

First Annual All-Advisory Committee Meeting Notes Executive Summary

U.S. Department of Health and Human Services
Health Resources and Services Administration
Bureau of Health Professions (BHPPr)
FIRST ALL-ADVISORY COMMITTEE MEETING
May 8, 2008

The purpose of the BHPPr All-Advisory Committee Meeting (AACM) was to provide a venue for the Bureau's four advisory committees to discuss and define ongoing collaboration around common issues, including health professions workforce supply and demand, training, and diversity in order to facilitate greater access to access to primary care.

At their collaborative meeting on May 8th, 2008, all four committees convened together for the first time ever to discuss aligning work products to maximize the impact of resulting advisory committee reports and recommendations. Aligning work products has the potential for addressing and responding to issues that cut across the disciplines. The committees believe that activities and recommendations with co-sponsorship from all four committees would be well-received by the field.

The meeting began at 8:30 am with welcoming introductions from Dr. Marcia Brand, Associate Administrator, Bureau of Health Professions (BHPPr) followed by the *HRSA Update*, given by Stephen Smith, Senior Advisor to the HRSA Administrator. Dr. Brand and Diana Espinosa, Deputy Associate Administrator, BHPPr, then provided the *Bureau of Health Professions Update*. Next each committee chair presented on their committee's priorities, organization, structure and topics. This was followed by an invigorating speech by Thomas E. Hoyer, Jr. entitled *Impacting Federal Policy through Effective Advisory Committee Recommendations*. He spoke about making policy recommendations that can actually be implemented by the receivers of the reports, and that they should be recommendations for which people are willing to work and most importantly to pay.

The Bureau of Health Professions then organized a break-out session with a working lunch to discuss reflections on past committee recommendations. The reflections were then summarized for common themes and presented to the committees for a group discussion after lunch. The discussion found that there were many overlapping and general themes with a lot of potential for committees to collaborate and work on. The compilation of this break out session is attached to this summary.

Next on the agenda were two presentations on interdisciplinary collaborations. The first presentation was done via phone by Dr. Mary K. Wakefield, the Associate Dean for Rural Health and the Director of the Center for Rural Health Sciences at The University of North Dakota. Dr. Mary Wakefield provided insightful explanation of the need for interdisciplinary teams. She cited the need for interdisciplinary collaboration to become a key competency in health professions and cited that this is the path to improving the quality of healthcare. The second presentation was given on site by Dr. Maria Clay, the Director of Clinical Skills Assessment and Education and Co-Director for Interdisciplinary Studies at East Carolina University. Dr. Clay drew from her personal experiences in implementing an interdisciplinary health care model at her own institution.

She also offered insight into expanding the idea of interdisciplinary to reach out beyond health care, but into professions completely unrelated to healthcare, i.e., interior designers for hospitals and engineers for healthcare equipment, to increase the quality of care to patients.

Before ending the meeting, the Bureau organized another small group discussion on opportunities for future collaboration. The compilations of these thoughts are attached to this summary. Closing remarks were then offered by Dr. Brand to both thank and congratulate the committee members for this incredible collaboration. The day's meeting resulted in the learning of how to make recommendations that make a difference, and how committees can come together to make those recommendations across the disciplines, as well as enough ideas to fuel the next possible AACM meeting.