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THE MISSION OF RCCI:

We are a group of individuals who are fostering relationship-centered organizational change at Indiana University School of Medicine by embodying that change ourselves.

THE PERSPECTIVE OF EXPERIENCE

At the age of six, Ed Hollenberg knew he wanted to be a physician. The road to medicine took a slight detour thanks to Dr. Hollenberg's experience with a music teacher. Mr. Gustat, a powerful guiding force to his students, instilled in all those he taught a strong desire to evolve to their full potential, whatever that may be. There was no settling for mediocrity around Mr. Gustat.

At Manchester College in Indiana, Dr. Hollenberg majored in music. Medicine was still in the back of his mind, however. On school breaks, he had the fortune of working with a General Practitioner in rural Florida. Dr. Weems did everything in a tiny seven-bed hospital and Ed got to help him at every step. Sensing he

would be a mediocre musician, but a better doctor, he returned to his other love and true calling, medicine.

At Indiana University School of Medicine, Ed found he liked every rotation. He had difficulty choosing one, thinking during every clerkship, "I could do that for the rest of my life!" Family Practice was the natural choice for him.

After graduating from IU in 1952, he did an internship at South Bend Memorial Hospital and then set up practice in a small town. He became a strong force in the community and a very successful practitioner. Crediting his inherent patient relationship skills and strong value system, he proudly proclaims, "In 54 years of practice, I have never been sued."

One of the most critical

points in Dr. Hollenberg's professional life came in 1975 when he received a call from Gov. Bowen, asking him to serve on the Indiana Medical Licensing Board and to chair the committee that created the state's medical practice regula-

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Dr. Ed Hollenberg spreads the word about the importance of relationships in healthcare.

TWELVE PROCESSES ESSENTIAL FOR SUCCESSFUL PARTNERING

From **Powerful Partnering**

Creativity: Combining our awareness and inner freedom to think, feel, desire, set purpose, set priorities, choose, act, persist, become response/able persons

Communication: Connecting with the uniqueness of each person

Conflict resolution: Struggling-embracing relationships for change regarding differing passions, percep-

tions, expectations, needs, wants, principles, priorities and purposes

Confidence: Believing in ourselves, others, and a higher power, our worth as persons inspiring trust, respect, hope, courage and dignity

Compassion: Suffering with others to help through healing of sickness or circumstances to grow again

Carefulness: Becoming aware of risk, its potential and pitfalls by be-

coming wary, thorough and vigilant

Concern: Responding with individual consideration to the needs of others

Choice: Setting priorities and selecting options

Change: Renewing restructuring, transforming our attitudes which yield new direction, identity and destiny

Control over stress: Managing those thoughts and circumstances which

challenge us to adapt in a positive manner

Control over practice: Balancing the science, art, attitudes and business of medicine, and regaining leadership

Control in family: Managing the unity of persons committed to each other in loving relationships for growth and common needs, purposes and values

PERSPECTIVE, CONTINUED FROM PAGE 1

tions. Through this work, Dr. Hollenberg began to see that there was more that needed to be taught in medicine than scientific knowledge.

Several years ago, Dr. Hollenberg, experienced a grueling professional and personal struggle involving some of the worst aspects of peer review in the medical profession. Left wounded by the experience, he needed to heal.

Instead of reacting bitterly, he decided, with the strength and support of his family, church and community, to respond positively. Through intensive reflection, he began to dissect and examine the processes that lead to personal growth, fulfillment of purpose and excellence in medicine.

Through his observa-

tions of self and fellow physicians, Dr. Hollenberg realized that character, attitude and relationship-building are crucial to excellence in health care relationships. He sets out these principles and processes in his book [Powerful Partnering: With Words I Never Learned in Medical School](#).

Relationship skills are very important. Doctors, he maintains, should be partners to their patients. Communication is critical. It establishes a connection with the uniqueness of each person.

"Communication includes understanding and being aware of a person's values, thoughts, aspirations, emotions, and purpose in life. This is an intimacy that people shy away from," he says. "I

wish I had learned how to be an even better partner to my patients earlier."

Establishing a partnership can be very challenging because many physicians are not taught the mechanisms involved.

"Most of us are slow in learning how to resolve conflict and build trust and confidence," Dr. Hollenberg says.

"Failure in relationships occurs because we don't understand the processes." In his book, he outlines twelve building blocks necessary for successful partnering (See "The Twelve C's" at bottom of page 1).

He hopes that his book will serve to help stop the dehumanization in medicine and result in the excellence that his middle school mentor instilled in him so many years ago.

SUCCESS—that journey striving for excellence in living and serving and growing into our full potential.

—Ed Hollenberg, Family Physician

IUSM TO HOST INVITATIONAL IMMERSION CONFERENCE

IUSM will host a Relationship-Centered Care Immersion Conference on Aug 23-26, 2005.

Twenty medical schools submitted applications to attend this invitational conference.

Teams from eight medical schools—Baylor, Dartmouth, Drexel, McMaster, Missouri-Columbia, North Dakota, Southern Illinois, and Washington—were chosen to attend.

The course will be led by IUSM faculty and staff with support from guest speakers.

Groups of educational

leaders and administrators will be able to explore the phenomenon of organizational culture as the informal curriculum of medical education. They will do "fieldwork" here and survey the IUSM environment to see how values are expressed and taught in the course of everyday interaction—the "hidden curriculum."

The participants will have the opportunity to experience approaches to organizational culture change, including methods such as appreciative inquiry and reflective debriefing, to foster the enhanced expression of pro-

fessional values in daily work.

At the conclusion of the conference, IU faculty leaders hope the participants will become part of an action-learning network.

With the support of conference faculty and colleagues from their school and others schools, those interested in fostering change can help develop a 'roadmap' for enhancing the professional culture of their medical schools.



During a Discovery Team meeting, Ken Williamson, Radiology Department, shares organizational change ideas his department is exploring. DT meetings provide an opportunity for sharing ideas and asking for advice on strategies to implement change.

THE RCCI-COMMUNITY CONNECTION

By Larry Humbert, Access Indiana

In 2003, Indianapolis was one of four cities chosen to participate in a national community-based research project known locally as Indiana Access.

Initially funded by the Centers for Disease Control and presently supported by the Indiana State Department of Health and Health and Hospital Corporation of Marion County, Indiana Access is testing a hypothesis that how people are treated may play a role in whether they access and remain in health services.

Modeled after the Disney Institute of Customer Service, the primary goal of Indiana Access is to achieve health equity for low income pregnant women and children by changing the culture of the way services and care are delivered.

Key principles include being consumer focused and treating women and

families with dignity, respect, compassion, courtesy, competency and efficiency.

Indiana Access utilizes a unique combination of community coalition building, organizational cultural change process, and data collection and analysis.

The goal is to identify strategies to overcome barriers and improve access to health services for low income pregnant women and children, particularly in the crucial pre-conception and prenatal period.

The Indiana Perinatal Network, a statewide, not-for-profit organization serves as the local sponsor and convening organization.

Numerous individuals within the Clarian Health Partners, Wishard Health Services, IU Medical Group, Health and Hospital Corporation, the IU School of Nursing, community health centers and community-based organization have lent their sup-

port to this unique initiative.

In my role as Indiana Access Project Director, when I first heard about RCCI, it was obvious that our two initiatives shared a similar vision and approach to improving the way in which health services are delivered and the way in which health care staff are taught and trained.

Data Collection – The Consumer Voice

- Extensive face-to-face interviews were conducted with 525 women during their postpartum hospital stay at Wishard and Methodist Hospitals.
- Parents of nearly 550 children being seen at four inner city community health centers were interviewed
- A series of professionally facilitated focus groups comprised of over 100 pregnant and parenting women and adoles-

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UPCOMING EVENTS

RCCI Discovery Team Meetings:

Held in the Lilly Library, Room 301, and available by videoconference.

July 26 12:30-2:30

August 24 11:00-12:15 (location TBD)

Anyone interested in learning about the RCCI is encouraged to attend all or part of a meeting. NEW MEMBERS ARE ALWAYS WELCOME!

“Exploring Relationships in Health or Health of Relationships” Conference, July 21-24, University Place, International Association for Relationship Research. Email privconf@iupui.edu.

RCCI Student Engagement Team Meeting, July 27, 12-1, Med Library 303.

IUSM RCCI Immersion Conference, August 23-26, Radisson and IUSM. Teams from 8 medical schools visit IUSM.

Please e-mail all comments, suggestions, story ideas or information you would like included in a future newsletter to the editor:

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The Relationship-Centered Care Initiative at IUSM 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.

The following is an excerpt from the May 2005 Senior Banquet Address given by Dr. Meg Gaffney.

This – medicine – is good work, intrinsically, and it is an instrumental good. Be aware that you are regarded as community leaders, by virtue of your intellect and education. Accept the challenge. Knowledge is power, and a professional uses his/her knowledge for the good of others. Be discerning. One of the darkest moments in medicine has to be the contribution German physicians made to Nazi atrocities. How did that happen?

In less dramatic terms – work for your children's school, for environmental commissions, to help inform public health policy, to decrease disparities in healthcare and to improve the treatment of the most vulnerable and marginalized among us.

And finally, a word about love. In 28 years of school, training and practice I have heard only three people speak of love – for patients, for the work, for the ideals of the life chosen.

I hope you love your lives as healers.

I offer final words from that famous doctor, Dr. Seuss:

Be who you are and say what you mean, for those who mind don't matter; and those who matter don't mind.

THE RCCI-COMMUNITY CONNECTION, CONTINUED

Continued from Page 3

cents were convened.

Selected Results

Nearly 75 percent of the women characterized their pregnancy as either mistimed or unwanted. Nearly 70 percent were not using a form of birth control at the time of their pregnancy.

Survey respondents experienced an average of three life stressful events such as having a close family member die, getting separated or divorced, frequent relocating or having a lot of bills they could not pay, during their pregnancy.

When asked to rate the concern and respect shown by their providers, less than 60 percent rated this as "excellent" or "very

good."

Focus group participants believed that having "personable and caring" health care professionals was crucial to ease of access. Adolescents in particular emphasized the importance of provider characteristics and attitudes to the quality of their experiences.

In the words of patients, provider characteristics associated with positive experiences included:

"They take their time with me."

"They remembered my name; I was not just another patient."

"They should learn more about your background and situation before making decisions on what they need."

Cultural Change Process

Indiana Access has emerged as a national leader in piloting an ongoing facilitative organizational change curriculum with staff at Forest Manor, Westside, Peoples and Southeast Health Centers.

These highly interactive, experiential and asset-based sessions have reinforced the importance of relationships, team building, respecting the diversity of communication and learning styles, the powerful use of body language and how to more effectively manage and resolve conflict.

An Appreciative Inquiry process is being used to develop site specific action plans aimed at improving internal staff interactions and the experience of the patients they

serve.

The following comments from participating staff help demonstrate the benefits of this process and reinforce the importance that relationships play in improving access:

"Staff is now relating to each other in a more positive manner and many patients have mentioned that the clinic seems more like a family now than it used to."

"We're more aware that we are all an integral part of the team and have an important role to play in providing good care to our patients."

For more information about Indiana Access, contact Larry Humbert, Indiana Perinatal Network at 317-924-0825

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