



The RCCI Newsletter is a Publication of the IU School of Medicine Relationship-Centered Care Initiative.

# The Total Package: A Skillfull Compassionate Doctor

By Cindy Fox Aisen, IUSM Office of Public and Media Relations and the Regenstrief Institute. This article was originally published January 22, 2009 as an IU School of Medicine Press Release.

By Cindy Fox Aisen

Patients and their families want physicians who are gifted in diagnosis and treatment and who are caring individuals with the interpersonal skills needed to communicate complex information in stressful circumstances.

A new study in the January issue of **Academic Medicine** shows training physicians to be humanistic is feasible and produces measurably better communicators.

"Humanism in medicine isn't about sitting and singing 'Kumbaya;' it is about taking the individual patient's concerns and values into account in his or her treatment," said study co-author Richard Frankel. "Those values are clearly linked to higher quality of care and reduction of medical errors yielding safety improvement." Frankel is a professor of medicine at the Indiana University School of Medicine and a Regenstrief Institute research scientist.



"The Doctor" by Sir Luke Fildes (1844-1927) shown at the Tate Gallery in London.

The study was conducted at five very different medical schools -- Emory University School of Medicine, IU School of Medicine, the University of Rochester School of Medicine, Baylor College of Medicine and the University of Minnesota Medical School -- rather than only one institution. The authors believe their findings are generalizable throughout American medical education.

The 2001 Institute of Medicine report, **Crossing the Quality Chasm: A New Health System for the 21st Century**, highlighted the benefits of patient-centered humane care that is respectful of and responsive to patients'

needs, values and concerns.

The concept of humanism in medicine and patient-centered care predates the 21st century. In the 1920s physician Francis Peabody wrote that "the secret of care of the patient is caring for the patient," a humanistic concept that in the intervening years has become overshadowed by a preoccupation with technological advances in medicine, the same technology that resulted in the development of

antibiotics and thousands of other life-saving drugs, sophisticated scanning devices and untold number of vital therapies.

"Traditionally medical school curricula have focused on the pathophysiology of disease while neglecting the very real impact of disease on the patient's social and psychological experience, that is, their illness experience. It is in this intersection that humanism plays a profound role," said Frankel, who is a medical sociologist.

"As educators, we aim to foster the development of future physicians who are competent both technically and interpersonally. Patients, their families, and the public expect no less of us. This study suggests there are various faculty development processes that will allow us all to pursue these aims more effectively," said study co-author Thomas Inui, IUSM associate dean for health care research and Sam Regenstrief

"As educators, we aim to foster

### Inside this issue:

Relationship Building	2
Service-Learning History	3
Student Outreach	3
Engaging Reflection	4-5
GHAS	6
Cont'd Page 2 Calendar	6

## Relationship Building: A Medical Student's Reflection

By Stephanie Nothelle, MS III, RCCI Student Liaison, Indiana University School of Medicine

The relationship between the regional centers and the Indianapolis campus is a favorite topic at IUSM. As a center student who recently moved to Indianapolis for my third year, it is a subject near and dear to my heart.

Previously, I felt like there really wasn't much of a reason to plan statewide events to bridge the campus communities. To me, it meant doing an activity that made us feel more like grade schoolers than professional colleagues and then going back to life as usual in our center.

Luckily though, during my first year, students from my center and I decided to join other IUSM students on a Hurricane Katrina relief project. At the time it seemed like a great opportunity to give back to a community in need, but it ended up being a critical step towards a successful third year transition.

My friends from the Katrina service-learning project were familiar smiling faces during those first awkward weeks transitioning to the Indianapolis campus, especially in groups where I was the only "center kid.". Additionally, they were helpful when I wanted to know what student interest groups were available or who to talk to about various activities.

Looking back, I think it should be strongly encouraged (and maybe even required...gasp!) for center students to participate in statewide events. It is amazing to me how much easier it was to feel integrated and get started with activities I am interested in just because I knew a few extra people.



*IUSM Katrina relief project builds relationships.*

### What is OMSL?

#### *Office of Medical Service-Learning*

- OMSL promotes a lifelong commitment to community service through innovative service-learning experiences.
- OMSL stimulates, facilitates, and coordinates the application of service concepts in community settings, effectively providing a "learning laboratory" with advanced service-learning opportunities.
- OMSL complements the traditional medical education curriculum in order to prepare tomorrow's physicians for the public responsibilities as advocates of the health and well-being of the community.

Interested in joining??? Email one of the chairs:  
Katie Sullivan ([kjsulliv@iupui.edu](mailto:kjsulliv@iupui.edu)) or Zach Tempel ([ztempel@iupui.edu](mailto:ztempel@iupui.edu)).

Source: <http://medicine.iu.edu/body.cfm?id=5316&fr=true>

### The Total Package: Cont'd From Page 1

Professor of Health Services Research. Inui also is president and CEO of the Regenstrief Institute.

Other authors of the study, which was funded by the Arthur Vining Davis Foundations, are William T. Branch Jr. of Emory University; Catherine F. Gracey of the University of Rochester; Paul M. Haidet of Baylor College of Medicine; Peter F. Weissmann of the University of Minnesota Medical School; Paul Cantey, formerly of Emory and now of the Centers for Disease Control and Prevention; and Gary A. Mitchell, formerly at the IU School of Medicine, now with the American University of the Caribbean School of Medicine.

# IU School of Medicine Office of Medical Service-Learning: A History

By Stephen Kirchoff, Director  
Office of Medical Service-Learning,  
Indiana University School of Medicine

Our personal and professional histories are often interwoven with those of the organizations we serve. This has certainly been the case for three individuals who had the opportunity to found and develop the Indiana University School of Medicine (IUSM) Office of Medical Service-Learning (OMSL). As a result, hundreds of IUSM students have further developed a lifelong commitment to community service through innovative service learning experiences sponsored by the OMSL.

## Spring “House Calls” Begins

In 1989, Dr. Patricia Keener, a member of the IUSM faculty, was appointed the medical director for the Indianapolis Campaign for Healthy Babies (ICHB), a public-private initiative to address the city’s high black infant mortality rate. As a result of the ICHB, the IUSM curriculum changed to reflect an increased emphasis on cultural competency. This curricular change prompted medical students to get more involved in the community.

*“This curricular change prompted medical students to get more involved in the community.”*

Under Dr. Keener’s guidance as founding director, the OMSL was born when Spring House Calls, the first student-initiated and student-run service learning project, was formed in 1996 and became the model for future projects. By 1999, the rapid growth of student projects and the extraordinary number of student participants resulted in the OMSL being officially recognized by the IUSM.

## Community Service in College is Springboard

As a business manager in the Department of Pediatrics beginning in the 1990s, I had the good fortune to work closely with Dr. Keener and the medical student leaders to shape the OMSL and support its growth to the current 16 projects. My own community service journey began as an Indiana University undergraduate in Bloomington, where I served as president of the Alpha Phi Omega National Service Fraternity chapter. Years later, that experience would blossom into a focused interest in nonprofit governance and management, which led to opportunities to further serve the community as a nonprofit board member. Serving as OMSL administrator and director has

afforded me an opportunity to similarly support the community service ethic of these future physicians.

## Involvement Began in High School

Dr. Molly Bozic began volunteering in Dr. Keener’s office in 1990 as a high school student. After graduating from the University of Notre Dame in 1997, Dr. Bozic worked in the OMSL office until she began medical school in 2002. As an IUSM student, she held numerous OMSL leadership roles, including as chair of the Student Advisory Group—the OMSL student-run forum. Currently, as a pediatric gastroenterology fellow on the IUPUI campus, Dr. Bozic continues to champion the OMSL development, focusing on ways to engage medical residents as student advisors.

Dr. Patricia Treadwell, the current faculty director (and long-time OMSL advisor) and I will be collaborating with the IUSM regional center faculty, staff, and students in the coming months and years to further develop service learning experiences for all IUSM students. Together we will all continue to foster the students’ lifelong commitment to community service.

## IUSM Students’ Outreach



*Rock for Riley, an annual benefit concert sponsored by the Office of Medical Service-Learning, raises money for Riley Hospital for Children, Indiana's only comprehensive children's hospital. The concert features national music acts performing for large local audiences.*

*Rock for Riley was created and is managed entirely by Indiana University School of Medicine students. “Beyond our involvement as medical students, we are looking to take part in Riley's very important mission of providing the highest-quality medical care to all Indiana children, regardless of their family's ability to pay.” For more information visit: <http://www.rockforriley.org/>*



## Engaging Reflection in Health Professional Education

By Janet Hortin, MD, Indiana University School of Medicine - Lafayette (on the campus of Purdue University) Faculty Member  
Photos courtesy of J.T. Geneczko, MD

I was intrigued by the conference title, “Engaging Reflection in Health Professional Education and Practice” and by the opportunity to hear Dr. Arthur Frank speak again. This interdisciplinary, international conference with nurses, physician educators, occupational and physical therapists from Canada, the UK, Australia, and the US was held May 13-15, 2009 in London, Ontario. The conference celebrated the work of educational philosopher Dr. Donald Schon, author of The Reflective Practitioner. I presented a poster about our work at Indiana University School of Medicine – Lafayette called: House Calls: Fostering Reflective Practice in the first year of medical school. The following is a portion of this presentation.

### **HOW DO I LISTEN?**

**How**

**Do I**

**Listen to others?**

**As if everyone were my Master**

**Speaking to me**

**His**

**Cherished**

**Last**

**Words.**

**Hafiz, Sufi Poet  
14<sup>th</sup> Century**

### **Reflection of Visits**

For the past eleven years, Indiana University medical students at the Lafayette branch campus have been making house calls as part of their introduction

to clinical medicine class. During five biweekly home visits they form a respectful relationship with a family with chronic health concerns. We use a strength based model that empowers students and families to form a caring partnership with each other. Reflection, both through small group discussion and written assignments, plays a key role in this service-learning curriculum.

Students practice caring presence, empathic listening, verbal and non-verbal facilitative communication behaviors, and useful, non-medical service such as shopping, and transportation during these house calls. I use small group reflection sessions held every other week to reinforce ways of mindfully being present for one another. Poetry, short narratives, and art works are used to transport the students to a welcoming space where they can explore how to develop caring, respectful relationships across cultural and generational difference. Robert Coles’ A Life in Medicine, is used as a resource for provocative reflection and discussion about professionalism and ethics.

### **Stories Bring Understanding**

Many of the themes in reflective writing assignments and small group

*Often, before we began “house calls,” Dr. Williams was quick to tell his young listener to “look around, let your eyes take in the neighborhood—the homes, the stores, the people and places, there waiting to tell you, show you something.”*

**Robert Coles M.D.**

**from House Calls with William Carlos Williams**

**by Robert Coles and Thomas Roma 2008**

reflection sessions center around the house call experience. Stories abound. Students have a front row seat for seeing how biological, psychological, social, spiritual, and economic resources impact the state of well-being of their mentor family. A few examples of issues we deal with are: combating caregiver burnout; transitioning from home care to an assisted living; estrangement from family members; coping with the loss of a spouse; and use of herbal or complementary therapies. A number of our families are poor and have limited education. Through reflection, we come to understand some of our personal biases and challenges in dealing with people from different backgrounds.

We foster a sense of trust and mutual support within the class of 16 students so that we attend to one another as well as to the mentor families. The rigors and stressors of the medical life are discussed along with self-care topics such as coping with failure and mistakes.

### **Reflection as a Habit**

Written reflective activities include assignments about the healing power of touch; elements of a healing

## Engaging Reflection

Cont'd From Page 4



***House calls are a doorway into the mindful practice of relationship-centered care.***

*“critical self-reflection enables professionals to listen attentively to others’ distress..., and clarify their values so that they can act with compassion, technical competence, presence and insight.”*

Ronald Epstein, “Mindful Practice”, *JAMA*  
Volume 282: 833-839, 1999

environment; walking in your neighbor’s shoes for a day; assessing your strengths and the mentor families’ strengths; assessing networks of support within the community and family; and painting a word picture of the mentor family. These assignments are submitted on-line allowing for prompt feedback and dialogue with the instructor. The students select their best written work for an end of semester portfolio to demonstrate the trajectory of their personal and professional growth. During individual conferences, the portfolio is presented and discussed with the instructor.

This project known as “The Good Neighbor Mentoring Project” seeks to reinforce habits of reflection and attentive human engagement within the medical school. Safe, welcoming spaces for reflection must continue throughout the medical curriculum if we are to, as Arthur Frank writes, “renew a sense of generosity in medicine.”

**“Safe, welcoming spaces for reflection must continue throughout the medical curriculum if we are to, as Arthur Frank writes, ‘renew a sense of generosity in medicine.’”**

## The Sixth Vital Sign

*Hale widower still living on his own farm.  
Remarkable for eighty-nine, they marveled  
When he came in the ED, winded and anxious,  
His ankles pitting in their eager grips.  
Nodding expertly, they placated, it’s  
Not unexpected at his age. And so began  
The assembly line of triage nurses and attendings  
Assessing everything but his tormented eyes,  
Dutifully reviewing all his parameters,  
Including JCAHO’s obligate fifth vital sign.  
“Nope, no pain, just can’t get around  
These days. Couldn’t mow the lawn  
Without stopping twice for a breather,” he says.  
The weeds are getting the better of the garden, too.  
Such a simple thing to fix, it seemed.  
So, they started him on the second pill.  
But in all the numbers, scales and questions  
The important data went unmeasured--  
The slowing down, the yard unmowed  
The son-in-law’s magnanimous offer  
To shelter him in unfreedom--  
No one asked about the sixth vital sign,  
That immeasurable sum of all that matters--  
What gives you life? What’s important?  
This he reveals to one last physician.  
Picking my way through his overgrown lawn  
Past the withering tomatoes plants he  
Lacked the energy to coax into  
Fecundity this growing season,  
Now watered with his blood,  
The 410 next to him.  
I conduct the final house call  
And read his departure letter.*

Michelle P. Elieff, IUSM 1999  
Pathologist and Past Editor, RCCI Newsletter

## Gold Humanism Honor Society 2010 Members Announced

The Indiana University School of Medicine chapter of the Gold Humanism Honor Society (GHHS) was established as a means of formally recognizing medical students who demonstrate exemplary behavior that promotes humanism in medicine. Approximately 15% of the graduating class was selected through a process including peer and faculty nomination followed by a thorough review of each student's required essays, clerkship comments, and record of community service.

### Class of 2010 members of the IUSM Gold Humanism Honor Society:

Margaret Allen  
Stella Asuquo  
Jennifer Baenziger  
Mark Baker  
Amber Brannan  
Timothy Campbell  
Abigail Donnelly  
Jillian Erb  
Isaac Fehrenbacher  
Benjamin Felix  
Valerie Fenneman  
Laura Hinkle

John Holden  
Emily Horvath  
Elisa Illing  
Matthew Kardatzke  
Colleen Kiernan  
Hayley Knollman  
Laura Kruter  
Andrew McDaniel  
Emma Nordstrom  
John Thomas O Malley  
Ashley Overley  
Allison Pernic  
Raymund Ramirez  
Kaitlin Rice  
Caroline Rouse  
Michael Schacht  
Vlad Simianu  
Rachel Smith  
William Strong  
Katherine Sullivan  
Marissa Vawter  
Michael Veronesi  
Daniel Yelfimov  
Kyle Yoder

For more information about the induction ceremony, contact Angela Graves, [angdgrav@iupui.edu](mailto:angdgrav@iupui.edu) or (317) 278-1762.

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*The stories you read here show how relationship-centered care is alive and well at IU School of Medicine. While the Fetzer Institute grant which created the Relationship-Centered Care Initiative nears its end, many seeds were planted which are continuing to grow. Our work is being disseminated nationally through conferences, personal contacts, and our students.*

*I invite all readers of the newsletter to submit stories of encouragement, hope, and surprise.*

*Appreciatively,  
Janet Hortin, MD  
IU School of Medicine - Lafayette  
(on the campus of Purdue University)*

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### International Communication Conference on Healthcare 2009 (ICCH)

## Workshop News: Changing the Culture

Earlier this month a group of faculty from IU, University of Virginia and the University of Wisconsin presented a workshop entitled, "Changing the Culture of Academic Health Centers One Relationship At A Time," at the International Communication Conference on Healthcare 2009 (ICCH) in Miami Beach, Florida, USA, October 4-7, 2009. All the faculty had participated in one or more of the national immersion conferences put on by the RCCI. Shobha Pais, Family Medicine IUSM hosted an immersion session on "compassion fatigue". Natalie May from UVA presented a session on "using appreciative inquiry to change organizational culture". Chris Stillwell, from Wisconsin presented on "understanding culture through participant observation". Rich Frankel IUSM, who organized the session, presented on "the use of narrative to change organizational culture." Participants found the session lively, interactive and useful. The same faculty also hosted an interest group meeting on "Relationship Centered Care," which drew a number of interested participants at the conference.