



GREAT CARE WORKING FOR YOU

SPRING 2007

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Dr. Gary Seto

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Dr. Michelle Eads, Dr. Megan Lewis,
Dr. Greg Sharp

CONNECTICUT:

Dr. Rodney Hombake

FLORIDA:

Dr. Henry Richter

GEORGIA:

Dr. Roth Riley

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Wilterding

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Dr. Linda George,
Dr. Robert Hasbrouck

WASHINGTON: Dr. Gwen Hanson

The purpose of this Newsletter, is to tell our patients about our goal: to make the health care we offer as good as it gets!

Beginning in 2006 a group of practices started working together on ways to improve the health and medical care we offer.

The practices are called "MICROPRACTICES" not because the practices have to be small. Rather, Ideal Micropractices (IMPs) focus as though they have a microscope on what happens where patients and doctors meet.

IMPs seem to be living up to expectations by focusing on ways to make health-care better. For example, the Wall Street Journal recently ran a cover story about Micropractices. Sample Results are shown on page 2.

Our goal is to engage our patients so that they get care that matters to them and so that we are "on the same page" with our patients.

(See "Working for You" below)



IDEAL
MICROPRACTICES
AS OF
JANUARY 2007
(SEE PAGE 4)

WORKING FOR YOU, WHAT MATTERS TO YOU

In order to better understand what matters to our patients and learn how IMP practices are doing, we ask our patients to use HowsYourHealth.

This article answers two questions. What are the needs of our patients? And, how can we make health care better for them?

(Continued on Page 3)



SHOWN HERE IS A
CONDITION
MANAGEMENT FORM
FROM
HOWSYOURHEALTH

OUR PRACTICES ARE
USING NEW
TECHNOLOGIES TO
IMPROVE
COMMUNICATION ABOUT
“WHAT MATTERS” TO
OUR PATIENTS.
THE TECHNOLOGIES
OFTEN IMPROVE
UNDERSTANDING OF
DISEASES AND
TREATMENTS.

ALTHOUGH
TECHNOLOGIES CAN
HELP WITH SELF-
MANAGEMENT OF
COMMON CONDITIONS,
TECHNOLOGIES NEVER
TAKE THE PLACE OF
PERSONAL CONTACT.

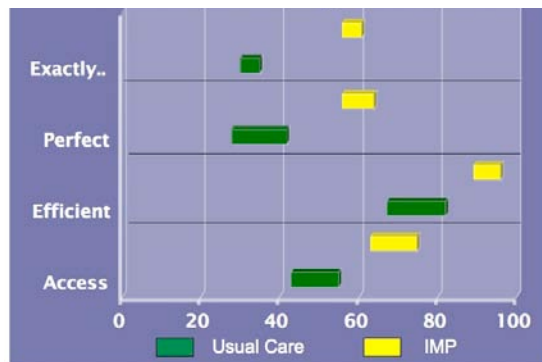


GREAT CARE RESULT (CONTINUED FROM PAGE 1)

Great Care is accessible, safe, and not wasteful. Great Care is also effective resulting in fewer hospital days and emergency department visits. Patients love this type of care and rate it highly.

Compared to National Data, our practices are performing well.

OUR CARE AND USUAL CARE



(Patient ratings of access, efficiency, “care is just about perfect” and “I receive exactly the care I want and need exactly when and how I want and need it.”)

However, there is room for improvement! We want to do better.

WHAT IS SELF-MANAGEMENT?

Whether we are exercising or living with an illness such as asthma or arthritis, we are “self-managing”.

Self-Managers have three tasks.

First, there is medical management task. Do we take our pills? Do we check our blood sugar and blood pressure if we have diabetes and high blood pressure? Do we stay on the diet?

Second, there is role management. How do we adjust our activities if we have pain, arthritis, or heart disease?

Third, there is emotional management. All illnesses impact how we feel. A changed view of the future will usually make us feel angry, frustrated, or depressed. How will we manage these feelings?

Sometimes our self-management style is helpful; sometimes it is

hurtful. Almost 60 % of our patients say they are confident managing or controlling bothersome problems and their health. They generally do well. Persons who are not confident self-managers are much more likely to have bad health and emotional experiences.

A first step toward better self-management called “Problem-Solving” can be found at www.HowsYourHealth.org. Bring the form from “Problem-Solving” to your next office visit. Let’s work together so that you become a confident self-manager.

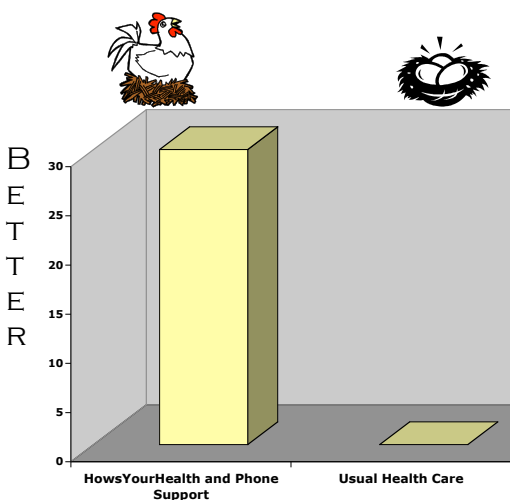
WORKING FOR YOU! (CONTINUED FROM PAGE ONE)

The needs of our patients seem to be very similar to the needs of all Americans. If you would like to compare yourself to others, look at a copy of “How’s Your Health” that can be found in the office.

Most of our patients are self-managing. (See Page 2) For example, almost 3 of 4 patients with high blood pressure regularly check their blood pressure and few report that their last blood pressure was more than 150.

The common self-management concerns for adult Americans are Exercise and Eating Well (55%), Preventing Cancer and Heart Disease (40%), and Getting Better Health Care (30%).

PERCENT OF PATIENTS WITH EMOTIONAL DIFFICULTIES WHO ARE BETTER AFTER ONE YEAR. SOME USED A WEBSITE AND RECEIVED PHONE SUPPORT (LEFT BAR); COMPARED TO PATIENTS WHO USED NEITHER.



How to Make Care Better?

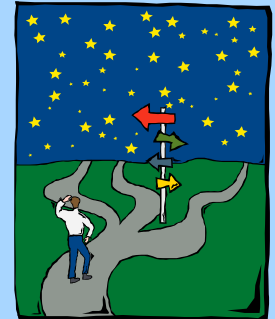
Emotional difficulties illustrate how to make care better because emotional difficulties are often present in persons with diseases. Furthermore, when we are anxious or depressed, it is often hard to take any action. When we don't take action it is often hard to feel better. *Emotion Difficulties-No Action: No Action-Emotion Difficulties. Chicken or Egg?*

Patients who report emotional difficulties are much less likely to feel confident about self-management (20% confidence) than those who do not have emotional difficulties (50% confidence with self-management).

Patients with diabetes and emotional difficulties are much less likely to keep their blood sugar between 80-150 (30% of those with emotional problems) than diabetics who do not have emotional difficulties (60%).

The Figures on the right and left of this page illustrate effective steps you can take to manage all types of problems and difficulties. Although you can take these steps by yourself, best results occur when you are also supported by friends, family, or professionals.

Our practices are beginning to offer many approaches to make better care a reality. Helping our patients become better problem-solvers and self-managers is one very important approach.



IT CAN BE CONFUSING

WE WELCOME YOUR SUGGESTIONS ABOUT HOW TO MAKE OUR CARE BETTER AND HOW TO HELP YOU HAVE BETTER HEALTH. (SEE MORE ON PAGE 4)

NEW TECHNOLOGIES CAN ALSO BE USED TO THINK ABOUT SOLUTIONS TO COMMON OR BOTHERSOME PROBLEMS. SEEN HERE IS THE “PROBLEM-SOLVING” PROGRAM FROM HOWSYOURHEALTH



**PRACTICES
WORKING
TOGETHER TO
MAKE HEALTH
CARE
BETTER**

IMPS
COLLABORATION
AND IMPROVEMENT
IS SUPPORTED BY

THE
PHYSICIANS
FOUNDATION FOR
HEALTH SYSTEM
EXCELLENCE



IF YOU WANT TO
IMPROVE YOUR
HEALTH, GO TO

WWW.
HOWSYOURHEALTH.
ORG



TELL US WHAT TO DO

Out of every 10 persons who thought that our practices could be improved, 4 took the time to write down their suggestions. **THANKYOU!**

You can also jot down ideas when you go to [HowsYourHealth](#)... ANY idea about how to make our practice better...how to make it more pleasant.

***In the office you will find a sheet that describes how to use
HowsYourHealth if you have not already completed it.***

ABOUT HOWSYOURHEALTH

HowsYourHealth is an internet (web) technology that offers patients a personalized survey of needs, information tailored to each patient's needs, helpful forms for the doctor or nurse, and many other useful informational links.

HowsYourHealth was developed at Dartmouth Medical School and is completely confidential and anonymous.

You can use it as a health survey. You can go back to review information, do problem-solving, and make links without having to complete the survey again. You can chat with others across the country about ways to improve care and solve problems. You can even use it to make your care better if you are in the hospital.

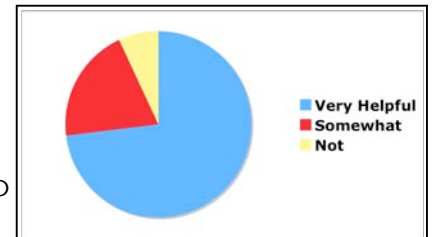
WHO'S IN CHARGE? YOU, WE HOPE.

TO HELP OUR PATIENTS TO IMPROVE CARE COORDINATION WE LIKE TO KNOW IF THEY ARE SEEING ANOTHER DOCTOR AND WHETHER THEY ARE RECEIVING HIGH VALUE CARE.

ONE IN FOUR AMERICANS WHO ARE SEEING MORE THAN ONE DOCTOR DON'T KNOW WHO IS IN CHARGE.

IF YOU DON'T KNOW WHO IS CHARGE YOU ARE MUCH MORE LIKELY TO EXPERIENCE POOR HEALTH CARE.

IMPS WANT THEIR PATIENTS TO FEEL THAT THEY ARE IN CHARGE. IMPS ARE YOUR PARTNER.



PATIENTS
RATE THEIR
SPECIALTY
CARE

**SHARE THIS NEWSLETTER WITH FAMILY AND FRIENDS.
THEY CAN USE THE DESCRIBED WEB-SITES TOO.**

THEY OR YOU CAN'T USE THE WEB?

**GO TO CHILDREN, GRANDCHILDREN,
LIBRARIES, FRIENDS, DOCTOR'S OFFICES**