to stimulate innovation in medical technologies. Comments will be accepted until **August 23**. A notice explaining the comment period and how to file comments will be published in the Federal Register on Monday, May 24. Electronic comments will be accepted on the Web at <http://www.fda.gov/dockets/ecomments>.

### CDC Launches New E-Journal

The Centers for Disease Control and Prevention (CDC) has launched a new peer-reviewed e-journal entitled, *Preventing Chronic Disease: Public Health Research, Practice, and Policy*. The periodical will be published quarterly. To view the first issue, submit a manuscript, or subscribe, go to <http://www.cdc.gov/pcd> on the Web.

### The Burden Of Health Services Regulation

The cost of state and federal health care regulations on "everything from professional liability to drug approvals" outweighs their social benefits, according to preliminary research Duke University economist Christopher Conover presented on May 13 at a Joint Economic Committee hearing. Conover's data show that in 2002, health care regulations produced \$212 billion in social benefits, but cost \$340 billion. Although the data are still being refined, Conover said that "the net burden of health services regulation likely exceeds the annual cost of covering all 44 million uninsured by a considerable margin." Conover's statement and other testimony presented at the hearing can be accessed on the Web at [http://jec.senate.gov/index.cfm?FuseAction=Hearings.Hearing&Hearing\\_ID=78](http://jec.senate.gov/index.cfm?FuseAction=Hearings.Hearing&Hearing_ID=78) .

### Office Of National Health Information Technology

The new position of National Health Information Technology Coordinator was created recently at the Department of Health and Human Services (DHHS). The coordinator's office will provide national leadership to support efforts across government and in the private sector to develop the standards and infrastructure to support more effective use of information technology to promote higher quality care and reduce health care costs. For more information about the Office of National Health Information Technology and its functions, go to <http://www.hhs.gov/news/press/2004pres/20040427a.html> on the Web.

---

## CAAHEP: CELEBRATING ITS 10TH ANNIVERSARY

Submitted by ASAHP Past President John E. Trufant

*CAAHEP 2004: Marking Ten Years of Challenge and Opportunity* was the theme of this year's annual conference of the Commission on Accreditation of Allied Health Education Programs (CAAHEP), held in Albuquerque, New Mexico on April 23 – 24. ASAHP Commissioners at the meeting included **Lindsay Rettie**, who is currently on the CAAHEP Board of Directors and is serving as its Treasurer; **David Gibson**, who also serves on the CAAHEP Board; and **Jack Trufant**, formerly CAAHEP Treasurer and Vice President.

The meeting began with an excellent keynote presentation by **William J. Teutsch**, CEO of the Association of Surgical Technologists, and the first CAAHEP President, who highlighted singular events in the Commission's history and used them as a platform to propose alternative future opportunities for the organization. Concurrent sessions then occurred on the topic of distance learning.

The awards luncheon was hosted by **David Gibson**. The Commission's highest honor, *The CAAHEP Exceptional Service Award*, was fittingly presented to **Bill Teutsch**. **Jack Trufant** then presented awards to other commissioners.

The afternoon session began with a presentation by ASAHP member **Stephen Collier**, whose topic was *Health Professions Education: A Bridge to Quality*. Steve reviewed the work of the Institute of Medicine on quality in health care and the critical role of educational preparation in reducing errors in patient care. **Mark Mattes**, an ASAHP member who is president of the American Health Sciences Consortium was the next presenter. His topic was *Education and Training Trends in Hospitals and Health Systems*.

The afternoon's town hall meeting, orchestrated by CAAHEP President **Sondra Flemming**, also an ASAHP member, was a lively discussion of various topics, including new organizational models for CAAHEP, the disaffection of several allied health professional organizations establishing independent accreditation units, and outcomes-based accreditation standards. The Saturday morning session included reports from Board Officers, including **Lindsay Rettie**. **David Gibson** described the Allied Health Professions Reinvestment Act and its current status.

Because of its importance, **David, Lindsay, and Jack** would like to encourage other ASAHP members who have a high interest and some experience with accreditation to consider representing ASAHP as CAAHEP Commissioners. It is a service role that has highly important implications for the nation's schools and colleges of allied health.

Opinion *post script* by ASAHP's representatives on the Commission: The CAAHEP structural model for accreditation, i.e., an intermediate and independent level of decision-making between the professional organization and the accrediting agency represents, in our judgment, a substantially more objective and fairer approach to programmatic accreditation. The collaboration encouraged among CAAHEP constituents, including professional organizations, committees on accreditation, educational institutions, the public, students and others is a paradigm that should be fostered and rewarded, for it seems *prima facie* that the amalgamation of the best practices of all creates a synergy of excellence in decision-making. We encourage our fellow ASAHP members to support strengthening CAAHEP by encouraging other professions to join and volunteering to assist in its work where possible.