ASAHP UPDATE

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SEATS AT THE TABLE

Although individual professions that commonly are classified under the rubric of allied health are represented in many key health policy forums, allied health as a whole could be viewed as benefiting appreciably from greater participation in such venues. Given the substantial proportion of the overall health workforce that is characterized by allied health, it is important that its collective voice be heard to influence policy decision-making in matters such as the distribution of public and private resources.

The rehabilitation aspect of health care involves essential contributions by individuals in professions that include physical therapy, occupational therapy, speech-language pathology, and dietetics. Patients who have had an acquired brain injury, a heart attack, and many forms of cancer are among the beneficiaries of services provided by these highly skilled practitioners.

President Obama's announcement of a "Cancer Moonshot" initiative during his 2016 State of the Union Address sets in motion a plan to generate an additional $1 billion dollars in funding aimed at finding cures. The recent appointment of individuals to a Blue Ribbon Panel that will provide guidance for this endeavor is an example of a place where allied health should be at the table.

The U.S. Preventive Services Task Force (USPSTF) periodically issues pronouncements that attract a considerable amount of attention in the media regarding the quality, appropriateness, and effectiveness of health care services and access to such services. Its members work to improve the health of all Americans by making evidence-based recommendations about the effectiveness of clinical preventive services and health promotion. Every year, members are chosen to serve new terms and replace those who are completing their service. Information about the process of nominating someone can be accessed at http://www.ahrq.gov/professionals/clinicians-providers/guidelines-recommendations/uspstf/nominate.html.

STUDENT SCHOLARSHIP AWARDS

Each year, the Association sponsors the *Scholarship of Excellence Program* for allied health students enrolled in its member institutions. The purpose is to recognize outstanding individuals who excel in their academic programs and have significant potential to assume future leadership roles in the allied health professions. Each student chosen for an award will receive a $1,000 scholarship.

In 2015, ASAHP gave scholarships to 12 students. Five of these awards were provided by the firm of CertifiedBackground.com, a company that offers criminal background check and immunization status check services to member institutions.

The year 2013 marked the inauguration of the *Elwood Scholar Award*. Created by the Board of Directors and named for ASAHP's former Executive Director **Thomas W. Elwood** who retired from that position in 2012, at the conclusion of the selection of the Scholarship of Excellence Award recipients, an additional review process will commence to identify the most outstanding applicant.

That indiidual will receive an additional $1,000 scholarship and a complimentary registration to the 2016 ASAHP Annual Conference in New Orleans, LA where he or she will be recognized formally as the award recipient. All travel and rooming costs will be paid by ASAHP.

Several conditions must be met to apply. Only one candidate from each member institution can be nominated. All degree levels are eligible. Information about application procedures is on the Web at www.asahp.org in the *Members Section*.

A key point to observe is that each application must include a letter endorsed by the dean or director who serves as the official ASAHP Institutional Representative that supports the nomination and describes qualities of the candidate. A letter from a chairperson or faculty member also may be included. The deadline for submitting the necessary information is **June 6, 2016**.

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MEMBERS IN THE NEWS

ASAHP Board of Directors member **Peggy Valentine**, Dean of the School of Health Sciences at Winston-Salem State University, had an article published in the March-April 2016 issue of the *North Carolina Medical Journal*. She noted that the health professional workforce of that state does not reflect the rich diversity of the North Carolina population. The underrepresentation of various demographic groups in health care may affect the health outcomes of the state's citizens.

Opportunities exist for educational institutions to form partnerships with other entities, share successful strategies, and implement measures to promote diversity among health professionals. The article can be accessed at http://www.ncmedicaljournal.com/content/77/2/137.full.

FUNDING OPPORTUNITY

The HealthSouth Corporation announced a call for grant applications. Research funding grants in amounts up to $20,000 are aimed at investigating the impact or effectiveness of therapy in the inpatient rehabilitation facility (IRF) post-acute care setting. Funds may be requested to support direct costs attributable to the study, excluding the investigators' time.

The funding is available for research only. It may be divided between several proposed studies and must be budgeted on the application(s) prior to conducting the research. High priority areas include: (1) the efficacy of physical, occupational, or speech therapy assessments or interventions, and (2) the impact of modes or intensity of therapies on patient outcomes and experience.

The deadline for submitting proposals is **June 30, 2016, 5:00PM, CST**. Additional information may be accessed at http://www.asahp.org/wp-content/uploads/2016/04/Therapy-Grant-Application.pdf.

CAAHEP

Deans and directors who have programs accredited by the Commission on Accreditation of Allied Health Education Programs (CAAHEP) are advised of a change in that organization's address. The new location is:

25400 US Hwy 19 N, Suite 158
Clearwater, FL 33763

POSTSECONDARY ATTAINMENT

The annual Lumina Foundation report, "A Stronger Nation" indicates that 40.4 percent of Americans aged 25 to 64 had either a four- or two-year degree in 2014, an increase from 40.0 percent in 2013. The report includes postsecondary attainment data for each of the nation's 100 most populous metropolitan regions. Attainment data also are broken down by race and ethnicity.

The report can be accessed at https://www.luminafoundation.org/files/publications/stronger_nation/2016/A_Stronger_Nation-2016-Full.pdf

BENEFITING AT-RISK POPULATIONS

Based on a review of case studies and published literature, a new report from the Health and Medicine Division of the National Academies of Sciences, Engineering and Medicine identifies six practices that show promise for improving care for socially at-risk populations: commitment to health equity; data and measurement; comprehensive needs assessment; collaborative partnerships; care continuity; and engaging patients in their care. Prerequisites for the adoption of these practices are the availability of resources and the alignment of financial incentives that make practices to improve the quality of care, health, and other outcomes for socially at-risk populations sustainable. The report can be accessed at http://www.nap.edu/catalog/21914/systems-practices-for-the-care-of-socially-at-risk-populations.

TELEHEALTH

The American Hospital Association (AHA) recently launched a web resource offering comprehensive information on telehealth, available at www.aha.org/telehealth. The site includes information on federal and state telehealth initiatives, research documenting telehealth value, AHA-member case studies showing telehealth in action and AHA TrendWatch reports on telehealth benefits to patients. This resource can be accessed at www.aha.org/telehealth.

VALUE IN HEALTH CARE

Achieving quality over quantity and reducing health care expenditures are prominent objectives. An article in Forbes may be of interest. Containing useful notions about paying for value, it can be accessed at http://www.forbes.com/sites/tomasphilipson/2016/04/05/value-in-health-care-time-to-stop-scratching-the-surface/#3d75603f721e.