INTERPROFESSIONAL EDUCATION

ASAHP Award Opportunity
The Association of Schools of Allied Health Professions (ASAHP) strongly endorses interprofessional education (IPE) and interprofessional collaborative practice (IPCP). Through the Award for Institutional Excellence and Innovation in Interprofessional Education and Collaborative Health Care, ASAHP seeks to recognize a member institution and/or industry member for outstanding achievement in IPE and IPCP. In addition to the award, several institutions also will be recognized as “Programs of Merit” by ASAHP.

Candidates for the award must be ASAHP institutional members and should demonstrate outstanding achievement in six different areas. Award nominations must be submitted by the designated representative from the ASAHP member institution. Award applications close on May 1, 2019. Applicants will be notified of their status no later than August 1, 2019. All nominations must be submitted electronically.

Additional details, including an Award Packet, can be obtained at http://www.asahp.org/ipe-award-1.

IPEC INSTITUTE
The Interprofessional Education Collaborative (IPEC) will hold its next Institute on May 22-24, 2019, at the Association of American Medical Colleges (AAMC) Learning Center in Washington, DC. The Spring 2019 IPEC Institute returns once again to the popular theme of building a framework for interprofessional education for collaborative practice (IPEC). A new feature this year is that the IPEC Institute is designed to include both interprofessional teams and individual participants.

The meeting agenda can be viewed at https://nebula.wsimg.com/8e0b87009de4578265e486d722927ef1?AccessKeyId=DC06780E69ED19E2B3A5&disposition=0&alloworigin=1.

Information on how to register can be obtained at https://ipecollaborative.wufoo.com/forms/spring-2019-ipec-institute-registration/.

HEALTH WORKFORCE

The U.S. continues to undergo changes in the economy, technology, and demography that will influence the composition of the health workforce both now and in the future. Educators in health professions schools will have to take into account such factors when considering the addition of new kinds of programs, the downsizing or perhaps even the possible elimination of certain educational offerings, and the ability to attract/retain enough faculty with desired credentials, along with a sufficient number of students for enrollment purposes.

It was not so long ago, that a baccalaureate degree in certain allied health professions sufficed to enter clinical practice. Currently, an emphasis in some fields is on the possession of clinical doctorates, which also has an impact on the academic preparation levels of faculty members. Meanwhile, tuition costs associated with the attainment of degrees in the health professions fail to show signs of diminishing any time soon.

Students graduate today saddled with hefty amounts of debt that may fuel a desire to obtain good paying jobs. Resource-poor rural areas may fail to attract job candidates, which will exacerbate the problem of already not having an adequate supply of health personnel. A new paper from the Federal Reserve sheds additional light on problems confronting rural America. It can be obtained at https://www.federalreserve.gov/publications/files/consumer-community-context-201901.pdf.


Lastly, a U.S. population increase among the age group 65 and older will inflate the demand not only for acute care, but also for long-term services and supports. Health professionals will need to acquire the skills necessary to work effectively with this demographic cohort.
INSTITUTIONAL PROFILE SURVEY

The ASAHP Institutional Profile Survey is scheduled for launching in February. A new and improved version will include a focus on interprofessional activities, clinical instruction, and trends in student enrollment by profession.

A key element will be the assignment of an individual at each school to oversee coordination of the data collection process. Deans and directors are encouraged to consider in advance whom to select to carry out this highly essential coordinating role.

IPE WORKSHOP

A project-based workshop is being offered on April 23-26 in Boston, MA by the MGH Institute of Health Professions and the Massachusetts General Hospital Institute for Patient Care. The event is aimed at enabling participants to use evidence, creativity and collaboration to address their institution’s academic – practice gap. Information about the workshop can be obtained at http://info.mghihp.edu/leading-across-professions-2019#key_information.

JOURNAL OF ALLIED HEALTH

A recent Call by ASAHP President Susan Hanrahan to invite newcomers to review manuscripts for the Association’s quarterly periodical yielded 31 new reviewers. Just as importantly, the addition includes representatives from physical therapy, speech-language pathology, and emergency medical services, which are three areas that tend to be in short supply.

ADDRESSING SOCIAL DETERMINANTS

A growing body of research shows that integrating social services into health care delivery can improve health and reduce spending. A new report from the Commonwealth Fund points out, however, that many questions remain. How do providers determine which social services patients might need? What are the best ways to leverage care teams to improve patients’ social circumstances?

As a means of guiding the health care community toward answers, a group of health system leaders has developed a framework for establishing or expanding effective initiatives that serve as a gateway to a curated library of tools, best practices, implementation guidance, and other dynamic content. The Roadmap can be obtained at https://www.commonwealthfund.org/blog/2019/evolving-roadmap-address-social-determinants-health.

COMPETENCY-BASED EDUCATION

Created in a new collaboration between the firm Eduventures and the American Institutes for Research, the 2018 National Survey of Postsecondary Competency-Based Education (NSPCBE) represents the largest survey of postsecondary CBE implementation and interest to date. It includes responses from leaders and academic directors at 500 schools with existing CBE programs or with plans to build future programs.

As the 21st century nears the two-decade mark, more than 90% of degree or certificate granting colleges and universities remain wedded to an idea referred to as the oddly persistent credit hour, a.k.a. the Carnegie unit, a 1906 innovation developed by the Carnegie Institution for the Advancement of Teaching in order to design a sustainable pension system for a growing population of college teachers. This curious state of affairs is just one insight to be derived from the 2018 NSPCBE. The survey reveals that schools seeking to measure academic progress based on the mastery of competencies, rather than the accumulation of credit hours, remain few and far between.


HIGHER EDUCATION SUPPORT

An early indicator of states’ fiscal health shows modest, if uneven, improvements. These jurisdictions spent 3.7 percent more supporting higher education in fiscal year 2018-19 than in the previous year. The small rise continued a five-year trend of upward support that this year totals about $91.5 billion. In the previous fiscal year, support for higher education grew just 1.6 percent, according to the Grapevine Survey, a project of Illinois State’s Center for the Study of Education Policy and the State Higher Education Executive Officers Association. Data can be obtained at https://education.illinoisstate.edu/grapevine/.

HOSPITAL DRUG SPENDING

Three prominent health organizations released a report finding that continued rising drug prices and critical medication shortages can have negative impacts on patient care, with hospitals forced to reduce staffing to cite just one example. The report can be obtained at https://www.aha.org/system/files/2019-01/aha-drug-pricing-study-report-01152019_1.pdf.