

The RCCI Newsletter

he influence our actions

on others is more far-reaching

our actions become the models

community group that teaches

positive life skills to at-risk chil-

dren in the city. The curriculum

day about six months ago, during

a discussion of what it means to

have "a good character," a large,

formidable insect meandered into

the classroom. As I saw the head

instructor approach this intruder

with a heavy book, my soul

we foster emphasizes mutual

respect and nonviolence. One

for our students' behaviors.

than we may think. Good or bad,

I volunteer with an eclectic



Modeling the Change: the best of the power of the informal curriculum

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A Relationship- 4 Centered Hospital

> shrieked. What would a person who supposedly espouses nonviolence be saying to these kids by killing a living thing? The instructor was the leader of our group. I was one of the newest volunteers. I wasn't sure what to do. In what was for me an uncharacteristically audacious move, I suggested that the children figure out a way to send our intruder "on its way," without injuring it or ourselves. This was met with great enthusiasm. The kids came up with a plan to trap the critter using a Dixie cup and

> > At the time, one of the foster parents complimented this impromptu lesson, but soon everyone forgot about it. Or so I thought. A couple of weeks ago,

an index card, and two of the

our plan. No one was stung.

Nothing was squished.

bolder girls perfectly executed

one of the kids told me that he and some friends were playing around and these "friends" tried to get him to shoot a cat. Remembering this example from months before, he awoke to the power of his own choices and had the courage to refuse.

I was really proud of him. It would have been far easier to succumb to the urge to conform to the stereotyped behavior of his group. Standing up for one's ideals in the face of peer pressure is no small feat.

The interesting thing to me is that this particular child seemed to me to be the most disengaged during that lesson six months ago. I recall arrogantly thinking he just didn't get it. I confess, I saw nothing change in him for a year. I foolishly considered him "impossible." In reality, he was the one who brought the lesson to its highest realization.

As a teacher I found this quite humbling. Ultimately, our lessons are more encompassing than we think. I would never have thought last August that the long-forgotten (by me at least), spontaneous lesson would have such an impact. It's a lot like this informal curriculum that we "RCCI types" keep talking about. It is in this realm that the real education is occurring.

Next, I was impressed by how much this child taught *me*. Hearing him say what he did, I was in awe. He roused me to my own ability to stand up for my beliefs in the face of organizational pressure.

Yes, I now see the kids a little

differently. I wonder what possibilities hide just below the surface of our awareness, waiting to be teased out so that they can inspire us.

Mentoring is truly a reciprocal process. It brings out the best in the mentor and the one being mentored. Sometimes, as in this case, the person we mentor becomes our mentor.

The editor would like to dedicate this article to her own mentor Lyle Stoelting, a high school teacher whose gift for seeing the hidden possibilities in countless outsiders instilled in us the desire to seek out those same possi-

bilities in ourselves and others.

May your memory be eternal.

-MPE

RCCI Calendar

Everyone in the IUSM community is welcome to attend any of our meetings!

- ? Discovery Team meets in MS 312B:
 - ? May 25, 12:30-2:00
 - ? June 21, 10:30-12:00
 - ? July 27, 12:30-2:00
- ? Student Engagement Team (SET) meets from 12-1pm in IB 303:
 - ? May 10
 - ? June 14
 - ? July 19
 - ? August 12

We are a group of individuals who are fostering relationship-centered organizational change at IUSM by embodying that change ourselves.

Mentors inspire our growth and affirm our being in a relationship over time.

They deserve our utmost gratitude. Tony Suchman and Penny Williamson have been such mentors to numerous people at IUSM through the RCCI. They have certainly inspired, nurtured, affirmed and encouraged my growth as a physician, teacher, mentor and IUSM community member, modeling "the change they wish to see in the world" with compelling authenticity. I wouldn't be writing this if it weren't for their encouragement and the encouragement of others on the RCCI Discovery Team. Thank you.

The recent death of my men-

tor from college was another impetus toward writing this piece. Dr. Alan Hutchcroft was my organic chemistry professor and mentor for 35 years. He encouraged me to follow my dream to study medicine when others were full of doubt about how a young woman would do such a thing. He encouraged not only my intellectual growth but also my emo-

tional growth. He cared about how my husband and children were faring. My eldest son attended his alma mater, Kalamazoo College. I will miss his yearly updates about his troupe of chemists, doctors, dentists, nurses, professors and countless others whom he encouraged.

I can imagine hundreds of other students who grew from his mentoring support. He spearheaded an alternative spring break for Habitat for Humanity and ran marathons. I would write him once or twice a year about what I was doing and about my family for the past 33 years. We visited on occasion. How many of us stay in touch with our mentors for such a length of time?

Honoring Our Mentors

Relationships are so transitory in medical school that it is rare to have a traditional mentoring experience unless one also attends graduate school or spends time in a research lab.

Mentoring relationships were rare during my medical school experience at University of Michigan. The most powerful one involved a pediatrician who opened her home and office during the summer after my second year. Dr. Miriam Daly showed me how a doctor, mom of four, and surgeon's wife navigated through her busy days and nights, loving life and children so completely. Her enthusiasm and energy for the practice of medicine inspired me. She introduced me to house calls, community

Out of that mentoring relationship with my patient, grew the idea for The Good Neighbor Mentoring Project, a service learning experience for first year medical students at IUSM -Lafayette. It was based on a model developed by the Purdue University School of Pharmacy. During the first semester of medical school, we team up with a community agency called Caregiver Companion. Our 16 students serve 8 to 10 families making home visits every other week. The "neighbors" and their caregivers serve as mentors to our students who learn about the biopsychosocial approach to patient care. IUSM -Lafayette medical students learn about the importance of partnership in the

This empowers the neighbor in the mentoring role; sometimes giving voice to the voiceless. We have had aphasic neighbors who have communicated some of the most amazing lessons of love and presence to students. Body language can be very expressive if we attend to it.

Students hear stories of the role of doctors and nurses in the lives of people with complex medical problems. We are impressed how the words and deeds of the doctor are repeated and how small acts of kindness are memorable--something simple like the doctor assisting the patient with her coat brought tears to the eyes of a caregiver recounting the episode.

Web based writing assignments and biweekly discussions serve as opportunities to reflect on relationshipcentered care and learning. In return for the opportunity to learn from these families, students negotiate a mutually agreed upon service which may include

respite care for caregivers, leaf raking, card playing, grocery shopping, going out for an excursion, or simply listening to worries and concerns. Building a respectful, encouraging relationship over time is one of the main objectives of the class. This is an activity that physicians do thousands of times during

Students find the experience very eye-opening. One student was partnered with a widow residing in a near windowless trailer behind the county jail. This woman was a virtual prisoner in her own home because she could not negotiate the 4 steps down to the ground level.

their careers as caregivers.



IUSM-Lafayette teams with agency "Caregiver Companion" to let medical students make home visits.

involvement, and relationship centered care in Albion, Michigan

Since going into practice, I have had hundreds of mentors in the form of patients. They have taught me the art of doctoring and reinforced the importance of empathic listening skills. Ten years ago, one of my patientmentors, a pharmacy graduate student, introduced me to a lifeexpanding educational model called service learning. She welcomed me into a whole new community of scholars across multiple disciplines, all interested in experiential and communitybased learning.

healing process and the importance of empathic listening in building trusting relationships over time. They learn about issues of caregiver stress and coping, activities of daily living, nutritional assessment, socioeconomic and cultural aspects of dealing with chronic illness. With a home visit, a student is able to see the "life support systems" of the neighbor's environment—family, friends, pets, hobbies, photos, memorabilia, assistive devices, as well as potential hazards and threats to well being.

In the mode of appreciative inquiry, I ask students to first assess the strengths that help sustain this neighbor and family.

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Organizational Cultural Change and Leadership: Some Pearls of Wisdom from the New DT Co-Facilitator

I am both pleased and humbled by the opportunity to serve alongside Debi Griffith as a co-facilitator to the Discovery Team of the RCCL

Many years of personal and professional experience as a staff social worker at IUMC, with small and large community health centers and public health programs solidified my belief in the importance of relationships.

I recently had the opportunity to participate in the 4th Annual Forum of The National Initiative for Children's Healthcare Quality Improvement where I heard a very intriguing presentation that I think is relevant to the RCCI process.

"Organizational Culture's Critical Role in Driving Performance Improvement" was presented by Patrick Hagan, Executive VP and CEO, Children's Hospital and Regional Medical Center of Seattle and Andrew Epstein, M.D., Partner, The Bard Group.

While this rather detailed presentation of the cultural assessment of a large Children's Hospital was

interesting, I found the following "pearls of wisdom" particularly helpful

On Defining Culture:

- The automatic pre-disposition to behave in a particular way
- Organizational culture is like personal character
- It's what people do when no one is looking!

On Finding Culture:

It's in the DNA of the leaders, physicians and staff; therefore it's in the DNA of the organization, and deeply embedded in organizational structures and systems

On The Role of Leadership:

- Create the vision
- Tell the story
- Spearhead the work
- Be present

<u>Characteristics of "Life Affirming"</u> <u>Leaders</u>:

- They ask what's possible, not what's wrong
- They depend upon others' creativity and commitment

- They understand that people only support what they help create
- They realize that it's better to be a "guide by the side than a sage on the stage"

Good leaders:

- Act as a host, not a hero
- Put out a spirit of invitation and make people feel welcome

Random Pearls of Wisdom:

- Name the conversation that matters
- Be brave enough to start it
- Start anywhere and follow the energy of "YES"
- Listen to everyone with the expectation of hearing something different – not just those who are your allies.

On Why Culture is Important:

Because culture eats strategy for lunch every day!

By Larry Humbert, Director, Indiana Access, Indiana Perinatal Network and Discovery Team Member

<u>lhumbert@indianaperinatal.org</u>

Quote to Ponder

"The practice of medicine is an art. not a trade. a calling, not a business: a calling in which your heart will be exercised equally with your head. Often the best part of your work will have nothing to do with potions and powders, but with exercise of an influence of the strong upon the weak, of the righteous upon the wicked. of the wise upon the foolish."

William Osler

Honoring Mentors, continued from Page 2

The student took her on rides to see the world outside her darkened trailer and communicated genuine healing presence with her regular visits and gloom-dispelling smile. No cure occurred, but two lives were enriched and encouraged by relationship.

"Not only do I enjoy visiting with my neighbor because I can notice the positive change in attitude and a bit of hope that appears during my visits, but I also benefit from the visits. I have realized how different people's lifestyles, goals, family relations and economic status can shape their views on life. I feel very fortunate for my family and the many things I take for granted each day," she wrote of her experi-



Students at IUSM-Lafayette reflect on their powerful healing hands

sive, polycystic kidney and liver disease, awaiting his chance for a combined liver-kidney transplant. Students were inspired by his playful spirit and ability to appreciate so fully the present moment. Amazingly, his students were on hand at Riley Hospital when several years later, he received his transplant.

The students contacted me to tell me about

this "reunion." I was thrilled to reconnect with my
former students to
hear about this
unique opportunity
for continuity of
caring. How often
in academic centers
do students have
this type of longitudinal relationship
with patients? How

frequent is the opportunity for teachers to reconnect with former students?

Another of my students maintained a relationship with his neighbor throughout the four

years of medical school. The neighbor affirmed this young man's talents for assisting others and inspired his growth as a physician.

Over the past 8 years, over 50 families have been served and have mentored students. Some neighbors have been involved with students for as long as seven years.

These mentors will not be forgotten.

Enriching mentoring experiences continue throughout the Lafayette Center experience. Second year students at IUSM - Lafayette have a yearlong mentoring experience with a physician in a specialty of their choosing. These relationships give students an insight into the life and lifestyle issues of a physician in that particular specialty. Students gain valuable clinical experience under the watchful eyes of an encouraging mentor.

Mentoring enhances relationship-centered care. We need to appreciate those who inspire our growth and affirm our being in enduring relationships.

By Janet L Hortin M.D., Course Director, Introduction to Clinical Medicine, IUSM-Lafayette and Discovery Team Member

Another of the neighbors was a ten-year-old boy. He was on peritoneal dialysis for an aggres-



A PUBLICATION OF THE IU SCHOOL OF MEDICINE RELATIONSHIP-CENTERED CARE INITIATIVE

For more information about the project Or to join us, please contact Dave Mossbarger, Project Manager E-mail: dmossbarger@regenstrief.org

The RCCI NEWSLETTER is searching for an enthusiastic person to serve as the next editor. If you would like to contribute to the expansion of RCCI at IUSM, please contact the current editor:

Michelle P. Elieff M.D.

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Ten thousand candles can be lighted from a single flame and the life of that candle will not be shortened, but lengthened.

The Relationship-Centered Care Initiative was created in January 2003 by a grant from the Fetzer Institute. Our goal is to study how the dimensions of relationship-centered care—interactions between physicians and patients, physicians and the community and physicians and other caregivers—can be incorporated in the IUSM curriculum and learning environment to improve the way future physicians practice medicine.

We invite your active involvement In helping IUSM lead the way in transforming the culture of medical centers through successful integration of relationship-centered practices.

A Relationship-Centered Hospital: reflections from Clarian West CEO Al Gatmaitan

The creation of a Sanctuary of Healing as one of the Core Operating Principles guiding Clarian West is a direct blend of cultures that exist within IUSM and Clarian Health Partners as observed by the Clarian West leadership team charged with activating a new hospital within the system.

Relationship-Centered Care emphasizes the realization and appreciation of the importance of the caregiver. Through meaningful relationships both the patient and caregiver are nurtured and can work effectively and efficiently together toward true healing.

Facilitated and coached directly by Penny Williamson and Tony Suchman for almost a year prior to opening, the Clarian West leadership team has worked to maintain a focus on relationship-centered care as a critical element of the Sanctuary of Healing.

Consisting of three vital elements - a healing environment, enabling technology, and relationship-centered care, the core principle of Sanctuary Of Healing is very much practiced within Clarian West. Like a student of complex science or art, the leadership and staff of Clarian West Medical Center are progressing in its joint learning and application of relationship-centered care and its multiple permutations.

Joint learning through sessions led by Penny and Tony months prior to opening—combined with numerous formal and informal sessions throughout the first year of operation—has clearly led to a culture and application of relationship-centered care and management.

The practice of relationship-centered care played a significant role in the interviewing and hiring of staff, physician orientation, leadership development and the extensive training required of all to function within this technology -rich service environment.

Currently, senior management and medical staff leadership regularly meet for the sole purpose of understanding how to interpret our experiences in a relational way and audit our basic management and business functions for intentional application of relationship-centered care.

Evidence of its effectiveness is just now being accumulated formally, but many positive signs abound. Examples include meaningful improvement surrounding disruptive physicians; handling of employee grievances; experienced staff volunteering how CWMC has renewed their careers; clinical quality dashboard, and numerous positive unsolicited patient/family comments. During its first full year of operation, Clarian West experienced 3% mission critical staff turnover and scored nationally in the Top 10% in overall patient perception and specifically with respect to emotional support of the patient. A distinctively positive, supportive and honest work place and hospital is alive and thriving within Clarian West Medical Center.

Ongoing challenges remain as the culture matures and as staff and physicians come and go. However, the true imprint of the School of Medicine and Clarian Health Partners has been indelibly made and not just with its technology, science and other impressive resources. A Sanctuary of Healing is guiding the work at Clarian West directly as a result of the spirit

within the School of Medicine and Clarian Health Partners.

It is important to realize that for the leadership of Clarian West, a Sanctuary of Healing integrated with the other Operating Principles of Safety, Service Excellence, Knowledge Driven Care and Measured Performance are intentional strategies designed to maximize Clarian Health Partners' significant investment.

Excellent performance around patient safety, staff retention, quality care and ultimately financial performance are the bottom line goals. This is not a study or limited pilot. The applications of relationship-centered care as a critical element of Sanctuary Healing will be seriously tested which will undoubtedly yield much in the way of learning.

I wish to thank the Discovery Team for keeping the spirit alive and actively practicing relationship-centered care and management.

All are welcome to contact a member of our senior management team or myself to learn more about our attempt to embed relationship-centered care into our culture. Nell Bratcher, V.P. Patient Care Services, nbratch@clarian.org Doug Puckett, COO/CFO, dpuckett@clarian.org, Paul Ivkovich, V.P. Operations, pivkovic@clarian.org James Fesenmeier MD, Medical Director, jfesenme@clarian.org Beth Newton Watson, Spiritual Care, bwatson@clarian.org or Lana Funkhouser, V.P. Human Resources, lfunk-hou@clarian.org

By Al Gatmaitan, CEO, Clarian West