ASAHP ANNUAL CONFERENCE

The Association of Schools of Allied Health Professions will hold its 2018 Annual Conference on October 10-12 at the Vinoy Renaissance St. Petersburg in St. Petersburg, FL. The theme of this year’s conference is: “Allied Health Education on the Front Lines—Expanding Access to Better Health and Health Care.”

The content of the conference program is designed to address issues of interest to attendees. Approximately 100 concurrent session and poster session presentations will be offered on several key issues, such as social determinants of health/culture of health, and leadership. Along with those offerings, the program will feature plenary session addresses by:

Shafik Dharamsi, Peter De Wetter Distinguished Professor in Health Sciences and Dean, College of Health Sciences, The University of Texas at El Paso

Timothy M. Renick, Vice President for Enrollment Services and Student Success and Vice Provost, Georgia State University

Joseph Vibert, Executive Director, Association of Specialized and Professional Accreditors

Richard E. Oliver, ASAHP Past President and Dean Emeritus, University of Missouri

Brandon Busteed, Senior Partner and Global Head, Public Sector Gallup, Inc.

Opportunities exist for participation in the Conference as a Sponsor, Exhibitor, or Advertiser. Information can be obtained at: http://www.event.com/events/2018-asahp-annual-conference-support/custom-17-d79969acdefbd4b6fa3cb31dcf3f195e.aspx.

2018 ASAHP ELECTION

The results of the election that closes today will be posted in a future issue of the ASAHP UPDATE.

LONELINESS AND SOCIAL ISOLATION

Throughout the ages, different kinds of artists have been inspired by themes focusing on the loneliness of the soul and the human heart in conflict with itself. More particularly, the health professions literature in recent years has featured many studies discussing the impact of loneliness and social isolation on health status.

As one manifestation of public concern, last January British Prime Minister Theresa May appointed the world's first “minister of loneliness” to address the issue there. The move was prompted by a 2017 report by the Jo Cox Commission on Loneliness, which indicated that more than nine million individuals in that country often or always feel lonely.

Depending on the source, some claims have been made to the effect that loneliness is even more instrumental in bringing about the onset of health problems than smoking 15 cigarettes a day. Thus, loneliness has been linked to raising levels of stress hormones and inflammation, that in turn can increase the risk of cardiovascular disease, arthritis, Type 2 diabetes, dementia, depression, anxiety, Alzheimer’s disease, and even suicide attempts.

Similar to many diseases and conditions, however, it often proves quite challenging to arrive at meaningful cause and effect conclusions. The publication CQ Researcher on August 3, 2018 issued a report entitled, “Loneliness and Social Isolation: Do They Pose a Growing Health Epidemic?” The document provides useful information about agreements and disagreements regarding such matters as: the number of Americans affected, whether social isolation increases political partisanship, the effects of relying on social media instead of face-to-face interactions, and if loneliness really is a growing phenomenon.

Health professionals personally and vocationally should have a vested interest in staying abreast of developments in this branch of research. Personal loneliness might affect clinician performance while patient loneliness may need to be taken into greater account in the provision of health care services.
EDUCATION REGULATORY REVERSALS

Whenever a new Administration assumes power in the nation’s capital, it is not unusual for it to seek to reverse practices instituted by its predecessor. The Trump Administration is no exception to this tendency as evidenced by what is occurring in the regulatory domain of higher education. As announced in the July 31, 2018 edition of the Federal Register, the Department of Education is planning a negotiated rulemaking session aimed at deregulating the sector. Examples are:

Accreditation
The Obama Administration implemented the College Scorecard site to provide more data around institutional success and it adopted a hard-line approach toward accreditors, creating more stringent experience standards needed for an accrediting group to be recognized and posing more oversight.

The Trump Administration believes that regulations affecting accrediting bodies restrict innovation within the industry and plans to drop the standard definition of the academic credit hour, reevaluate requirements involved in accreditor oversight for member institutions, and simplify criteria used to recognize an accrediting body.

Distance Education State Authorization
In 2016, the Obama Administration proposed regulations to go into effect by 2018 that would "improve oversight and protect more than 5.5 million distance education students" by clarifying standards in the Higher Education Act around state authorization and eligibility for financial aid. The guidelines were part of the administration’s "program integrity" policies and it was set to require all online education providers to show they are approved by the state in order to operate and enroll students.

In May of this year, the Trump Administration, announced it would delay the start date of the regulation for two more years in order to have another public comment period. Progress on this regulation will be discussed in the upcoming round of negotiated rulemaking, with Secretary DeVos indicating in the Federal Register announcement that the delay was necessary based on concerns raised by regulated parties recently.

The proposed changes also include repeal of the “gainful employment” rule.

PATIENT-REPORTED OUTCOMES

A level of interest is growing in using patients’ own reports of their health—patient-reported outcomes, or PROs to measure quality of life and use performance on these measures for payer incentives that reward higher quality care and better outcomes. PROs collect information directly from patients about their perceptions of their health, quality of life, mental well-being, or health care experience.

Many organizations have struggled with how to implement and standardize PRO measure collection into routine practice. A new study in the August 2018 issue of The Joint Commission Journal on Quality and Patient Safety provides details on how a PRO implementation program at Cincinnati Children’s Hospital Medical Center can serve as a model for using PROs in a clinical setting. The study is at https://www.jointcommissionjournal.com/article/S1553-7250(17)30480-4/pdf.

IPE OPIOID WEBINAR

The Interprofessional Education Collaborative (IPEC), of which ASAHP is a member, will host a webinar An IPE Approach To The Opioid Epidemic on Thursday—August 30, 2018 at 2:00 PM-3:00 PM (ET). Best practices will be discussed. Learning Objectives are:

Describe interprofessional approaches at the University at Buffalo and University of Pittsburgh that prepare students to address the opioid epidemic;

Identify opportunities and resources related to opioid prevention and treatment for interprofessional education and collaborative practice; and

Analyze lessons learned in the prevention and treatment of opioid abuse for future application.

Registration is available at http://www.aacnnursing.org/Professional-Development/Webinar-Info/sessionalerted/WF18_08_30.

ASAHP STUDENT ASSEMBLY

As of May 2018, physical therapy student Michael Nash of the University of Texas Health Science Center at San Antonio is serving as President of the ASAHP Student Assembly. ASAHP’s Board of Directors has a goal of creating additional Assembly chapters at other universities around the nation.