

MINUTES
Council for Allied Health in North Carolina
Office of the President
Nov. 5, 2003

Thomas Bacon, Chair, welcomed persons attending the Council meeting. He also recognized Allied Health Professions Week and discussed the importance of allied health professions. Following an opportunity for Council members, panel participants, and guests to introduce themselves, the Council approved the September 3 minutes.

Impact of the Allied Health Professions on the Health Care System of North Carolina

Dr. Robert Thorpe, past Associate Chair of Allied Health Sciences, UNC-CH, was introduced as chair of a panel on the *Impact of the Allied Health Professions on the Health Care System of North Carolina*. Thorpe noted that the AMA estimates that approximately 60 percent of all health care providers are allied health professionals. He presented panel members:

Thomas Bacon, Chair; Director, NC Area Health Education
Sylvia Flack, UNC Systems Allied Health Programs Rep.; Dean, School of Health WSSU
Elizabeth Isler, NC Community College System Rep.
Marge Ottofy, Allied Health Professional Rep, Group 6; CMA
Bill Pully, President, NC Hospital Association, Chair of Advisory Board for CAHNC

Flack explained that universities first serve the citizens of North Carolina, particularly through programs in the rural areas of the state. Such programs send students into mostly underserved areas where they can utilize the facilities and clients as a learning lab. The students learn and, simultaneously, clients receive health care. She also reviewed the role of allied health professions in research in the state's universities and colleges. Regarding the continuing need for health care professionals and programs to train them, Flack discussed Winston-Salem State's internet-based clinical laboratory science curriculum and other programs.

Pully spoke on behalf of the North Carolina Hospital Association, which represents 137 hospitals in the state. He said the state's hospitals employ approximately 135,000 people and that there are "clearly thousands" of allied health professionals included in that number. He added that he expects an increase in the demand for allied health professionals due to the state's aging population and influx of retirees. Pully said he applauds the Council's effort to ensure an adequate workforce to meet the population's health care needs in the coming years.

Isler said North Carolina's Community College System includes 59 institutions with an institution located within 30 miles every citizen. The system's purpose is to ensure that

every citizen has access to an education, she explained, adding that all health agencies have access to a major institution that can provide training to prepare allied health workers. She noted that community colleges offer more than 40 types of programs in allied health.

Bacon reviewed the past four decades of the AHEC program and recruitment efforts in North Carolina among health care disciplines. In the 70's, he said, when the focus was on recruiting physicians to rural areas, a statement was made that it would be difficult to recruit physicians unless attention was given to an array of health professionals. During the 90's there was a clear recognition of shortages in allied health professions. Some legislation and funding provided for the expansion of occupational therapy, physical therapy, and speech-language pathology programs.

The last three years have been challenging, but productive, Bacon said. The Council was granted some permanence through the Duke endowment grant. New studies have been done on the need for allied health professionals. And, he said, North Carolina is providing leadership on an array of health care issues, including the need for diversity.

Ottoby reviewed progress and developments for CMAs who, she said, have high ethics, are compassionate, and are team players. She outlined the varied roles the professionals play in health care, particularly on patients' behalf, noting that they do "whatever it takes to get the job done in a cost-effective manner."

As the panel presentations ended, Yoder recognized the important role Thorpe has played in Allied Health Sciences as well as in AHEC and statewide. "You have made a positive influence," he said. "And we expect you will continue to make a positive influence."

In response to questions following the panel presentation, Pully said Bill Atkinson is chair-elect of the NC Hospital Association board and that he anticipates a greater emphasis on providing resources for preparing students entering health care and for ensuring adequate facilities for training. He said individual communities decide on needs and resources, but that he does not think hospitals can afford to leave positions vacant for long. Isler noted that hospitals not only assist students entering health care, but also help with financial support for many training programs.

Lee McLean noted the opportunities offered through programs such as distance learning, adding that programs are "going and growing" in spite of economic pressures.

Frances Apple thanked Ottoby for support of a radiologic science bill on licensure before the NC Legislature.

Wayne Foster noted the strength of professional associations and boards in North Carolina, adding that many from the state are seen as leaders nationally. Ottoby added that North

Carolina is second in the nation in the number of CMAs, with nearly 2,000 in the profession statewide.

Stephen Thomas said a strength of allied health professionals is their responsiveness to health care needs in North Carolina as well as in other states. He noted the usefulness of distance learning which allows hospitals to keep their employees while increasing learning opportunities.

Responding to Susan Dyson's questions regarding which allied health needs are being filled and what professional and allied health needs are greatest, Ottogy said there has been discussion about a CMA program at the community college level. Pully added that survey information has shown a tremendous shortage of radiologic science personnel. He said a quarterly reporting system is being put in place to better evaluate such needs and that in the coming year a regular report on needs probably will be available.

Isler said that while community colleges are often seen as a vehicle for providing training, they also are employers and have a great need for instructors, with the highest vacancy rate among radiologic science instructors. As faculty "age out," a large faculty shortage is developing, she said. Fowler voiced agreement, noting that it is helpful to look at needs in specific areas and how to respond in those areas.

Apple noted that a master's degree is required for community college faculty. But, she said, professionals with a master's degree can earn more outside the community college system. Also, she said, there is a clinical component which must be addressed.

Referring to Pully's statement that hospitals employ about 135,000 people, Yoder said that if allied health professionals make up 60 percent of all health care employees, then 80,000 allied health professionals should be working in hospitals. Pully said he does not think there are that many, but that the association will try to get a count on the next survey. He added that hospitals need to expand because of the aging population and that all professions should consider ways to increase their numbers. Pully said he will do all he can to secure permanent funding for the Council, adding that he is optimistic about the Council and its role in meeting health care needs in North Carolina.

Libby Haile noted the vital role continuing education plays in health care, adding that it is important that employers provide employees time for such programs. Other discussion followed regarding efforts to provide continuing education and professionals' efforts to obtain training without leaving positions unstaffed.

Advisory Board Update:

Bacon said the AHEC board is "very supportive" of the Council's work and will assist in the Council's efforts to obtain permanent funding to supplement the Duke Endowment Grant, which ends in 2005. An important issue, he said, is how to approach the legislature

and what mechanism should be used for funding the Council. Bacon explained that he and Yoder had thought it best to target the 2005 legislative session, but that the Advisory Board felt they should be active in the 2004 session. He added that work should begin immediately.

Yoder said he had met with Peyton Maynard to discuss strategies on the matter. Maynard reviewed the Council's guidelines and said the group's organization should remain as it is. If the Senate and/or House decides it would like to have members sit on the Council, the issue can be addressed at that time. Yoder said discussions are focusing on best strategies for future funding and that the goal is to move ahead with a bill in time for the legislative short session.

Bacon added that it is important for the Council to look into other grants and funding sources, adding that Duke Endowment usually is reluctant to extend grants beyond their three-year commitment.

Recognition of Elizabeth Isler:

Bacon presented a certificate of appreciation to Elizabeth Isler and formally acknowledged her important contribution to the Council and to allied health. He said she has been instrumental in linking hospitals and community colleges and has sought opportunities to create educational programs to meet needs. Isler thanked the Council and noted the significance of its work.

Efforts to Standardize Transfer of Courses:

Regarding efforts to standardize the transfer of courses between community colleges and universities, Isler recommended having an ad hoc committee that would report to the Council. She explained the difficulty involved with transferring credits among institutions and outlined steps taken by the nursing profession to allow credit transfer. Solving the problem would enhance all of the educational developments and, if the Council and university partners are willing to discuss it, the community college system would be more than happy to do so, she said.

Responding to a question on the matter from Yoder, Jim Sadler said a comprehensive articulation agreement was put in place several years ago between the community college and university systems that addressed lower-level general course transfer. That agreement works reasonably well, he said. He outlined other discussions dealing with course transfer, noting that it is a complex issue. For accreditation, each school must have its own philosophy. Taking the uniqueness of each school and trying to standardize it across the state is a challenge, he explained, adding that he would welcome discussion on the issue.

Isler said she had served on the transfer advisory committee as a representative for the community college system when efforts were underway to form transfer agreement for nursing. Although she had been told of the difficulties in working out one standard, with

her insistence a successful program was developed. She said a carrot might be found that would make the process palatable to everyone.

Bacon said some other states have been more successful in transfer programs than North Carolina. “We don’t make it easy for students, many times, to move from one system to the next,” he said. Recognizing a willingness by the Council to address the need, Bacon asked for volunteers to work on the matter. Volunteers were Ned Fowler, Sylvia Flack, Elizabeth Isler, Steve Thomas, and Jim Sadler or another appropriate person. The Executive Committee will discuss this issue and recommend names for a Task Force to work on the problem.

Due to another commitment, Bacon asked Vice Chair Kathy Heilig to assume leadership role for the remainder of the meeting.

Data Committee Report:

Alan Brown gave an update on Data Committee activities. Audrey Godwin discussed the implementation plans for the HIM study.

Frances Apple referred to the radiologic science study just completed and said she accompanied Susan Dyson to the NC State Health Coordinating Council (SHCC). The SHCC, along with the Division of Facility Services, NC Department of Health and Human Services, develops the annual State Medical Facilities Plan, which projects need for specific health care facilities and services including acute care hospitals, technology services, and operating rooms, among others. The SHCC will convene new workgroups/study groups to reevaluate the current methodologies for determining MRI and PET scanners across the state. Apple has spoken with staff at the Division of Facility Services to request that a technologist representative be present on each of the two new committees.

Apple reviewed efforts toward collecting data and to identify needs without creating a cycles of glut and shortage among personnel.

Brown discussed the “new model,” referring to the State of Allied Health Report, and said a formal data committee has not been put in place. He said Council members may be called on to help with portions of implementing the model.

Dyson reported that Erin Fraher presented on the Allied Health Workforce Assessment Projects at the recent meeting of the Association of Schools of Allied Health Professions in Toronto. The presentation focused on the challenges in implementing recommendations of the report and how the allied health professions could better position themselves for effecting change. Erin received several comments from attendees that many other states are facing similar difficulties in assessing allied health. There was interest in possibly conducting a method workshop to highlight North Carolina’s process at a future meeting. Additionally, a paper on the allied health workforce project, written by Dyson, Fraher, and

Sandra Green, has been accepted for publication in an upcoming edition of the Journal of Allied Health.

Regarding the State of Allied Health, Dyson said the upcoming focus will be a comprehensive snapshot of several professions. Every allied health professional association president and employer represented on the Council will receive a survey asking them to rank allied health professions in terms of shortages. She said additional secondary data will be collected from the Bureau of Labor Statistics, American Hospital Association, national professional associations, educational systems and possibly the NC Hospital Association. Collected job vacancies for the selected allied health professions may be tracked across the state for a six-month period as another indicator of a shortage.

Brown said using the new model and secondary data should allow a quicker turnaround of the report and that he hopes to complete two reports annually.

Additional discussion focused on utilizing hospitals' human resource departments as well as health recruiters.

NC Legislative Activity Report:

Patricia Porter outlined the latest session of the General Assembly, which was one of the "shortest long sessions" in history. She said much was left undone. While the General Assembly will next convene on May 10, much happens in committees and subcommittees in the meantime, she said. Topics on which she provided information include:

Committee work on care, treatment, and shelters for animals

Consideration of toll roads

Committee work on the issue of domestic violence

Information on bills at [HYPERLINK "http://www.ncga.state.nc.us"](http://www.ncga.state.nc.us) www.ncga.state.nc.us

A PowerPoint presentation on legislation relating to education

Legislative redistricting

Porter said General Assembly members have been told state funds will be very limited and that discussions will include ways to reorganize and obtain additional federal funding as well as on ways to further reduce spending.

Reese asked whether the Council can add a link to the state's website. Porter indicated it should be possible to do so.

Heilig noted that a subcommittee from the educational malpractice group will look at the issue of increasing medical malpractice insurance. Porter said the focus is on the perceived failure of the medical society to police its membership and that the perception is that if ineffective physicians were not practicing, there would be fewer lawsuits.

Executive Director Report:

Yoder introduced Vivian Lail-Davis as the Council's administrative assistant. He said Andrea Catenaro will continue to maintain the Council's website. Also, he said one of the Council's goals is to market itself more aggressively to the Legislature. He said efforts are underway to obtain permanent funding for the Council, adding that the Advisory Board wants to approach the General Assembly in time for its short session.

Heilig asked the Council to forward suggestions and ideas that the Executive Committee should discuss during its conference call. Yoder noted that the next call will be December 8 at 9 a.m.

In other discussion:

Haile reported that Bill Milner, DDS, President of Access Dental Care, who gave a presentation to the Council in January, has an article on his program in the NC Dental Gazette. She said the program was expanded to Cabarrus County and that one is being considered for Chapel Hill.

Carolyn Taylor said Janice Cutchins' (retired Allied Health representative from Area L AHEC) husband, Lawrence MD, will be installed as president of the N.C. Medical Society. He was the first Area L AHEC director.

January Council Meeting:

The next Council meeting will be Wednesday, January 7, in Board Room 1.

In Attendance**Members, Staff and Consultants:**

Thomas Bacon, Chair; Director, NC Area Health Education
Allison Bordeaux, NC AHEC Allied Health Rep., Wake AHEC
Alan Brown, Data Committee Chair; NC AHEC Program
Rebecca Bullock, Allied Health Professional Rep. Group 3; NC Association of Blood Bankers
Carolyn Cusic, Association for Home & Hospice Care of North Carolina
Susan Dyson, Cecil G. Sheps Center for Health
Sylvia Flack, UNC Systems Allied Health Programs Rep.; Dean, School of Health Sciences, Winston-Salem State University
Ned Fowler, Community College Allied Health Programs Rep., Asheville-Buncombe Technical Community College
Algie Gatewood, NC State Education Assistance Authority
Kathy Heilig, Vice Chair; NC Hospital Association
Elizabeth Isler, NC Community College System Rep.
Rees Jenkins, Past Chair of the Council
Karen Luken, Treasurer; NC Office on Disability and Health
Marge Ottofy, Allied Health Professional Rep, Group 6; CMA

James Sadler, UNC Systems Representative; UNC General Administration
Martha Taylor, Allied Health Professional Rep., Group 5; NC Dental Hygiene Association
Vickie Whitaker, Department of Health & Human Resources
David Yoder, Executive Director

Professional Association Presidents:

Audrey Godwin, NC Health Information Management Association
Tony Ivosic, Easter Chapter CLMA
Marge Ottofy, Allied Health Professional Rep, Group 6; CMA
Carolyn Taylor, President, Blue Ridge CLMA

Guests:

Frances Apple, NC Society of Radiologic Technologists

Judy Ashbaugh, NC Office of Rural Health

Diana Burton, Wake Med

Wayne Foster, NC Speech, Hearing, Language Association

Katie Gaul, Sheps Center

Chastity Glover, High Point Regional Health System

Libby Haile, Greensboro AHEC

Marian Wells Hedgpeth, Sheps Center

Linda Horton, NC Hospital Association

Robin Jarvis, Novant Health

Lee McLean, Allied Health Sciences, UNC-CH

Page Michie, Carolinas Healthcare System

Brenda Mitchell, Allied Health Sciences, UNC-CH

Tara Owens, Duke AHEC

Bud Radovich, CLMA, Franklin Regional Medical Center

Debbie Ramey, Easter AHEC

Joann Spaleta, Charlotte AHEC

Stephen Thomas, School of Allied Health Sciences, ECU

12/2/03