

**Bureau of Health Professions**  
**Second Annual All-Advisory Committee Meeting (AACM)**  
**Tuesday April 21, 2009**  
**General Minutes**

Dr. Mary Wakefield, HRSA Administrator, delivered opening remarks.

- Advisory committees have never been more important and have the opportunity to help shape the discussion around health reform.
- The Obama Administration has made it clear that health reform, and in particular, health workforce issues, are top priorities.
- MW has a strong interest in the recommendations of the Advisory Committees and having a unified voice will add strength and capital to their recommendations.
- There is a need for actionable, cutting-edge, hard hitting recommendations and an aggressiveness to the Advisory Committees advocacy.
- Silos of self-interest among professions are a major barrier to meaningful health reform and the development of interdisciplinary care.
- There is a need for better data about the effectiveness of Title VII and VIII programs, although many of these programs are difficult to evaluate.
- Title VII and VIII are 40 years old. It may be time for a revamping or overhaul. Creative recommendations are needed.

Diana Espinosa, Acting Associate Administrator, Bureau of Health Professions (BHPr), delivered an update on BHPr activities.

- Reorganization of BHPr to create 5 divisions and 3 offices (Medicine and Dentistry, Nursing, Student Loans and Scholarships, Diversity and Interdisciplinary Education, Practitioner Databanks, Office of Shortage Designations, Office of Workforce Policy and Performance Management, and Office of Program Support Staff)
- FY 2009 appropriations represent a large increase in almost every BHPr program. This will lead to a need to rethink how these programs are administered and is an opportunity to innovate.
- President's FY 2010 budget outline specifically mentions health workforce.
- Several updates
  - Nurse education partnership with Robert Wood Johnson Foundation
  - Institute of Medicine (IOM) Oral Health Workforce Summit
  - Demonstration program: Patient Navigator Outreach and Chronic Disease Prevention
  - Rural and Underserved Workforce Summit (planned for Aug. 2009)
- Challenges include the increased need for program planning and evaluation that comes with increased funding, especially through American Recovery and Reinvestment Act (ARRA).
- There is a need to rethink BHPr evaluation procedures in terms of their rigor and relevance.

Dora Hughes delivered remarks on the Administration's perspective on health professions development.

- The Administration sees workforce issues as integral to health care reform and committees, such as the AACM, can help strengthen the argument that workforce issues demand attention.
- Reauthorization of Children's Health Insurance Program (CHIP) and the signing of ARRA are major investments in health care.
- The Administration and Congress are moving very quickly on health reform and any recommendations need to be made visible quickly.
- Four issues with health reform:
  - Insufficient data. There are many conflicting reports and recommendations.
  - Advocacy. There are many stakeholders and getting everyone on the same page would be beneficial. A combined group of diverse health professionals, such as AACM, is a good start.
  - Complexity. Titles VII and VIII are very complex to outside observers. There will eventually be a redesign of this legislation, which needs better support through data, demonstration authority may be helpful, cross-cutting initiative with Dept. of Labor (for example).
  - Workforce: While health reform is a positive step there must remain a consistent focus on developing workforce.

Chairs of the individual committees delivered an overview of the Joint Report on Inter-professional Education and Practice and All-Advisory Committee Recommendations.

- Report and recommendations were drafted by the Executive Committee of the AACM.
- Overview of Recommendations:
  - Reform of current reimbursement structures are vital to health care reform. The current system de-incentivizes primary care and other important clinical and educational care methods, such as preceptoring. Also, proven non-traditional forms of care are often not reimbursed.
  - Evaluation is key to determining the effectiveness of programs. Some Title VII and VIII programs have a strong data base to support their effectiveness while others do not.
  - Demonstration programs in inter-professional care should be developed to test effectiveness and allow flexibility.