

TRENDS

Association of
Schools of
Allied Health
Professions

EXPANDING THE HEALTH WORKFORCE

HIGHLIGHTS

DECEMBER 2006-
JANUARY 2007

President's Message	2
110th Congress Opens	3
Board Actions	4
Workforce Analysis	5
Available Resources	7
Health e-Letter	8
Allied Health Week at TJU	8

Leaders of major national health professions education and practice organizations recommended ways to increase the capacity of the nation's health workforce during an event sponsored by the Association of Academic Health Centers (AAHC) in Washington, DC on public policy and the health workforce. ASAHP Executive Director **Thomas W. Elwood** was invited to speak on the topic of allied health.

In his remarks, he noted that allied health faces major shortages in several professions. A problem of serious concern is faculty recruitment and retention since without an adequate supply of faculty, expanding student enrollment in academic programs will not be possible. He also pointed out that "branding" the name of allied health often faces obstacles. An example is that schools that also have nursing and pharmacy programs find it difficult to call their institutions schools of allied health, which in effect reduces the visibility of allied health.

Congress has been presented with opportunities to address the situation of existing workforce shortages in allied health and an inadequate pipeline supply by passing an *Allied Health Reinvestment Act*. Unfortunately, no action was taken by the 109th Congress and this legislation will have to be reintroduced in the 110th congress, which resumed business in January 2007. An additional concern is the discontinuation of federal funding support under Title VII of the Public Health Service Act. Renewed efforts are required to have Congress restore funding for 10 programs that were eliminated in fiscal year 2006.

Two additional workforce considerations also need to be addressed. Many allied health professions lack career ladders that would enable individuals to progress from one level of knowledge and expertise to higher levels within the same profession. Restrictive immigration policies and failure to offer a sufficient number of visas for foreign students are other kinds of conditions that exacerbate current workforce shortages.

Presentations were made at the meeting by representatives from medicine, dentistry, dental hygiene, nursing, pharmacy, and public health. Across the board, these professions also are confronting faculty shortages that hamper educational capacity. A common issue among them is the lack of institutional resources, along with insufficient funding from states and the federal government, that constrain workforce expansion. Concluding thoughts were summarized at the close of the meeting. It was recognized that the gap in supply won't be filled under the current silo system. Efforts to address shortages should not lose focus by turning to important, but subsidiary issues such as quality, efficiency, or diversity. K-12 education also is an essential area that needs more attention.



VANGUARD OF
ALLIED HEALTH EDUCATION

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PRESIDENTS' MESSAGE

By David M. Gibson, ASAHP President



Si hoc adfixum in obice legere potes, et liberaliter educates et nimis propinquus ades!
(Henry Beard, *Lingua Latina Occasionibus Omnibus, id est, Latin for All Occasions*, Villard Books, New York, 1992)

In the nascence of the New Year, it seems fitting to use an ancient language as a reminder that all of our pasts serve as the cumulative impetus that ushers in all of our futures. I also chose this quote to highlight the currency of the ancient mother-tongue of many modern languages. It means, "If you can read this bumper sticker, not only are you well educated but you are much too close!" So, up close and personal, Happy New Year to all of you and yours et sit simpler tecum pax et bonum (and my peace and goodness be with you always)!

The holidays provide us all with some moments for reflection, time with family and friends and the happy opportunity to close the door on many of them once they finally leave. Most of all, as one year rolls into another, we can reflect on the many blessings that have been ours, can allow ourselves the balm of healing of past hurts and pains and can provide us an opportunity to say thank you for all that have been kind and helpful.

To this end, I would like to offer a quote from a letter that Jack Trufant wrote on Christmas Day to you his colleagues and to me. The following quote seems so reflective of Jack's dedication to the work and mission of the Association of Schools of Allied Health Professions and also mirrors that same zeal that so many of you have for the betterment of allied health education, practice and research. His words:

Over the past several months, I have thought so often about the important role that ASAHP has played in my professional and personal life. I would like to report that my Rush colleagues thought it significant, but I honestly do not think that they paid it much regard. My family did not comprehend the depth of responsibility, but they were supportive. So why did I invest such effort in my membership and the duties of office? Without question, my commitment to promoting allied health in our nation was foremost, for I know that we make a very positive difference in the lives of many." He goes on to ask, "How can I ever express the depths of my gratitude to you for recognizing me so publicly before the people who have enriched my life in ways that I could never begin to describe" (my emphasis)?

I chose to quote from Jack's letter because it moved me deeply that one who has served our Association so well can be so grateful to you his colleagues. I chose these two passages because to a large degree they seem to represent that attitude of so many of our members who give fully of themselves for the betterment of allied health and in doing so are remarkably grateful for having the opportunities to serve causes bigger than themselves.

If these observations are true, then we have every reasonable hope that the New Year will bring continued successes to the efforts of our Association and that each of us in his or her own way will further the myriad causes for the enhancement of the allied health professions. In our zeal to do so, however, I have but one suggestion: *Nimis propinquus ne ades* (don't get too close) lest you crash into others pursuing the same quest!



110TH CONGRESS OPENS

The 1st Session of the 110th Congress officially was launched in early January. The ascendance of Nancy Pelosi (D-CA) to become Speaker of the House of Representatives was an event of historic significance in the steady rise of women in this country to political positions of great importance.

Accompanied by fellow Democrats, her party will rule over that chamber for the first time in 14 years. In the health arena, a major policy objective is to expand the scope of stem cell research funded by the federal government. Whether such efforts will culminate in another veto by President Bush remains to be seen. It's worth noting that during his six years in the White House, he has vetoed only one bill sent his way, and that too, involved a similar effort to advance stem cell research.

During the 109th Congress, only two appropriations bills were enacted. Spending legislation for the Departments of Labor, Health & Human Services and Related Agencies never made its way to the President's desk. Funding is provided through a continuing resolution (CR) that expires on February 15. One option is to combine Labor-HHS and the other bills that were not enacted into omnibus legislation. Strong doubts exist about the likelihood of such an event occurring.

Instead, another CR could be passed for the rest of year, which would fund programs at FY 2006 levels. If that route is chosen, allied health and other Title VII programs will go another year without federal support.

2007 ASSOCIATION CALENDAR OF EVENTS

March 13-14, 2007 Leadership Program-St. Pete Beach, FL

March 14, 2007 Research Symposium—St. Pete Beach, FL

March 15-16, 2007 Spring Meeting— St. Pete Beach, FL

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

Sites have been selected for other upcoming ASAHP events. The 2008 Annual Conference will be held in Baltimore, MD in conjunction with the National Network of Health Career Programs in Two-Year Colleges. The conference in 2009 will be in San Antonio, TX and in 2010 in Charlotte, NC

2007 LEADERSHIP DEVELOPMENT PROGRAM

The Association's Leadership Development Program will be offered again in 2007. The initial session will occur in St. Pete Beach, FL on March 13-14. The second part is scheduled for October 15-16 in San Diego, CA. During the interim, participants will work in teams on projects that they select in March. The deadline for applying was November 15, 2006. Twelve applicants were selected in early December.

BOARD ACTIONS

The ASAHP Board of Directors had a conference call on December 20. The following actions were among those taken:

- Approved a motion to accept the Minutes of the Board meeting on October 16-17 as presented.
- Approved a motion to reposition portions of the investment portfolio to achieve a 60-40 split between equity mutual funds and fixed income securities. The proportion was established in March 2004, but owing to market vagaries, the equity part of the portfolio dropped below 60% during that 33-month period.
- Agreed to bring recommendations to the Board meeting in March regarding the selection of an index for raising dues annually. Staff at other organizations will be contacted to determine what indexes are used by them to determine increases in membership dues.
- Approved a motion to select **Stephen L. Wilson**, former Director of the School of Allied Medical Professions at The Ohio State University, as the Deans' Memorial Lecturer at the 2007 ASAHP Spring Meeting.
- Recommended that ASAHP President **David M. Gibson** represent ASAHP at a meeting of the Health Professions Network and give a presentation on the topic of degree advancement.
- Agreed that the heads of the regional deans' groups and the head of the associate/assistant deans' group should be requested to provide the names of individuals to be included among the members to serve on the planning committee for the 2007 ASAHP Annual Conference.

BYLAWS AMENDMENT PROPOSED

On January 4 of this year, ASAHP members were sent copies of proposed amendments to the Association's bylaws with a request that they signify approval or disapproval of these modifications. If approved, a new Resolutions Committee will be created and business meetings will be conducted at both the Annual Conference and the Spring Meeting each year. The ballots were sent electronically.

2006 INSTITUTIONAL PROFILE SURVEY RESULTS AVAILABLE

Data were reported by 87 member institutions for the *2006 Institutional Profile Survey* and the results have been posted electronically for viewing by the deans and directors of those schools. A printed summary of the findings, along with trends data for the past several years, will be produced in March and distributed then.

Apart from salary data, which prove immensely useful within the various schools, student application and enrollment data have applicability in policymaking involving health care and higher education. Despite existing workforce shortages in many allied health professions and a U.S. population that is aging, many programs in ASAHP member institutions are not meeting enrollment capacity. In Fall 2006, only two of the 19 allied health professions studied were noted as having every classroom seat occupied. Current workforce shortages and a deficient supply pipeline are factors that do not bode well for the future.

A Contrarian View of the Shortage of Health Professionals

*Stephen N. Collier, Ph.D., Director and Professor
Office of Health Professions Education and Workforce Development
School of Health Professions, University of Alabama at Birmingham*

Has anyone not heard there is a shortage of health professionals? If so, they either must have an affliction and been asleep like Rip Van Winkle or just not be paying attention to the national media. While much of the attention has been focused on nursing, the largest health profession, the public is becoming more aware of shortages that exist in a number of other health professions, most of which commonly come under the allied health category.

Recent years have seen some significant shortages of health professionals in fields such as physical therapy; the imaging occupations of radiography, nuclear medicine technology, and radiation therapy; clinical laboratory personnel; and respiratory therapy. While in many instances the shortages have been severe with vacancy rates exceeding 15%, causing great concern on the part of employers, they have also had the potential to bring about disruption in services. In general, when vacancies go above 5%, or when the average number of days to fill a vacant position goes beyond a month or so, the anxiety level of employers goes up as well.

Based on projections of future demand by the U.S. Bureau of Labor Statistics, conventional wisdom would seem to indicate there will be a continuing, or in some cases, accelerating, shortage of health professionals within the allied health constellation of fields. Yet there are some indications that the shortages are easing and returning to a more normal level. And if some current trends continue, there might even be an oversupply in some fields. Such thinking is generally contrary to what most employers and educators are communicating to each other and the public.

One way to gauge the shifting supply-demand balance is to look at year to year changes in how many new graduates are being produced, or how many candidates there are for licensing or professional credentialing exams. One of the larger groups of professions is that of the imaging and radiation therapy occupations. In the early years of this decade there was much discussion of a shortage of radiographers and others, and those shortages still persist in many locations. However, as the following table illustrates, there has been a rapid increase in the number of new graduates sitting for the registry exam in these fields.

First-time Candidates for Registration Exam					
	2001	2002	2003	2004	2005
Radiography	7,434	8,168	9,627	11,860	13,200
Nuclear Medicine Technology	274	260	396	484	576
Radiation Therapy	579	652	830	941	984
<i>Source: ARRT 2006 Annual Report to Registered Technologist</i>					

Similar results may be found in physical therapy. From a combined effect of the Balanced Budget Act of 1997 and the phasing in of doctoral programs, the number of physical therapy graduates peaked in 1999 and afterwards declined until 2004. Now that most programs have completed the transition from master's to doctoral level, and enrollments have once again rebounded due to a positive employment picture, the American Physical Therapy Association in its 2005 Education Fact Sheet is projecting an increase in graduates. From 4,913 graduates in 2004, APTA is estimating an increase to 6,154 graduates in 2007—about a 25% increase—and further increases are likely as programs achieve full enrollment capacity and expand due to employment and student demand.

Another way to judge trends in supply and demand is to look at various projections from one year to another or in position vacancy rates. While there can be a great deal of variance from one geographic location to another, state and national level data can show trends that are occurring. One organization that has done a good job in following hospital personnel vacancies over time in a consistent manner is the Maryland Hospital Association. The following table shows the results for a number of the allied health professions and nursing.

Maryland Hospital Association Personnel Survey Statewide Summary of Vacancy Rates						
	2000	2001	2002	2003	2004	2005
CLS/Med Tech (MT-ASCP)	8.1	7.9	8.7	5.9	6.3	8.3
Cytotechnologist	22.9	5.9	9.9	6.9	0.4	-0.6
Occupational Therapist	12.4	8.3	5.6	9.4	11.3	11.3
Physical Therapist	9.8	6.7	2.8	10.2	16.2	18.5
Physician Assistant	8.5	8.8	10.2	7.4	8.4	13.5
Radiation Therapy Tech	19.7	21.1	21.5	11.9	10.2	10.8
Radiographer	17.9	14.6	16.1	12.0	9.1	10.8
Registered Nurse (RN)	13.9	15.6	12.6	10.8	9.2	10.0
Registered Record Adm	6.8	12.5	7.1	5.4	10.6	4.2
Speech Language Path	11.4	14.1	7.5	12.2	14.1	6.7
<i>Source: Maryland Hospital Association</i>						

The data from Maryland in the preceding table are just for hospitals and not for all employment settings. Depending on what proportion of the workforce in a given profession is employed in hospitals, hospital data may be less relevant. For example, the majority of speech-language pathologists are employed in school systems. Also, the Maryland employment attributes may not be characteristic of a number of other states. Yet Maryland's experience is relevant, and the workforce trends indicated will likely apply in many other states.

Some allied health workforce trends indicate that within a few years the U.S. may be entering a period where there will be a better balance between personnel supply and demand. There will obviously be professions that do not fit this overall picture, and there will be waxing and waning in the supply-demand situation among a number of professions.

In keeping with citing caveats in forward looking statements, there are a number of other factors that can influence the workforce picture. Most of the professions, but particularly those in the rehabilitation areas, are sensitive to health care reimbursement policy. It is unlikely that future changes in reimbursement policy will become more generous. Another facet that is causing concern in some fields, especially for clinical laboratory scientists and registered records administrators, is the hiring of uncredentialed workers. If this becomes more widespread or a general trend, it could have a large effect on the need for these professionals.

Another element to watch and factor into the workforce equation is the rate of retirements and individuals, for whatever reason, dropping out of the profession. If the rate is greater or less than projected by the BLS and others, it will impact the workforce circumstances. It is open to debate whether the capacity of existing programs may be sufficient to meet the evolving needs of the health workforce. As enrollment levels in programs in many fields come back to full capacity, programs should strive to have the ability to ramp up or ramp down enrollment levels as circumstances warrant. Any of the preceding factors, however, can change the demand for graduates.

AVAILABLE RESOURCES ACCESSIBLE ELECTRONICALLY

2006 National Healthcare Disparities Report

The *2006 National Healthcare Disparities Report* uses the same measures of quality as its companion *National Healthcare Quality Report (NHQR)* to monitor the Nation's annual progress toward eliminating disparities in health care. Racial/ethnic group comparisons focus on 22 core measures and income group comparisons focus on 17 core measures of quality that support reliable estimates for all groups. Six core measures of access to care are also presented. The report presents, in chart format, the latest available findings on quality of and access to health care in the general U.S. population and among priority populations. It focuses on four components of quality—effectiveness, patient safety, timeliness, and patient centeredness—and two components of access—facilitators and barriers to health care and health care utilization. The report may be accessed on the Web at <http://www.ahrq.gov/qual/nhdr06/nhdr06report.pdf>.

Healthcare Industry Report—2006

KPMG's Healthcare Industry Report--2006 offers information about the current state of the U.S. healthcare industry, recent history, and challenges ahead. The review covers health status, healthcare quality, and national health expenditures, and offers perspectives and statistics on various components of the healthcare system. The report may be accessed on the Web at http://www.us.kpmg.com/RutUS_prod/Documents/12/HealthcareIndustryReport06.pdf.

Census Bureau's 2007 Statistical Abstract On Health

The U.S. Census Bureau recently published its *2007 Statistical Abstract*. The health and nutrition section presents data on health expenditures and insurance coverage, including Medicare and Medicaid, medical personnel, hospitals, nursing homes and other care facilities, injuries, diseases, disability status, nutritional intake of the population, and food consumption. The data may be accessed on the Web at <http://www.census.gov/prod/2006pubs/07statab/health.pdf>.

Disability Among Older Americans Continues Significant Decline

Chronic disability among older Americans has dropped dramatically and the rate of decline has accelerated during the past two decades, according to a new analysis of data from the *National Long-Term Care Survey (NLTC)*. The study, published in the *Proceedings of the National Academy of Sciences*, found that the prevalence of chronic disability among persons 65 and older fell from 26.5 percent in 1982 to 19 percent in 2004/2005. The findings suggest that older Americans' health and function continue to improve at a critical time in the aging of the population. In addition to a drop in the percentage of older Americans reporting disability, the analysis found that the average annual rate of the decline has accelerated. The decline in disability averaged 1.52 percent annually over the 22-year time span, but the rate of change shifted gradually from 0.6 percent in 1984 to 2.2 percent in 2004/2005. The paper appears in the November 28, 2006, print edition of *PNAS* and can be accessed on the Web at <http://www.pnas.org/cgi/content/full/103/48/18374>.

Postsecondary Institutions In the United States: IPEDS Data 2005

This *First Look* presents findings from the Integrated Postsecondary Education Data System (IPEDS) fall 2005 data collection, which included two survey components: Institutional Characteristics for the 2005-06 academic year, and Completions covering the period July 1, 2004, through June 30, 2005. These data were collected through the IPEDS web-based data collection system. The report may be accessed on the Web at <http://nces.ed.gov/pubs2007/2007167.pdf>.

AMA'S E-MAIL NEWSLETTER ON ALLIED HEALTH

The *Health Professions e-Letter* from the American Medical Association (AMA) is a popular source of information on education and practice trends in the allied health professions. First produced in April 2000, this free monthly e-mail newsletter covers educational trends and career-related issues for 71 allied health professions, such as:

- Art therapist
- Clinical laboratory scientist
- Community counselor
- Dental hygienist
- Dietitian/nutritionist
- Health information technician
- Medical assistant
- Occupational therapist
- Physical therapist
- Physician assistant
- Radiographer
- Respiratory therapist
- Speech-language pathologist
- Surgical technologist

Among its 8,000 readers and contributors are staff of health professions accrediting agencies, educational programs and institutions, professional organizations, certifying/licensing boards, and the media. A recurring theme of the newsletter is the workforce challenges faced by many health professions as they struggle to recruit and retain qualified personnel. Current and past issues of the newsletter are available online at: www.ama-assn.org/go/hpe-letter. To subscribe, go to: www.ama-assn.org/go/e-news. The AMA also publishes the *Health Professions Career and Education Directory*, an annual book that lists 6,800 educational programs in 71 professions. For more information or to order, call 800 621-8335.

ALLIED HEALTH WEEK AT THOMAS JEFFERSON UNIVERSITY

Thomas Jefferson University's Jefferson College of Health Professions celebrated *Allied Health Professions Week* on November 5-11 with a variety of events. Throughout that period, students and staff participated in a blood drive at Thomas Jefferson University Hospital. Students had many opportunities to win a variety of prizes and gift certificates through daily raffles. Monday featured a Job Fair organized by the JCHP Career Development Center. Almost 200 students attended to meet 135 recruiters who represented over 200 facilities from several states. Dean **James Erdmann** sponsored a pizza party on Tuesday. The theme of the day was interdisciplinary socializing and while students ate, they played JCHP Bingo which required them to find other persons who fit clues such as "Wants to work with elderly patients," "Knows CPR," and "Is at JCHP to change his or her career." Later on Tuesday, the Student Affairs Office and Alumni Office organized an alumni panel and networking event for students. Four panelists, representing PT, OT, Radiologic Sciences and Cytotechnology, shared their insights about job searching and getting started in the professional world.

On Wednesday, JCHP students promoted allied health and the College to the rest of the University. Faculty and Staff Appreciation Day occurred on Thursday. To end the week, the College celebrated Student Appreciation Day on Friday morning. Students stopped in the lobby to obtain sweet treats and other small gifts.