

TRENDS

Association of
Schools of
Allied Health
Professions

ALLIED HEALTH REINVESTMENT ACT

HIGHLIGHTS

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Members of the 1st Session of the 109th Congress have little in the way of achievements to point to thus far this year. A lot of squabbling preceded the development of a budget resolution and arguments over nominations for the federal bench continue to stretch from one year to the next.

Playing fast and loose with language, the term nuclear option was coined to reflect a proposed initiative by Republicans to eliminate filibusters in the process of considering judicial appointees. Eventually a compromise was reached, but it's unrealistic to imagine that a nomination to the Supreme Court will not trigger the same kind of dispute that has characterized some of the nominees for position on lower courts.

Other congressional business also has been delayed by time and energy spent on the nomination of John Bolton to the United Nations, consideration of the ethical behavior of House Majority leader Tom Delay, and the decision to allow Terry Schiavo to die. Compounding the relative inaction in other areas matters is recent House legislation to advance stem cell research.

Into this controversial mix of highly publicized issues, a proposed *Allied Health Reinvestment Act* and related pieces of health professions education legislation have not garnered much attention by legislators. Knowledgeable staff persons on Capitol Hill indicate that work on reauthorization of Title VII of the Public Health Service Act may begin in September. Last January, those same sources suggested that June of this year appeared to be a time when Title VII reauthorization might begin. Currently, Section 755 of that legislation pertains to allied health grants, along with funding mechanisms for clinical psychology, podiatric medicine, and chiropractic.

Can an allied health reinvestment act in the form of H.R. 215 and S. 473 be enacted prior to and apart from Title VII? For that to happen, two essential conditions must be met. The first is that reauthorization of Title VII continues to be placed on hold. The second is that allied health workforce problems become so overwhelming that they begin to attract the mainstream media, and by extension members of the legislature, to the same extent that a nurse reinvestment act did when it was enacted in 2002.

ASAHP members have worked diligently to increase the visibility of allied health workforce problems. Their efforts have been supplemented by the many professional organizations that have sent representatives to Capitol Hill in recent months. Legislator's understanding of the allied health situation has increased, but it has not been accompanied by widespread media coverage.



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.

PRESIDENTS' MESSAGE

By David D. Gale, ASAHP President



A long-standing goal of the Association is to strengthen the research capabilities of some of the faculty members in institutions belonging to ASAHP. The expectation of academic administrators is that allied health faculty should be as successful as their colleagues in other areas of the campus in attracting grant money and publishing in peer reviewed journals. Individuals without a doctorate clearly are at a disadvantage in this realm of competition. Other disadvantaged individuals are faculty whose doctoral preparation may be in education rather than in a health science. Their training does not necessarily enable them to compete successfully in the quest for clinical research funding.

When **David Broski**, President of Bradley University, served as ASAHP President in 1990-1991, he was instrumental in having the Association conduct a conference in Washington, DC in 1991 that enabled participants to learn about the various funding opportunities available from different federal agencies. **Judith Barr**, Director of the National Education and Research Center for Outcomes Assessment in Healthcare located at Northeastern University, served as ASAHP President in 1994-1996. Under her leadership, a two-day outcomes and effectiveness research workshop was held in Towson, MD in 1995. Another workshop focusing on these same aspects of research was held in Washington, DC in 2000 as a result of a contract from the Bureau of Health Professions in the U.S. Public Health Service.

During the upcoming Annual Conference in Houston, the meeting will be preceded by a research workshop. The occasion marks the fourth consecutive year that ASAHP's Research Committee will have sponsored and made arrangements for this kind of offering, which has proved to be of immense value to attendees. **Mark Sothmann**, Dean of the School of Health and Rehabilitation Sciences at Indiana University, has played a key role in presenting these workshops in his capacity as Chairperson of the Research Committee.

The most recent effort to bolster research production is led by ASAHP Board Member **Gary Neiman**, Dean of the College of Health & Human Services at Ohio University. Working with other Association members, he has formed a national coordinating council along with representatives from several professional organizations that aims to: (1) Create an effective community of interest to expand collaboration and interdisciplinary effectiveness, (2) Expand scientific discovery by influencing and enlarging relevant research funding and enhancing the ability of allied health investigators to access such funds, and (3) Improve clinical practice and the health of the public through innovative interdisciplinary clinical outcomes and evidence-based practice research and education, along with collaborative measures to speed the translation of science into stellar clinical practice.

Initially, a key step will be to conduct a series of annual conferences to build community, foster interdisciplinary leadership and scholarship, create a consensus on research enhancement strategies and actions, enhance scientific and teaching skills in the allied health professions, and encourage interdisciplinary work. The Agency for Healthcare Research and Quality (AHRQ) is targeted as a potential source of support for these conferences. A grant proposal is under preparation and will be forwarded to the agency later this year. As the work of the coordinating council progresses, another possibility is that various professional associations may contribute to its support financially. ASAHP already has played a role in this important regard and will continue to do so. Ultimately, it would be a great victory to have a National Allied Health Institute at the NIH, but that is another long-term goal awaiting fulfillment.

HEALTH GROUPS MOBILIZE TO INFLUENCE APPROPRIATIONS



Each year for the past several years, a great many health professions education programs have been in danger of being eliminated. The death watch usually begins with the submission of the Administration's budget proposal at the start of a calendar year. Beginning with the Clinton Administration, the *Section 755 Allied Health Grants Program* and all but two other programs under Title VII of the Public Health Service Act are targeted for not receiving funds in the upcoming fiscal year. Fortunately, Congress rejects this portion of the Administration request and provides funding, albeit with little or no growth from the previous year.

ASAHP is a member of a group known as the Health Professions and Nursing Education Coalition (HPNEC). Each year the coalition devotes energy to the preservation of funding for more than 40 health professions education programs. As an example, ASAHP and other organizations will send a letter to Rep. Ralph Regula, Chairman of the House Appropriations Subcommittee for Labor, Health and Human Services, Education & Related Agencies, urging him and his fellow subcommittee members to restore funding to the Title VII health professions programs to at least the FY 2005 level of \$300 million. As the federal deficit widens each year, it has become increasingly difficult for Congress to make ends meet, especially when many members are inclined to want to see additional tax cuts. The only way to offset a decline in tax revenues is to reduce expenditures. Health programs are at risk for the kinds of spending reductions that might occur. health bills and other health professions bills into this single piece of legislation.

2005– 2006 ASSOCIATION CALENDAR OF EVENTS

June 2005- Secretary's Award winners announced.

September 27-October 1, 2005- Coalition of Allied Health Leadership Program- Washington, DC.

October 2005- Scholarship of Excellence winners announced.

October 19-22, 2005- Annual Conference- The Intercontinental Houston, Houston, TX.

March 16-17, 2006—Spring Meeting in Washington, DC

October 18-21, 2006 - Annual Conference— Millennium Knickerbocker, Chicago, IL.

October 17-20, 2007—Annual Conference—San Diego, CA

ADHA SELECTS NEW EXECUTIVE DIRECTOR

Ann Battrell, Assistant Executive Director for Strategic Planning and Education for the American Dental Hygienists' Association (ADHA), was selected by the Board of Trustees to be the next Executive Director of that organization. She will assume the duties of her new position on July 1, 2005. Battrell is the first registered dental hygienist and former ADHA president to serve in this capacity. She has been a member of that Association since 1979.

ENHANCING CLINICAL AND TRANSLATIONAL SCIENCES

The National Center for Research Resources (NCRR) is leading a new effort on behalf of the NIH Roadmap Re-engineering the Clinical Research Enterprise initiative to catalyze the development of a new discipline of clinical and translational sciences. The initiative entails: fostering the clinical and translational sciences into a new academic discipline, promoting the training and career pathways of clinical and translational investigators, allowing for the more comprehensive integration and expansion of resources for clinical and translational research, and improving inter-institutional collaborations.

During a meeting held at the National Institutes of Health on May 23, NIH Director Elias Zerhouni pointed to the difficulty involved in recruiting and retaining clinical researchers. Additional challenges include an increasing regulatory burden and overhead costs, fragmented training programs, and limitations/barriers due to NIH funding mechanisms, review, and program structures. He noted that an explosion in clinical service demands and reduction in financial margins limit the time available for research and the mentoring of clinical/translational scientists. Moreover, the complexity of knowledge needed to be an effective clinical/translational scientist is not easily acquired. Young clinical faculty have trouble finding a real “home” for their aspirations.

As a transforming goal, Zerhouni cited the need to provide the academic home and integrated resources needed to advance the new intellectual discipline of clinical and translational sciences, create and nurture a cadre of well-trained investigators, and advance the health of the nation by transforming patient observations and basic discovery research into clinical practice. What is needed are new programs that will support different experimental models and approaches and that are flexible enough to have adjustable sizes for different needs, depending on the kind of academic health center involved

Zerhouni stated that both he and the NIH Institute Directors were committed to this initiative for the long term and that funds would be transferred from the individual institutes to support this Roadmap development. He wants the NIH and the academic health centers to work together to build a strong foundation for clinical and translational sciences.

SMOKING DECLINES, BUT DISPARITIES EXIST

Roughly 21.6% of U.S. adults, or about 45 million individuals were smokers in 2003, according to a report issued by the Centers for Disease Control and Prevention on May 27. The figure is a reduction from the 22.5% reported in 2002 and 22.8% in 2001. For the second straight year, more adults (46 million) had quit smoking than were smokers, according to the 2003 National Health Interview Survey data. However, the authors say additional effort and programs are needed to reduce continuing disparities in cigarette smoking by age, race/ethnicity, and educational levels and to meet the national goal of reducing smoking prevalence among adults to 12% by 2010.

U.S. MEDICAL MALPRACTICE LAW

A new report from the Kaiser Family Foundation provides an overview of the issues surrounding medical malpractice law, including the legal changes that states have made over the past thirty years in response to periodic concerns about rising medical malpractice costs, some newer proposals for changing medical malpractice law, and trend data for malpractice claims. The document may be accessed on the Web at <http://www.kff.org/insurance/loader.cfm?url=/commonspot/security/getfile.cfm&PageID=53241>

MEMBERS RESPOND TO CALL FOR ABSTRACTS

More than 60 abstracts were submitted by members for the Association's Annual Conference that is scheduled to be held in Houston, TX on October 19-22. Papers selected by a review committee will be sorted into two categories. The first involves presentations during a series of concurrent sessions while the second entails a poster session.

Typically, these presentations are a highlight of each annual event. Many of these submissions eventually also make their way into publication in periodicals such as the *Journal of Allied Health*. Among the various topics slated to be addressed at the conference are the following:

- ◆ A New Role for Clinical Laboratory Scientists as First Responders
- ◆ Implementing High Fidelity Simulation into the Curriculum
- ◆ Application of the Inquiry Model to Physical Therapy Education
- ◆ Education for a Rapidly Emerging Field in Diagnostic Image Management Called PACS Administration
- ◆ Conceptual Issues in the Measurement and Utility of Evaluation Methodologies of Community-Based Health Disparity Initiatives
- ◆ Diagnosis, Treatment, and Charges for Myocardial Infarction: Disparities, Demographics, and Insurance Types
- ◆ Knowledge and Use of Palliative Care Medicine by Providers Building Cultural Competence
- ◆ CyberCourse: An Online Methodology
- ◆ Preparing Practitioners for a Lifetime of Moral Action
- ◆ Environmental Scanning in a Turbulent Environment: Tools for Allied Health Administrators
- ◆ Diffusing Technological Innovations into Allied Health Education
- ◆ The Evolution of the Clinical Doctorate
- ◆ Team Approach to Clinical Decision Making
- ◆ Meeting Recruitment and Retention Challenges through Technology

The abstracts cover the general areas of research, education, and practice. In addition, the following broad topics are being emphasized for this year's meeting: Expanding Roles of Allied Health Practitioners, Emerging Technologies, and Addressing Health Disparities. As in previous years, awards will be given to the best posters.

PHYSICIANS AND THE PURSUIT OF QUALITY IMPROVEMENT

Health care purchasers, accrediting organizations, and consumer advocates are among the groups currently using quality improvement (QI) methods to improve patient care, but there is still one key group for whom the pursuit of QI has not become routine: physicians. To date, QI has not permeated the culture of professional medicine, say the authors of "Measure, Learn, and Improve: Physicians' Involvement in Quality Improvement." Drawing upon data from the Commonwealth Fund National Survey of Physicians and Quality of Care, Anne-Marie J. Audet and her colleagues found that only one-third of doctors have been involved in any redesign efforts aimed at improving performance. Just a third, moreover, have access to any data about the quality of their own clinical performance, while seven of 10 physicians do not feel the public should have access to quality-of-care data.

The survey also revealed surprisingly low use of electronic medical records (EMRs): only about a quarter (27%) of doctors reported using an EMR routinely or occasionally. The report is on the Web at http://www.cmwf.org/us_r_doc/824_Audet_MDqualitysurvey_ha_itl.pdf.

HEALTH INFORMATION TECHNOLOGY SHOULD BE AN URGENT PRIORITY

Department of Health and Human Services (HHS) Secretary Mike Leavitt issued a new report citing investment in information technology (IT) as an essential, high priority for the American health care system and the U.S. economy. The report, "Health Information Technology Leadership Panel: Final Report," was released at the Business Roundtable's Chief Executive Officer (CEO) Health Care Summit where Secretary Leavitt and Treasury Secretary John Snow discussed the burden of rising health care costs on the U.S. economy and global competitiveness and the role of health IT in managing these costs. The meeting was chaired by Michael B. McCallister, CEO of Humana, Chairman of the Roundtable's Health and Retirement Task Force, and leader of the Roundtable's efforts to improve the health care system.

The report may be accessed on the Web at <http://www.hhs.gov/healthit/HITFinalReport.pdf>.

DISABILITY REHABILITATION RESEARCH FUNDING AVAILABLE

The National Institute on Disability and Rehabilitation Research (NIDRR) is inviting applications for new awards for FY 2005. The deadline for transmittal of applications is **July 5, 2005**. Eligible applicants include institutions of higher education. The estimated average size of the awards is \$487,500. The project period is for as long as 60 months. This program does not involve cost sharing or matching.

The purpose is to plan and conduct research, demonstration projects, training, and related activities that help to maximize the full inclusion and integration of individuals with disabilities into society and to improve the effectiveness of services authorized under the Rehabilitation Act of 1973, as amended. An announcement appears in the May 5, 2005 issue of the Federal Register, beginning on page 8345. The Federal Register may be accessed on the Web at <http://www.gpoaccess.gov/fr/index.html>

DEMOGRAPHIC CHANGES AND THE ECONOMY

Douglas Holtz-Eakin, Director of the Congressional Budget Office (CBO) testified in May before the House Ways and Means Committee on the Implications of Demographic Changes for the Budget and the Economy. His testimony is on the Web at <http://www.cbo.gov/ftpdocs/63xx/doc6365/05-19-Long-Term.pdf>.

AVAILABLE RESOURCES ACCESSIBLE ELECTRONICALLY

Guide To Federal Financial Aid Programs Available

The American Council on Education has released a free, downloadable publication detailing the processes and programs involved in the federal financial aid process, *What Every Student Should Know About Federal Aid*. In 2004, the federal government provided \$81 billion to help students and families pay for a postsecondary education. The U.S. Department of Education estimates that in the current year, 10.1 million students will receive federal student aid while attending one of the more than 6,200 colleges, universities, and trade schools that participate in federal student aid programs. This 32-page overview--meant not only for students, but also for parents, college administrators, and anyone interested in the details of federal financial aid--discusses the variety of federal programs designed to help students and families finance a college education. Sections include the goals, eligibility, and application process for federal financial aid, a description of the major aid programs, and the tax benefits available to students and families. The Guide may be accessed on the Web at <http://www.acenet.edu/bookstore/pdf/2005paying4college.pdf>.

Improving Medical Statistics And The Interpretation Of Medical Studies

Considerable variability exists in the information that the public and physicians receive regarding the results of medical trials. One contributing factor is the incorrect application of statistics in the medical literature. A more common source of error is that the conclusions of a study are not always a reasonable reflection of the data presented. Some good examples of the misapplication of statistics and helpful suggestions on how to avoid them may be obtained on the Web at <http://www.improvingmedicalstatistics.com/index.html>.

New, Updated Information Available About Medicare

The Kaiser Family Foundation has released four new and updated fact sheets with key facts and current statistics about Medicare. The fact sheets provide details about the program, new drug benefit, financing, and private plans' role. The information may be accessed on the Web at <http://www.kff.org/medicare/>.

Uninsured Americans With Chronic Health Conditions: Key Findings From The National Health Interview Survey

A recent study from the Urban Institute examines how uninsured adults with chronic health problems are faring on several measures that may indicate that access to care is compromised. The analysis is based on the 2003 National Health Interview Survey, relying on self-reports of chronic health conditions. Almost half of uninsured adults with chronic conditions forgo needed medical care or prescription drugs due to cost and they forgo care at much higher rates than their insured counterparts. Serious identifiable gaps in needed medical care were found for every racial, ethnic and chronic illness subgroup that was examined. The study may be obtained on the Web at http://www.urban.org/UploadedPDF/411161_uninsured_americans.pdf.

Health As An Instrument Of Foreign Policy: Challenges For Academic Centers

Proceedings from the 6th Trilateral Conference on April 3-6, 2004 involving representatives from the U.S., U.K., and Canada are available from the Association of Academic Health Centers (AHC). Entitled, "Health as an Instrument of Foreign Policy: Challenges for Academic Centers," it may be accessed on the Web at http://www.ahcnet.org/pdf/6th_trilateral.pdf.

KENNETH SHINE IS KEYNOTE SPEAKER

Kenneth Shine, Executive Vice Chancellor for Health Affairs for the University of Texas System, will be the Keynote Speaker on October 19 during the Association's Annual Conference in Houston, TX.. The title of his presentation is "Health in America—Looking Ahead." In his current position, he is responsible for the six UT System health components and their aggregate operating budget of almost \$5.3 billion. A former President of the Institute of Medicine (IOM), he was the founding Director of the RAND Center for Domestic and International Health Security where he led the Center's efforts to make health a central component of U.S. foreign policy and guide the Center's evolving research agenda. Shine brings to his role at the University of Texas decades-long experience working with international health experts on global issues such as emerging infectious illnesses, bioethics, and access to care.

He is Professor of Medicine Emeritus at the University of California, Los Angeles (UCLA) School of Medicine. A cardiologist and physiologist, he received his M.D. from Harvard Medical School in 1961. Before becoming president of the IOM, he was Dean and Provost for Medical Sciences at UCLA. Shine was chairperson of the Food and Drug Administration's Scientific Advisory Committee and he is a member of the Scientific Advisory Committee of the Department of Homeland Security. A member of many honorary and academic societies, including Phi Beta Kappa and Alpha Omega Alpha, Fellow of the American College of Cardiology and American College of Physicians, he was elected to the Institute of Medicine in 1988. He also served as Chairman of the Council of Deans of the Association of American Medical Colleges from 1991-1992 and was President of the American Heart Association from 1985-1986.

NEWS FROM THE COLLEGES

Janet Farmer, who in 2002 represented ASAHP in the Primary Care Fellowship Program administered by the U.S. Public Health Service, has been appointed as the first director of the Thompson Family Center for Autism and Neurodevelopmental Disorders at the University of Missouri-Columbia. She is an associate professor of health psychology at that institution.

The Thompson Family Center will promote research, teaching, and service innovations designed to improve the lives of children with autism spectrum disorders and their families. Autism spectrum disorders are brain disorders that affect one in 166 individuals, according to the Centers for Disease Control. Little is known about the causes, treatment and prevention of autism, something Farmer said the Center will address. The interdisciplinary center will join existing programs and services at MU formally. Researchers will address the many facets of autism, from factors that influence brain development and behavior to new treatment approaches and public policies that support their use. Academic divisions that will participate in the center initially include the School of Medicine, the School of Health Professions, the College of Education, the College of Human Environmental Sciences and the Truman School of Public Affairs.

ASAHP ELECTION

A slate of candidates has been developed for the Association's upcoming election. The contest this year involves selecting a Secretary, two members of the Board of Directors, and three members of the Nominations & Election Committee. Board Members serve three-year terms. The other positions are for two years. Ballots will be mailed in mid-July. In order to have votes included in the tally, members must have their dues paid up by **September 2, 2005**. The results will be announced by the middle of that month.
