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Praxis Newsletter

SUNY @ Buffalo

Department of Family Medicine

Spring 2009

Since 1970



Dr. Thomas C. Rosenthal
Professor and Chair

Disruptive Innovation

Can I, a family doctor, learn from IBM and from Kodak? How long would it take me to switch from large mainframe to personal computer technology? Would I have comprehended that Americans really would like to view their photographs on a 2-inch screen and then print only the ones they wanted themselves? How long will it take me to

Cogitations from the Chair

appreciate the impact that the retail clinics in Wal-Marts or the boutique services of walk-in MRIs, mammograms, bone centers, diabetes care have on the demand for my services? Is it yet obvious to my staff how improved Emergency Department service in my local hospital has changed the type of acute visits I see in the office, or even how I handle the urgent phone call?

Every population-based study done since 1980 has concluded that primary care is essential for quality, access, and health of a population. This finding is consistent regardless of the population unit of care (nation, state, province, region or census tract), and regardless of the type of outcomes studied (i.e., death rates, quality of life, screening rates, appropriate meds, etc.). Yet, am I providing the service patients want? Can I improve service while meeting my personal standards for quality?

The present reimbursement system has encouraged all doctors to see more patients and perform more diagnostics. Our disruptive competition will be from entities focused on service. Reimbursement models in the United Kingdom and North Carolina have demonstrated that paying family doctors to really manage care inside and outside the office while reporting on outcomes has improved health, decreased costs and increased patient satisfaction. It may be as disruptive as the PC or digital photography. How will I respond?

Christensen C, Bohmer R, Kenagy J. Will disruptive innovations cure health care?. Harvard Bus Rev. 2000;Sept.20.

Rosenthal, TC. The Medical Home: Growing evidence to support a new approach to primary care. J Am Board Fam Med. 2008;21(5):427-440.

UBFM at Sheehan Health Network

The Department of Family Medicine is pleased to announce a new relationship with Sheehan Health Network (formerly Sheehan Memorial Hospital). As part of this new agreement, two of our faculty physicians, Drs. Lorne Campbell and Richard Blondell, will provide Addiction Medicine services at Sheehan.

Sheehan is a New York State not-for-profit hospital that specializes in Substance Abuse Services. Sheehan's Alco-

hol and Chemical Dependency Program consists of a 10-bed inpatient medically managed detoxification program, a 30-bed inpatient rehabilitation program and a large area for an intensive outpatient chemical dependency (CD) counseling program. Immediately adjacent to the outpatient CD treatment facility, there is the "Center for Clinical Addiction Education and Research," where clinical research activities will take

place alongside of outpatient addiction medicine services. Research-related space is available for patient interviewing, toxicology screening, other outcome ascertainment, and data management. The programs that are available at these Sheehan facilities will be a valuable resource for our faculty and resident physicians who find that CD problems are common among the pa-

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Chronic Illness Demonstration Project

The UB Family Medicine Research Institute and Gold Choice have received a 3-year, \$1.8 million contract with the NYS DOH to implement a Chronic Illness Demonstration Project (CIDP) to provide multiple services for improved quality of care at reduced cost. 300 Gold Choice patients will be randomized to the demonstration project and 300 will receive usual care. Services for the demonstration project patients will in-

Administrators:

John S. Taylor, MBA - Director of Development

Linda Kahn, PhD - Director of Evaluation

Diane Berdine - Director of Gold Choice

Chester Fox, MD - Medical Director

Laurene Tumiel-Berhalter, PhD - VP for Research and Head of UB Family Medicine, Inc.



Residency Department News

- We have reproductive health funded again this year. Over \$100,000 per year. Dr. Michael Zions is the PI.
- Dr. Zions also secured 200 LARC (Long Acting Reversible Contraceptive) Devices. "Our patients are getting free IUDs. Our residents are learning how to put them in. The value of these IUDs is estimated at \$115,000. This prevents unintended pregnancy for up to 10 years, depending on the device selected. If people have no insurance, the insertion fee is \$130 for 5 or 10 years of contraception," Dr. Zions stated.
- Dr. Zions presented at the AFMRD (Association of Family Medicine Residency Directors) in 2008 and was selected to present again.



John Taylor, MBA, Linda Kahn, PhD, Diane Berdine, Chester Fox, MD & Laurene Tumiel-Berhalter, PhD

clude a Practice Enhancement Associate (PEA) for the patient's doctor to help with preventive service and chronic disease care reminders, a visiting nurse to the home to measure blood pressure, weight, glucose, etc. and a 24-hour nurse available by phone for any questions. The two groups will be compared in terms of quality and cost at the end of three years.

Don't think of organ donations as giving up part of yourself to keep a total stranger alive. It's really a total stranger giving up almost all of themselves to keep part of you alive.

~ Author Unknown ~

UBFM at Sheehan Health Network, con't.

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tients at our Family Medicine outpatient offices.

Sheehan delivers 38% of the drug and rehabilitation services and 44% of the inpatient substance abuse services that are provided each year in Erie County. The staff includes physicians, nurse practitioners, registered nurses, social workers, certified chemical

dependency counselors and other health-related clinical staff.

The vision we share with the Sheehan administration is to develop a center of excellence for treating patients with substance and addiction problems, and train primary care physicians through mini-fellowships across New York state in the care of their patients with addictions.

**I learned a long time ago that
minor surgery is when they
do the operation on someone
else, not you.**

~Bill Walton ~

Since 1970

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Curriculum on Disabilities

The Office of Pre-Doctoral Education of the Department of Family Medicine is currently implementing a curriculum for educating medical students to care for patients with disabilities. Despite the prevalence of disability in society, people with disability have been identified as a vulnerable, at-risk population subject to healthcare disparities. Barriers to receiving healthcare are multi-factorial. Some include physical obstacles to care including inaccessibility of facilities and equipment. Perhaps more importantly, deficiencies in knowledge, attitudes and

skills of healthcare providers regarding care for patients with disabilities have been identified. Calls have been made internationally, nationally, and locally to address these deficiencies by educating medical students about caring for patients with disabilities.

The curriculum is being woven into the four years of medical education. Our department has partnered with community agencies serving patients with disabilities as well as other UB clinical departments in developing and delivering this curriculum. Elements of the curriculum include: supervised clinical experience at facilities providing primary care to patients with disabilities, seminars on the social, economic, and legal context of caring for patients with disabilities, meetings with people with disabilities and their families/caregivers, focused

clinical instruction for improving clinical and communication skills required for caring for patients with disabilities, and research experience exploring the provision of community-based care for patients with disabilities.

Development and implementation of this curriculum was funded by a grant from the Health Resources and Services Administration of the U.S Department of Health and Human Services.

If you would like more information about this initiative, please contact the project director:

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**One thousand Americans stop
smoking every day - by dying.**

~Author Unknown ~

"Short-Sleepers" Risk Developing Diabetes

(Excerpted from UB News Services published 3/12/09)

A study shows that people who sleep less than six hours a night during the workweek are 4.5 times more likely to have elevated levels of blood sugar than those who slumber 6-8 hours.

"About 25% of people who have impaired fasting glucose -- a reading higher than 100 -- will at some point develop Type 2 Diabetes, which is associated with many complications, including heart disease and premature death," said Lisa Rafal-

son, Ph.D., a National Research Service Award (NRSA) Fellow in the UB Department of Family Medicine and first author on the study. She also is a Research Assistant Professor in UB's Department of Social and Preventive Medicine.

Results showed that "short-sleepers" had a significantly increased risk of progressing from normal glucose levels to pre-diabetes, compared to those who slept 6-8 hours nightly. Sleeping an average of

more than 8 hours a night had no significant effect on glucose levels, results showed.

"This study supports growing evidence of the association of inadequate sleep with adverse health issues," said Rafalson. She suggested that during annual "well" visits, physicians should discuss sleep habits with their patients, along with diet and exercise and other lifestyle issues that are important to long-term health.

Praxis Newsletter

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Please consider a gift to the Department of Family Medicine Endowment Fund or the Adelaide & Brendan Griswold Professorship in Health Disparities (formerly the Family Medicine Research Fund).

To make a gift simply mail your check (payable to the University at Buffalo Foundation, Inc.) to UB Department of Family Medicine, Attention: Janet Ingalsbe, 462 Grider St., CC-150, Buffalo, NY 14215.

Online: giving.buffalo.edu. Sim-

ply click "Make A Gift Online" and specify that your gift go to the Department of Family Medicine Endowment or the A&B Griswold Professorship.

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