MSSCNEWS

MSSC Peer Mentoring Program strives for counsel and collegiality

Practicing medicine brings its share of rewards and stress, and the MSSC is launching a new Peer Mentoring Program to help provide doctors a way to confront the challenges of their chosen profession.

"Peer mentoring is a tremendous way for doctors to improve both performance and their job satisfaction. The literature has found that this kind of 'coaching'

helps both mentor and mentee," said Dr. Estephan Zayat, MSSC president. "Mentors have helped me greatly during my career, and I encourage members to consider the program, whether they're an experienced physician or one just starting practice. Both have a lot to gain."

To get started, MSSC is looking for 20 physicians (10 newer doctors to match with 10 veteran ones) to take part in a pilot program. As guidance, peer mentoring is being defined as

"an intentional one-on-one relationship between two practicing physicians for the purpose of providing/ receiving knowledge, socialization, career support, and psychosocial support."

A few essentials:

- · Participation is optional and confidential.
 - Participants will complete a very brief questionnaire.
 - Physicians are matched based upon reported interests and anticipated outcome of participating in the pilot.
 - The two peers will be asked to make weekly contact with one another for six weeks.
 - They will receive an outline on the purposes of the program and suggestions about how to get the most out of it.
 - Participants will be asked to provide feedback on the program at the end of six weeks.

PEER MENTORING PROGRAM

Interested?

Fill out the "I'm Interested" form recently sent via email or call or email Denise Phillips, 316-683-7558 or denisephillips@med-soc.org.

October

2016

Anne Nelson: Project Access' first and only director to retire soon



Anne Nelson, Health Care Hero

Anne Nelson launched Project Access at the MSSC 17 years ago, and she's now planning another, more personal venture: retirement.

Nelson told the board of Central Plains Health Care Partnership, the nonprofit

organization that administers Project Access and its other programs, that she plans to retire on or before March 1 of next year. The CPHCP board and the



MSSC are taking resumes and seeking candidates through mid-November, with the intent of having a new executive director hired sometime in January.

"Anne has been the ideal voice of Project Access since its inception, and she

will be sorely missed within Central Plains, the MSSC and the community," CPHCP president Dr. Tom Bloxham told

continued on page 4

Wesley family medicine residents get education on 'Being Mortal'

A bout 20 family medicine residents, faculty and staff recently gathered during didactic sessions in the basement classroom of WesleyCare Family Medicine clinic to watch "Being Mortal," the documentary where Boston surgeon and writer Atul Gwande explores how doctors discuss end-of-life issues.

The residents reacted much the way other Wichitans did to the stories of how patients and their doctors handle the difficult conversations: with focus, some moist eyes, and occasionally nervous laughter.

During one particularly hard conversation in the film, when a neuro-oncologist struggles to tell a patient, Bill, of a setback, one resident leaned close to another and shared, "Can you

and occasionally

rd conversation
cologist struggles
ack, one resident
shared, "Can you
continued on page 2



Wesley family medicine residents and faculty discuss their experiences and approaches to discussing end-of-life issues with patients.

Physicians
who care for ...
our patients,
our community,
and our profession.

MEDICAL SOCIETY of SEDGWICK COUNTY

www.mssconline.org 1102 S. Hillside Wichita, KS 67211 (316) 683-7557

October President's Message

by Estephan Zayat, MD —

dvances in technology seem to permeate our lives: the smart phone, the smart watch, the smart camera, the smart car, and the list goes on. How did we survive before these

"essential" gadgets made us so smart? Enter Watson – IBM's foray into medicine.

Many of you may know about Watson from the game show "Jeopardy." In February 2011. Watson was able to beat the champions of "Jeopardy" at their own game. Watson "went home" with the million-dollar prize!

Soon thereafter, some potential applications were explored for Watson in the medical field, and now it seems they are ready to be applied on a large scale. Watson – the supercomputer - can be accessed via an app! It can read all the data from the patient's electronic medical record, crunch the

information from millions of articles and studies and then provide a list of likely diagnoses along with probabilities and options for therapy. The physician can then use that information to take better care of the patient. There is already talk of giving patients direct access to Watson in the future. A patient could connect with Watson directly and provide complaints and information and thus become a more empowered decision-maker.

> These scenarios can be seen as a triumph of human brain and ingenuity. They can also be viewed as a horror movie. The truth will depend to a great extent - as with all inventions. perhaps - on how this amazing technology is incorporated into real medicine.

At the end of the day, however, patients "don't care how much you know, until they know how much you care." Watson the computer (and definitely not Dr. Watson the detective) may have far more information on hand than any doctor can ever know, but genuine physician care and the human touch will always prevail.

Share your patient stories

Most every physician has a story - or several - of a memorable doctor-patient encounter. These stories can be enlightening to others and gratifying, even therapeutic to put into writing. Share your story, and we'll include them in the newsletter in months ahead. Send them to denisephillips@ med-soc.org.

'Mortal' continued from page 1

imagine doing that every day?"

A goal of the residents' session was to illustrate, through the film and follow-up discussion, the importance and timing of end-of-life conversations, of "grappling with those situations where we couldn't solve the problem," as Gwande puts it, so that doctors and patients alike don't end up concluding that "we should have started earlier" on these conversations.

"I never had anything like this presented when I was in training," said Dr. Barbara Coats, the TPOPP Wichita member who spoke at the session along with Dr. Terry Merrifield. "And when I got out, I wish I had."

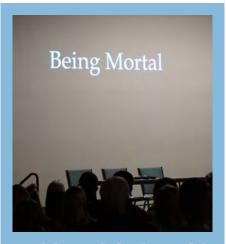
Thanks to a grant from John and Wauna Harman Foundation, in partnership with the Hospice Foundation of America, "Being Mortal" has been shown about 10 times since mid-June at churches, senior centers and retirement homes, with more planned. The screenings have been well received, drawing more than 700 people, often older Kansans with great stakes in such discussions. Specialized sessions have been or will be held for Harry Hynes Memorial Hospice, Via Christi Family Medicine Residency, KUSM-Wichita and the Wichita Estate Planning Council, a group of financial planners.

Wichita is one of 90 communities nationwide holding the screenings, which are presented by TPOPP Wichita and the

MSSC. The events provide an ideal format for sharing information about TPOPP, for Transportable Physician Orders for Patient Preferences. The pink forms are a doctor's

order that helps patients retain control over medical care at the end of their lives, allowing them to clearly state what care they do and do not want. The forms can go into a patient's personal records and tell emergency medical personnel and other providers whether to do, for example, CPR.

The Oct. 5 session for first-, secondand third-year KU family medicine residents was the first one directed primarily at the



UPCOMING SHOWINGS

Saturday, Oct. 22, 1:15 p.m. Augusta Public Library, 1609 State St.

Tuesday, Oct. 25, 1:15 p.m. Life Ventures, East Heights UMC, 4407 East Douglas, East Transept

Thursday, Jan. 19, 2017, 6 p.m. Grace Presbyterian Church, 5002 E. Douglas

other end of end-of-life conversations doctors - instead of patients and families.

After the screening concluded, residents and faculty gathered in small clusters to discuss end-of-life conversations and planning, and the difficulties involved. One resident shared how she had started discussing the issue with elderly patients, and the challenges of bringing together a family to try to ensure consensus.

Faculty member Dr. David Miller admitted that time limitations can hinder talks, that "I don't do it nearly as well as I should" and that it's challenging to be realistic with patients without "taking away hope." Fellow faculty member Dr. Mary Boyce told residents that, as a young doctor, she sometimes thought, "I'm not old enough to tell people they are dying."

Drs. Coats and Merrifield shared research pertinent to end-of-life care, including about CPR and tube feeding, and practical advice on how to discuss matters with patients and families. Language is very important, Merrifield said, noting how patients often misunderstand what "aggressive care" means and how phrasing such as "there's nothing more we can do" is not only inaccurate - palliative care is treatment – but also strips away hope. An awareness of cultural differences is beneficial, too, as some cultures don't believe in telling a loved one they are dying.

Residents and faculty then further discussed how to approach patients. One strategy, faculty Dr. Ruth Weber said, is advising patients "it's really good for family to know what you want." Another effective ice-breaker is to simply tell patients: "It's my job to bring it up."

Health ICT's wellness message hitting multiple fronts

HEALTHY BITES, HEALTHY WORKSITES

■ ealth ICT is using several new approaches in its goals to increase access to healthy foods and beverages and promoting active lifestyles in the area.

A new tool, "Healthy Bites, Healthy Worksites," is a guide for institutions and employers, physicians' practices included. to learn more about the process of implementing healthy food and beverage policies. It contains sample policies to ensure vending, meetings and events contain healthy food options.

"We want to share this tool where people live, learn, earn and play," said Shelley Rich, Health ICT project coordinator.

Rich and fellow Health ICT staff are available to visit worksites and consult about implementing wellness and other programs. For example, Rich is working with a food suppliers for the Wichita Sports Forum – which draws athletes and their families for extended periods – to bring more healthy options to vending machines there.

The Kansas Academy of Family Physicians is an example of an organization working to

model healthy options. KAFP is considering a policy that includes serving healthy foods and beverages at its annual meeting and conference,

putting into action the advice that doctors often give patients, Rich said.

Other wellness initiatives include:

Working with the Kansas Food Bank to determine if healthier versions are available of its 20 most-purchased foods. The food bank is also looking at promoting the diabetes prevention program run by the Greater Wichita YMCA, a Health ICT partner. It is also

considering, with the YMCA and County Extension, offering at a Catholic Charities food pantry Cooking Matters classes that help families choose and prepare healthy meals.

- Promoting walking and biking as a safe and viable form of transportation.
- Developing the "Prevention and Management of Diabetes in the Workplace Toolkit."
- Encouraging physician and worksite referrals to the YMCA's Diabetes Prevention Program. To learn more or talk with Health ICT staff, visit www.healthict.org or call 683-9441.

SAVE THE DATE Dec. 6 MSSC Member Meeting



AMA President Dr. Steven Stack will be the MSSC's special guest at the Dec. 6 meeting. Dr. Stack, an emergency physician, will discuss the opioid epidemic and other issues of concern to doctors. The meeting also features a holiday tradition: the Wine with a Purpose fund-raiser for Project Access.

MEMBERSHIP

Members of the Society who know a good and sufficient reason why any of the following applicants are not eligible for membership are requested to communicate with the Medical Society of Sedgwick County, 683-7557

[BC] Board Certified [AT] Additional Training [F]Accredited Fellowship [R] Residency [F*] Unaccredited Fellowship

NEW APPLICANTS

Ali Ahmad, MD

[BC] Surgery [F] Surgical Oncology Wichita Surgical Specialists OFF: 263-0296 / FAX: 263-9523 818 N Emporia S-200 67214

Paul M. Cleland, MD

[BC] Family Medicine [F] Sports Medicine Via Christi St Francis Family Medicine OFF: 858-3460 / FAX: 858-3458 707 N Emporia 67214

Joshua P. Froese, MD

[BC] Family Medicine West Wichita Family Physicians OFF: 721-4544 / FAX: 721-8307 8200 W Central S-1 67212

Thomas J. Higgins, MD

[BC] Emergency Medicine Via Christi St Francis OFF: 268-5000 929 N St Francis 67214

Nathan B. Norris, MD

[BC] Family Medicine Northwest Family Physicians OFF: 462-6200 / FAX: 462-6201 3730 N Ridge Rd S-100 67205

Vincent J. Paul, MD

[BC] Radiology [F*] Musculoskeletal Radiology Wichita Radiological Group OFF: 685-1367 / FAX: 685-9388 551 N Hillside S-320 67214

Matthew B. Powell, MD

[R] Pediatrics KUSM-Wichita Pediatric Hospitalist OFF: 962-7422 / FAX: 962-7805 550 N Hillside Bldg 1 6th FI 67214

Jacob E. Reed, DO

[BC] Emergency Medicine CEP America – VC St Francis Hospital OFF: 268-5775 / FAX: 291-7496 929 N St Francis 67214

Brynn Richardson, MD

[BC] Otolaryngology OFF: 838-4729 10111 E 21st St S-106 67206

Jeffrey T. Shepherd, MD

[R] Orthopaedic Surgery [F*] Adult Reconstructive Orthopaedics Advanced Orthopaedic Associates OFF: 631-1600 / FAX: 631-1698 2778 N Webb Rd 67226

Nicholas A. Tomsen, MD

[BC] Family Medicine Antioch Med OFF: 350-8008 / FAX: 350-8020 1130 S Clifton 67218

Danielle M. Villalobos, MD

[R] Family Medicine HealthCore Clinic OFF: 691-0249 / FAX: 691-9875 2707 E 21st St N 67214

Butcher accepts new job

Qusan Butcher. MSSC membership and paging coordinator for eight years, is taking another job. Butcher, whose last day was Oct. 21. will be office manager of Advanced Cancer Therapies, a



division of the Wichita Urology Group.

ROSTER UPDATE

Keep your 2016 Roster current with this information:

CHANGES

Comcare Family Prescription Shop has changed its name to Hart Pharmacy. All other info remains the same.

Abigail S. Heinz, MD

IPC Healthcare OFF: 462-1040 / FAX: 462-1042 1131 S Clifton S-B 67218

Michael Scheve, DO

St. Gianna Family Medicine, LLC OFF: 768-4444 2135 N Ridge Rd Suite 400 67212

Betty Troutman, MD OFF: 838-4729

10111 E 21st St S-106 67206

Matthew Williams, DO

OFF: 858-5000 / FAX: 858-1026 9350 E 35th St N S-103 67226

DROPPED

Ryan P. Ficco, MD - Moved out of state



Nov. 1 is deadline for Meek leadership award

Nov. 1 is the deadline to nominate an emerging physician leader for the 2017 Dr. Joe Meek Physician Leadership Award. The award is intended to foster leadership among physicians ages 40 or younger practicing medicine in Wichita and to develop future MSSC leaders. Nominees should possess a desire to

develop their knowledge base and leadership skills by participating in local, state and national leadership-building events. Submit nominations to Denise Phillips at denisephillips@med-soc.org or call 683-7558 for an application. Forms are also available at mssconline.org, under the Publications tab.

Nelson *continued from page 1* fellow board members in announcing her plans.

During Nelson's tenure, the program has benefited from nearly \$185 million in health care donated by doctors, hospitals and other providers, and served over 13,000 uninsured Sedgwick County adults.

"We've stabilized the organization and our funding streams and expanded our base of support. I am encouraged by that," Nelson said. "We are in a really good place, with the physician leadership and the funding, and we're moving forward. It's the perfect time to hand it off to a new leader."

"I am proud that Project Access is fully integrated as part of the local safety net and of how far the community clinics have grown over the years. I am proud of what the medical community has accomplished; without them there wouldn't be a program," Nelson said. "And I am proud of our staff," she said. "They work hard and are mission oriented, they do a great job serving our community."

"The thing I will miss the most are the relationships I have built over the years," Nelson said.

She's looking forward to joining her husband, Bob, in retirement, and getting to see their four grandchildren, two of whom are in Arizona. She's also looking forward to chipping away at the long list of travel destinations: a Mediterranean cruise, Hawaii, parts of Europe and road trips to national parks.

And she's also put together a more basic wish list: "I want to sleep and toss my alarm clock. I want to make every day Saturday."

Project Access joins Giving Tuesday effort

Project Access couldn't exist without the generous gifts of time and services that doctors, hospitals and others provide. To further its mission of connecting people needing health care with those providing it, Project Access has joined #Giving

Tuesday, a global day of giving that harnesses the power of individuals,



communities and organizations to encourage philanthropy and celebrate generosity worldwide.

Occurring this year on Nov. 29, #Giving Tuesday is held the Tuesday after Thanksgiving and after the widely recognized shopping events Black Friday and Cyber Monday. It inspires people to collaborate in improving their communities and to give back in impactful ways to support nonprofit organizations, just like Central Plains Health Care Partnership and Project Access.

To support Project Access on Giving Tuesday – or any day – visit www.cphcp. com and click on the Donate button.



The MSSC News is published monthly by the Medical Society of Sedgwick County, Kansas. The Society does not necessarily endorse all the views expressed in this publication.

Managing Editor: Jon Rosell, executive director