



Willamette Family Medical Center Update

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Building a Village: Centering Healthcare

Pregnancy and parenting are some of the most rewarding experiences anyone can have. The joy of creating and raising a family are boundless.

However, as anyone who's gone through it knows, pregnancy and parenting are just as scary and uncertain as they are exhilarating. Pregnant moms are on high alert, hyper aware of the changes their bodies are going through. Even normal experiences during pregnancy, like back pain or emotional fluctuations, can provoke panic. If the mom is isolated from social contacts, either by distance or because of language barriers, that panic can be overwhelming.

The same goes for parents with new children. Moms and dads alike can feel displaced from normal society and scared when a child cries too much—or too little. It's true that it takes a village to raise a child, but in this day and age, that village has often vanished.

Willamette Family Medical Center is working to remedy this social isolation and provide innovative prenatal and pediatric care. We were recently awarded funding by CareOregon's Care Support and System Innovation Program in order to establish a pilot cohort of group prenatal and pediatric care. The curriculum will be based on Centering Pregnancy and Centering Parenting models, which are evidence-based and patient-centered. WFMC will be one of the first clinics in the nation to implement both Centering programs in a chronological format, with Centering Pregnancy groups transitioning into Centering Parenting after the birth of their child.

Participants in Centering Pregnancy have a normal office visit for evaluation and assessment. They are then put into the group setting with 8-12 other women who have similar

due dates. Standard prenatal assessment will then be conducted during the group meeting time in a small, private area of the room during the initial part of the class. The rest of the group will be completing self-assessments, getting snacks and socializing. The

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bulk of the class is educational and is structured as group discussion. The conversation will be lead by the provider and guided by curriculum and participant comments garnered from an update/progress survey filled out by each class member. This has been shown to be a very successful method of health care delivery, with outcomes including self-empowerment, increased compliance, patient satisfac-

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What's Up With Our Docs?

Our providers wear many hats in and out of the office. That's why we're taking our hats off to them and featuring some of their outside activities!

First, in our own backyard: Kathy Krall, FNP, and Stephanie Schmidt, FNP, recently testified before the Oregon legislature in support of Senate Bill 605, which allows NPs to delegate non-judgmental dispensing. Many of our low-income patients receive free

medications from drug assistance programs. These meds arrive in our office and the patient comes to pick them up. Currently, FNPs must personally hand the drug to the patient. Physicians are not held by this standard; the differences in policy be confusing and burdensome to provider and patient alike. From Kathy's testimony: "For example, one of my patients lives in an outlying area, 20 miles or more from our office. He has no insurance, works a low income job without

benefits, and has multiple chronic health problems. He receives several free medications monthly, each one from a different drug assistance program. Our clinic has no control over when the ordered medications arrive from the drug companies, and they are not always available during a scheduled visit. Currently, since I must hand the patient his medication, I must interrupt my schedule to see

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Special points of interest:

- ♦ See inside for tales from Kim Brandt's trip to El Salvador to monitor elections!
- ♦ Welcome Antonia Estrada, Maria Soto and Tanya Escatel!
- ♦ Welcome ROR volunteers Sherry Hammack and the Wagener family: Shelley, Matthew, Tamrat and Addy!

Building a Village, con't

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tion, and breastfeeding rates and social support/community building. (See page 3 for a table of Centering Healthcare's "essential elements") By flowing Centering Pregnancy into Centering Parenting, we can provide these patients with further support. Risk analysis can be performed in the first half of Centering and risk prevention in the second set of sessions. Good habits, basic health education and empowerment can be cemented in the 18 months of continuous, supportive care.

Just as one woman can't raise a child, we'll be tapping our village to help support this program. We believe that true patient-centered care doesn't end in the

doctor's office. Community involvement can be as simple as having volunteers read to siblings while their parents are in the Centering class; Lorraine Hiebert, our maternity case manager, has already volunteer her mother-in-law to make small quilts for the newborns enrolled; or organizations could donate refreshments or raffle gifts to provide to the families in the program. In addition, Salem is lucky to have a robust, committed and forward thinking social services community, who we see as natural allies in our commitment to holistic care. We look forward to having a multidisciplinary approach to the group sessions, providing the women with referrals to partner organizations that can help empower them in their education, their financial situation, and their parenting

skills. It will be a work in progress, but as President Obama said, "What is required now is for this country to pull together, confront boldly the challenges we face, and take responsibility for our future once more." By working together, we can fix a dysfunctional health system. Centering will be another addition to WFMC's high quality medical care and commitment support on a more patient-centered, whole person basis, flexible in response to patient and provider input.

Contact Jo if you would like to learn more about Centering or are interested in reading articles about its structure, delivery or health outcomes:

jristow@wfmc.mvippa.org/503-485-3905

Or visit: www.centeringhealthcare.org

What's up ... Docs? Con't.

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him, which takes time away from other patients. If the proposed changes to the ORS are accepted, I would continue to be responsible for ensuring that he receives correctly labeled medication along with instructions for proper use. However, I would be able to delegate the delivery to office staff."

A bit further afield, our FNP Kim Brandt has an international story to tell: "Sitting in church one Sunday in November, our pastor announced, 'The SHARE Foundation is seeking volunteers to be observers in El Salvador in the spring presidential elections.' I leaned over and whispered to my husband, 'I bet I could do that.' Famous first words.

El Salvador survived a brutal civil war from 1980-1992 and the party that had seized power during the war still held the reins. ARENA maintained power because they controlled the election proc-

ess and promoted the idea that if the opposition won, the US would deport Salvadorans, ending the remittances that are 18% of the country's gross income.

My family had lived in south Texas in the mid-80s and had met many Salvadorans fleeing the war and economic hardship. I'd also met Francisco Lopez, friend of WFMC, who was also political refugee and crossed the border in the very town where my family lived. Their stories made me want to play a small part in giving change a chance.

About 4,000 international observers were present at the elections. We were to be strictly neutral participants, garbed in black and white, noting any problems or departures from the fairly elaborate election rules.

What we saw on March 15 was a model of civil civic activity. Each table had two members of each party officiating, who were forbidden to wear anything party-

identifying. Plenty of officials in full party colors (blue, white and red for the ARENA, and red for the opposition FMLN) patrolled the room to make sure that their side was in on any dispute that arose. Only the presidential/vice-presidential race was on the ballots. Voters checked the flag of the party they supported, so literacy wasn't an issue.

The most exciting part of the day was when each ballot box was opened and each ballot was read out loud: "ARENA!" or "FRENTE!" I liked it that there was no secrecy in the counting, all rival representatives present for each vote.

ARENA won our site by a 55-45% margin and, as we left, the streets were filled with red-clad revelers. However, FMLN won out overall, marking a change in power. For me, it was a privilege, both fascinating and humbling, to witness history and to know that we had played even a small part in helping the elections to be free and fair.

AmeriCorps: Above and Beyond

We want to make special mention of our AmeriCorps member, Laura Davis, who serves as our Medical and Social Service Resource Coordinator. She has gone to great lengths help our patients acquire essential resources they wouldn't otherwise be able to access. For example, when one woman's insurance denied her claim for a motorized wheelchair, Laura found out that Easter Seals had one that

they were willing to donate to our patient. In addition, she helped one of our patients through the entire process of acquiring free hearing aids from the Hear Now Foundation and Easter Seals was willing to cover the \$200 processing fee. She also managed to connect one patient with a doctor who was willing to perform a tubal ligation completely free of charge! So far, she's

helped over 500 patients and is going strong to break 1,000 by the end of her service year. Thanks to Laura for her remarkable persistence and dogged determination for the sake of our patients. If you have a patient that needs assistance of one sort or another, call Laura at 503-485-3944 or email: ldavis@wfmc.mvippa.org

Brand New Faces

We're proud to welcome new members of the WFMC family to our practice.

Antonia Estrada, Medical assistant

Started at WFMC: Dec 2008

Hobbies/Interests: Hanging out with family and friends, playing sports: volleyball, soccer, baseball and traveling

Previous jobs: Worked at a pet hospital for 2 years (love animals)

Family: I live at home with my parents and younger brother. I have a beautiful kitty named Chica. I'm the oldest of three and the only girl.

Dreams/plans: Traveling to Europe, falling in love, getting married and starting a family (cheesy, I know), going back to school to become a surgical tech

Favorite things: Food: enchiladas and sopes Colors: black, green, purple, red

Books: *The Notebook* by Nicholas Sparks, and *Blindness* by Jose Saramago

Interesting facts: Ran a marathon for San Francisco AIDS Foundation in Dec. 2005

Maria Soto, Front desk/Receptionist

Started at WFMC: Dec 2008

Hobbies/Interests: Listening to music, reading and hanging out with friends and family

Previous jobs: T-Mobile retail store, Salud medical and Salem Pediatrics

Family: Two boys ages six months and five years and husband; three brothers, three sisters and my mom

Dreams/plans: Going back to school

Favorite things: Colors: green, purple and pink. Funny or scary movies

Tanya Escatel, Front desk/Receptionist

Started at WFMC: March 2009

Hobbies/Interests: My daughter, family, friends and snowboarding, boating and camping

Family: One daughter, Hannah, age 3

Dreams/plans: Travel everywhere

Favorite things: Colors: yellow, blue and pink

Interesting facts: Lived in Missouri for 8 years

We're thrilled to have you all here! Thanks for your hard work and talent.

Brand New Faces: Volunteer style

We have new readers in our waiting rooms! Please welcome them and give 'em a big thank you for volunteering their time for WFMC.

Name: Sherry Hammack

School: Corban College, English major

Hometown: Corvallis, OR

Hobbies/interests: Reading children's books, writing articles that make people talk, dancing, making and eating pizza

Future plans: I graduate in May and hope to find a job I like. I hope one day I'll be paid to write.

What brings you here?: I remember the

first time I called a book "my favorite." I want to see kids discover that feeling.

Favorite books: The Little Prince, anything by Roald Dahl or A.A. Milne, Pride and Prejudice, The Curious Incident of the Dog in the Night-Time

Name: The Wagener Family: Shelley (mom), Matthew (10), Tamrat (9) and Addy (8)

A little about Shelley:

Profession: Ordained minister; currently a Volunteer Coordinator for Legacy Hospice

Hobbies/Interests: Singing, piano, reading, gardening, camping

What brings you here?: A desire to get involved in promoting reading—sharing something I love with others, and being joined by my children, feels like a great use of my time.

Favorite books: The English American, Harry Potter series

Interesting facts: My two youngest children came to America from Ethiopia at ages 5 and 6.

Centering Healthcare: Essential Elements

Essential elements of Centering's group exams include:

- **"Health assessment occurs within the group space"** Patients meet one on one with the provider in a semi-private space; it is encouraged that questions asked in these encounters be brought to the whole group for discussion

- **"Patients are involved in self-care activities"** Examples include taking own weight/height measurements and using an automatic cuff for blood pressure, as aided by a medical assistant.

- **"A facilitative leadership style is used" and "Group conduct honors the contribution of each member"** This is not a q&a or a lecture series. Women discuss with one another their own experiences, and facilitators direct questions back towards the group and provide support.

- **"The group is conducted in a circle"** This facilitates equality and conversation.

- **"Each session has an overall plan" and "Attention is given to the core content, although emphasis may vary"** Curriculum includes nutrition, exercise, relaxation

techniques, parenting, self-esteem, among others, but the group dynamic determines the flow of the conversation.

- **"There is stability in group leadership" and "The composition of the group is stable, not rigid"** Social bonds are formed through trust and stability of the core group.

- **"There is ongoing evaluation of outcomes"** Centering is evidence-based and continually evolving to fit patient and provider needs and feedback.

In our own backyard:

- In 2007, nearly 15% of Marion county residents were below the poverty level. That's higher than the state average of about 13%. (Source: Oregon Housing and Community Services, Poverty Report 2008) For a family of three, the combined annual income must be less than \$17,170 to fall below the threshold.
- In 2008, 51% of Marion county students were eligible for free or reduced lunches. (Source: Oregon Dept. of Education)
- According to the Mid-Valley Independent Physicians' Association website, 15% of Marion county residents depend on Medicare for health insurance; 13% rely on Medicaid (Oregon Health Plan) and 15% are uninsured.
- Some good news: In February 2009, the number of kids in foster care had dropped 7% from the number in February 2008. (Source: Dept. of Human Services)

April 2009

Sun	Mon	Tue	Wed	Thu	Fri	Sat
Child Abuse Prevention Month	Autism Awareness Month		1 All Fools' Day	2	3	4
5	6	7 No House-work Day	8	9 Shannons' bday! Passover	10 Good Friday ASPCA Day	11
12 Easter	13	14	15 Taxes due! Titanic sinks, (1912)	16	17	18 Respect Your Mother Day
19	20 National Karaoke Week!	21	22 Earth Day	23 Shirley's bday!	24 Emma's bday!	25 World tai chi day
26 International Macaroni Day	27	28	29	30 National Honesty Day		

Community Corner

We truly appreciate the Salem community and are amazed at how many valuable services and opportunities they provide to our patients and our staff. We're addicted to collaboration! Here's the latest:



WFMC was represented at a recent Salem Human Rights and Relations Committee healthcare forum. Community members were invited to discuss barriers to medical care in the Salem area. We believe that communication is key to dissolving challenges and it was certainly enlightening to hear the voices of those who feel ignored by our local, state and national healthcare structure.



WFMC is happy to be part of the Hispanic Human Services Council executive team as well as the Great Beginnings executive committee. We hope that our involvement in these great organizations can help us better serve our diverse population to the best of our abilities.

WFMC hosted a tri-lingual (Spanish, English, American Sign Language) play based on Maurice Sendak's "Where the Wild Things Are." The actors and actresses were none other than Walker Middle School's 6th and 7th grade bilingual drama students, led by Shannon Ingersoll. The play was delightful and energetic and performed in front of a standing-room-only crowd! Thanks to all of those who attended and a special *gracias* to our talented bunch of thespians.



We would also like to extend our great gratitude to Nancy Arner Hulett of Salem's Tai Chi School of Healing Arts. She has donated her time and experience to teach tai chi classes to our clinic employees once a month during lunch. Tai chi was developed in 12th century Japan as a mind/body exercise which helps reduce stress, increase blood circulation and move vital energy, chi, through the body. If our staff seems particularly balanced and meditative next time you visit, you'll probably have Nancy to thank!

One of our MAs, Tanya, volunteered to help out at Catholic Community Service's recent health fair. She performed free diabetes screenings. In addition to pricking the fingers of 35 attendees, she gave them information about the signs and symptoms of diabetes, as well as prevention methods.



Through a brief internship with WFMC, Jessie Robertson wrote and presented a paper on the family practice crisis under the direction of Dr. Stasinios Stavrianeas, professor of Exercise Science at Willamette University. Her aim was to provide WFMC staff and board with an up-to-date look at the field of family practice: its challenges, changes and future.