



Health Professions Network meets in Milwaukee

The Spring 2011 meeting of the Health Professions Network (HPN), hosted by [VISIT Milwaukee](#), was held in Milwaukee, Wisconsin on April 13-16.

The nearly 40 attendees, representing a wide range of health professions professional associations, education programs, and for-profit partners, networked and shared their views of the various challenges (and opportunities) within their respective professions—from recognition and awareness, an aging workforce, and racial/ethnic workforce diversity to lack of clinical sites for required rotations and health care reform. Attendees included representatives of the following organizations:

Alliance of Cardiovascular Professionals	American Society of Healthcare Human Resource Administration	American Art Therapy Association
American Art Therapy Association	American Assn of Sleep Technologists	American Assoc of Electrodiagnostic Technologists
American Association for Respiratory Care (AARC)	American Association of Medical Assistants	American Association of Medical Dosimetrists
American Massage Therapy Association	American Medical Association	American Music Therapy Association
American Registry for Diagnostic Medical Sonography	American Society for Clinical Laboratory Science	American Society of Radiologic Technologists
Health Education Industry Partnership Council	HOSA	JCAHPO
Jefferson Community & Technical College	McGraw Hill Higher Education	Michigan Health Council
National Athletic Trainers' Association	National Healthcare Career Network	National Society For Histotechnology
National Organization of State Offices of Rural Health	NMTCB	NN2
Section for Magnetic Resonance Technologists	SNMTS	Society for Vascular Ultrasound
South University	Western Technical College	

New meeting format debuts

For the first time, the HPN's long-standing meeting format was revised slightly to incorporate all presentations on the Friday of the meeting, with the business meeting and breakout discussions the preceding day. This provides the opportunity for the HPN to market the Friday presentations as a one-day event for those who may not wish to attend all four days.

Initial response to this change has been positive, and HPN plans to follow this format for its fall meeting in Jacksonville, Fla, on October 12-15. For the Milwaukee meeting, 31 attendees were registered for the full four days, and three chose to attend the one-day summit on health system reform.

Movin' On: Providers, Professional Associations, and Educators Adjust to Health Care Reform

Our one-day event on health system reform, held on April 15, featured a number of interesting and provocative speakers ([all presentations are available on the HPN website](#)).



Keynote speaker **Jon Pryor, MD, MS, MBA**, Chief Executive Officer, Medical College Physicians in Milwaukee, discussed some of the issues facing physicians (and patients) in today's practice environment:

- New physicians are choosing to become employees, rather than putting out a shingle—and they're not going into primary care, for “lifestyle” reasons. Similarly, patients are facing longer wait times for physicians—they're not as many of them, and they're working fewer hours.
- Accountable Care Organizations (ACOs) offer incentives for health professionals to lower costs and improve quality, and could save Medicare \$960 million over three years. Providers are confused, however, by the many metrics and measures that make up ACOs.
- Three simple ideas to improve health care (and health):
 - Make a concerted investment in population health and public health initiatives, and make sure patients have some financial “skin in the game.”
 - Expand the definition of “provider” and increase the use of physician assistants and nurse practitioners, so they can practice “at the top of their license.”
 - Improve efficiency through “lean production” and eliminate waste, which comes in many forms in health care: Wasted motion, transportation, intellect, ideas, inventory, rework, excess processing, waiting time, overproduction (paperwork).

In general, the biggest challenge will be to move the paradigm from one of providing more and more services (quantity) to one of providing high-quality services, where needed (quality). We also need to move the focus from the “art” of medicine to “science” by getting rid of variation in practice and moving to evidence-based medicine and lean practices. Finally, we need to have allied health more involved in leadership roles to help make needed changes to the system.

Ryan Merclean of JBS International, which is working with the Department of Labor, described the development of a competency skills model for electronic health records, which includes foundational, industry-related, and occupation-related building blocks. (In addition, the DOL and Mr. Merclean are working on an allied health competency model; interested individuals are and encouraged to contact him for further details.) These and other planned models can ensure that future health care workers have the right skills for practice both today and tomorrow, and help educators and regulators develop curricula, licensure, certification, and career ladders/lattices.

Claire Dixon-Lee, PhD, RHIA, CPH, FAHIMA, Executive Director of the Commission on Accreditation for Health Informatics and Information Management Education (CAHIIM), described how education programs in this field can ensure competency-based learning outcomes and continuous quality improvement. She also noted that attrition in health information management programs is a significant challenge, which highlights the need to strengthen secondary education and provide students with a strong foundation for college. Broad, integrative knowledge; specialized knowledge; and intellectual, critical thinking, and oral/written skills all play a role in developing a well-rounded individual who can succeed in any field.

Chrisann Lemery, MS, RHIA, FAHIMA, a member of the Board of Directors of the American Health Information Management Association, looked at AHIMA's role in education and building tomorrow's health information management workforce. Through its work in research, policy, standards, and education, AHIMA is a key player in development of “meaningful use” of EHRs



and other large-scale efforts to encourage adoption of EHRs and thereby improve health care quality and lower costs.

Dianne Cearlock, PhD, CEO, National Accrediting Agency for Clinical Laboratory Sciences, looked at the workforce challenges in this field. With the average age of medical laboratory professional at 50, a wave of retirement is set to accelerate again, at which point the “brain drain” will be acute. “An awful lot of wisdom will march out the door over the next 10 years—and that will affect patient care,” she noted. Other challenges include increasing use, and complexity, of clinical laboratory diagnostic tests; growing demands for accountability from the public and federal regulators; and resource and funding cuts hitting many education institutions. The accreditation process should help foster innovation, flexibility, based on local and institutional/community needs, and move from a focus on “inputs” to “outcomes.”

Ron E. Peck, Esq., General Counsel and Senior Vice President, The Phia Group, LLC, gave an update on how insurers are adjusting to health system reform, and considered how the current political climate (and the economic situation) might affect its implementation. He also raised the possibility that insurance companies, based on the new rules and requirements that are part of health reform, may decide to leave the health market as an unprofitable endeavor. Ron addressed options available to employers seeking to sponsor benefit plans (such as self-funding), and mentioned how the classic PPO network structure may be failing, while direct negotiations with payers may be the key to efficient payments in the future.

Jeffrey McAlister, Healthcare Section Coordinator, Milwaukee Area Workforce Investment Board, described his work in our host city to get hundreds of TANF and other low-income participants the ongoing educational and personal support they need to find and retain jobs in health care. With a \$16 million grant from Health and Human Services, the MAWIB is working with local partners to provide career assessment and training opportunities.

Dues structure, management transition among key discussion points for Board

The HPN Board of Directors met on April 13 to look at the HPN’s strategic direction and tasks for the coming year. One of the top discussion items was development of a new dues structure for full members, to be in place by 2012, with a proposed rate of \$300 per year. A key benefit of the proposed structure will be to allow member associations to extend HPN program discounts and benefits to their individual members. More information will be forthcoming within the next few weeks.

Other discussion points of note:

- A remake of the HPN credentialing webinar held late last year, and additional webinars on other topics of interest to our association members.
- Pursuing grant funding and additional corporate partnerships to support our activities
- A one-day summit on best practices in data collection and analysis, to be held in three cities nationwide.
- Transfer to a new management firm, to replace the work of SNM, which handled HPN management until late 2010.
- Development of a new site for students, HPNCareers.com.



- Continued collaboration with other key allied health groups, such as HOSA, Commission on Accreditation of Allied Health Education (CAAHEP), National Network of Health Career Programs in Two-Year Colleges (NN2), and Association of Schools of Allied Health Professions (ASAHP).
- Using the Institute of Medicine (IOM) conference on allied health in May to disseminate our message (HPN president Lynn Brooks is speaking at the meeting).
- Presenting on allied health careers at the June 22-25 meeting of HOSA, in Anaheim.
- Continuing to build our Internet and Facebook presence (the latter has grown to more than 400 followers over the last six months).
- Working with a national meeting service provider to offer a virtual component to our future meetings.
- Redevelopment of the Coalition for Allied Health Leadership (CAHL), a collaborative effort of ASAHP, NN2, and HPN to develop leadership for the future of allied health.

Shout-out to our sponsors!

The HPN extends its sincere appreciation to the hardworking staff of VISIT Milwaukee as well as our other generous sponsors of HPN attendees' lodging, food, transportation, and fun!

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For some great photos and a video from the meeting, be sure to check out a [special site set up by our VISIT Milwaukee hosts](#).

Save the dates: Meeting schedule for 2011-2012

October 12-15, 2011
Fall 2012

Jacksonville, Florida
Oklahoma City, Oklahoma