Family & Community Medicine Joins DOM as 15th Division

In April 2009, The Center for Family and Community Medicine joined the Department of Medicine as part of a new initiative to integrate and innovate primary care at Stanford. With an emphasis on teaching and educational programs, the Center includes the Family Medicine Residency program at O’Connor Hospital in San Jose, Stanford Family Medicine Clinic, the Primary Care Associate Training Program, and the Stanford Geriatric Education Center.

Medical Student Education
Samuel LeBaron, MD, who directed the Center for the past several years, developed the first required clerkship in family medicine. “Previously, almost all student training was on subspecialty and hospital exposure to patients. The clerkship offered valuable experience and a practical opportunity to learn about the headaches, back pain, and medical woes of everyday life,” said LeBaron. Today, Erika Schillinger, MD, and Eva Weinlander, MD, direct the clerkships and mentor students in ethical decision making, hospice care, integrative medicine, cost containment, and quality.

The Center’s academic program emphasizes care for medically underserved populations and offers an array of courses on topics such as Women and Health Care, Rural Health from a Global Perspective, and Reaching Out to Underserved Children.

Caring for Elders
The Center’s core mission is to provide primary care across the lifespan of individuals and families and improve the health of diverse communities. One way the group accomplishes this is through the Stanford Geriatric Education Center (SGEC). Originally created in 1987, SGEC is the longest continually funded geriatric education center in the nation. It strives to increase knowledge in chronic and palliative care management, cancer care, emergency preparedness, and faculty development in health literacy. Under the direction of Nancy Morioka-Douglas, MD, MPH, SGEC is a national and local resource for professional training on issues related to ethnic elders.

“Within the Center some of the programs are so little known, it’s almost like a state secret,” said LeBaron. The center for ethno-geriatrics is one of those secrets. The discipline of ethno-geriatrics was created by founding director Gwen Yeo, PhD, who has developed an acclaimed program that trains health care providers, conducts research, and assists ethnic populations with their health care needs. The center is a source of expertise to interested individuals across the nation and around the world.

Service to the Community
Research in the Center revolves around community-based programs. One of its largest initiatives, under the leadership of Morioka-Douglas, provides health education to middle and high school youth in underserved areas of Redwood City and East Palo Alto. Additional efforts focus on assisting Muslim women to overcome barriers to health care.

“One area where there is a natural fit in the DOM is with the Stanford Prevention and Research Center. We’ve collaborated on projects informally and hope to do more as we integrate into the department,” said LeBaron, who looks forward to working with faculty in other divisions as well. “We’re attending department leadership meetings, feel welcomed, and value our association with the broader institution.”

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Hospital COO Plans for the Future

Dan Ginsburg likes to bring people together. It contributed to his success in leadership roles at Massachusetts General Hospital and will be critical to his success as Chief Operating Officer as he seeks to strengthen relationships between the Stanford medical school and hospital. Additional focus will be on quality metrics, patient service, employee engagement, and financial results.

“When good people are empowered, have the tools they need, and feel comfortable in their environment, it’s easier to deliver high-quality care, service, and ultimately financial results,” said Ginsburg. “There are so many bright, passionate people at Stanford. When the organization takes on a challenge, we can do almost anything. If you look at where the clinical quality scores were and where they’ve gotten to, it’s amazing.”

Challenge and Opportunity

Ginsburg knows that along with the extraordinary benefits of the new hospital come a significant financial burden. But the new hospital is needed to meet seismic requirements and to provide a platform for growth that is critical to the medical center’s continued vibrancy and financial success. In the interim, his priority is to improve quality of care and work on challenges to growth that every organization faces in difficult financial times. At Mass General, as President of the physicians group, he and his team identified areas of growth, developed partnerships, and increased physician net patient revenue from $150 million to $650 million in 14 years. In parallel, as Senior Vice President for cancer and women’s programs at Mass General, Ginsburg and the team grew cancer program revenues from $239 million to $435 million over 4 years.

Measures of success: Quality, Service, Engagement, and Financial Results

About Stanford, he said, “There isn’t a hospital in the country that isn’t under financial pressure. Seven years ago, Stanford was losing money. Martha Marsh, President and CEO, stepped in and turned that around. We’ve improved quality metrics and invested in deployment of information systems.” However, Ginsburg sees more management process opportunities and currently works with the CFO to streamline processes and work as a broader team. “I think that we are at a point in the turnaround where that is an appropriate thing to focus on.”

Ginsburg’s enthusiasm for Stanford spills over to his personal life as well. The California lifestyle agrees with him. He rides his bike to work and occasionally practices yoga. “I spent my whole life in Boston, and I love it here,” said Ginsburg. “I love the climate, and people have been very welcoming. With two kids in college, my wife and I are new empty nesters, so it’s the perfect time for a great adventure.”
By a variety of measures and metrics, the Veterans Affairs Palo Alto Health Care System (VAPAHCS) is ranked number one tertiary hospital in the national VA system. With one of only four polytrauma rehabilitation centers in the national system, the VAPAHCS provides acute rehabilitation and a program to transition to civilian life. In 2008, more than 55,000 veterans were treated at the VAPAHCS, many of them being cared for by the 30 Department of Medicine faculty working full time at the VA.

Focus on General Internal Medicine
“The VA has strength in some subspecialties, but clearly general internal medicine is a major focus of the system,” said Lawrence Leung, MD, VA chief of staff and medicine. It’s a change that began in the 1990s with Kenneth Kizer, MD, President Clinton’s Veteran’s Administration Under Secretary of Health. He’s the individual that reformed the VA from a hospital-based to a clinic-based inpatient, outpatient system.

Under Kizer, care improved dramatically. He introduced electronic medical records systems, standards for patient safety, and performance measurements. Today, more than 100 clinical, organizational, and financial performance metrics and measurements are widely disseminated through the VA system. They’re measurements, noted Leung, that encourage healthy competition and provide opportunities to share knowledge in best practices.

Susan Frayne, MD, MPH, acknowledged how much the VA contributes to her research in post-traumatic stress disorder (PTSD). “There are tremendous resources, excellent national databases with administrative and clinical data for every veteran using the VA nationally. It’s amazing to be able to study millions of patients in a single study.” GIM division chief Mark Cullen, MD, agreed. “Some of my division’s greatest strengths exist at the VA. I hope to grow them. There’s huge opportunity there because of the interesting health care system, and the population’s well characterized.”

More Improvements Ahead
The VAPAHCS has slated more than one billion dollars for construction in the next three to four years. It begins this summer with construction on a new psychiatric hospital. In 2011-12, ambulatory care and polytrauma buildings will be built. A 50,000-square-foot research building and new animal care facility or vivarium are also in the works. The expansion, Leung hopes, will further strengthen the relationship between Stanford and the VA. “Currently there are areas in which we complement each other. With PTSD, we benefit from Stanford’s strength in neuroscience, neuroimaging, and basic research. The new research building, designated for genomics and molecular medicine, will provide yet more opportunity to recruit more Stanford faculty into the VAPAHCS."

DOM and KFF Offer Residents a New Opportunity
This fall, second-year residents Sumbul Desai, MD, and Jessica Zhou, MD, will participate in a new health policy research elective. The three-month program is collaboration between the Department of Medicine and the Kaiser Family Foundation (KFF), a nonprofit organization and leader in health policy and communications.

The program offers residents access to KFF resources and supervision from a KFF scholar to conduct an individual research project. Tim Meyer, MD, serves as the Stanford faculty coordinator. “With proposals to alter American health care on the table, it’s a great opportunity for residents to work at an organization that advises policy makers and increases awareness in the media and throughout the community.”

Studies Target Key Topics
Sumbul Desai proposes to examine the relationship between media and health care. She’ll combine medicine and experience in broadcast news to explore issues such as the effect of television, internet, and print media on the health care consumption and health habits of the elderly. Her research will highlight the impact these mediums have on the geriatric population and how to utilize the mediums to promote positive health changes.

Jessica Zhou is interested in women’s health policy, in particular, the access, coverage, and financing of primary and secondary prevention. She will compare the efficacy of smoking cessation treatments and explore the economic feasibility in coverage of smoking cessation by major health insurance plans.

Upon completion, the results of each resident’s project will be shared in a report or journal article. According to Department Chair Ralph Horwitz, MD, the experience is valuable preparation for physicians who will use evidence from policy-based research to make decisions for health care systems.
Appointments and Promotions

- Natal Atwan, MD, appointed clinical instructor, general internal medicine
- Eran Bendavid, MD, appointed instructor, general internal medicine
- Todd Brinton, MD, appointed clinical assistant professor, cardiovascular medicine
- Cheryl Cho-Phan, MD, reappointed clinical assistant professor, oncology
- Manisha Desai, PhD, appointed clinical associate professor, general internal medicine and director of quantitative sciences unit
- Roberto Felix, MD, appointed clinical instructor, general internal medicine
- Dora Ho, MD, reappointed clinical assistant professor, infectious diseases
- John Kugler, MD, appointed clinical instructor, general internal medicine
- Ravindra Majeti, MD, appointed assistant professor, hematology
- Rajat Rohatgi, MD, appointed assistant professor, oncology
- Baldeep Singh, MD, appointed clinical professor, general internal medicine
- George Triadafilopoulos, MD, reappointed clinical professor, gastroenterology/hepatology
- Jonathan (San Hoon) Woo, appointed clinical instructor, general internal medicine

Awards and Honors

- Euan Ashley, MD, Donald E. and Delia B. Baxter Foundation 2009 Faculty Scholar
- John Cooke, MD, named Master of the Society for Vascular Medicine
- Hanlee Ji, MD, Doris Duke Clinical Sciences Award
- David Relman, MD, named Thomas C. and Joan M. Merigan Professor
- Philip Tsao, PhD, invited to serve in NIH Myocardial Ischemia and Metabolism Section

DOM Sweeps Teaching Awards

- Preetha Basaviah, MD, Kaiser Family Foundation Preclinical Teaching Award
- James Baxter, MD, Kaiser Family Foundation Clinical Teaching Award
- Jeffrey Chi, MD, DGIM 2009 Teaching Award
- Benny Gavi, MD, DGIM 2009 Teaching Award
- Paul Helgerson, MD, David A. Rytand Teaching Award
- David Hemsey, MD, Russel V. Lee Teaching Award
- Michaela Kiernan, PhD, Stanford Postdoctoral Mentoring Award
- Drew Nevins, MD, Arthur L. Bloomfield Teaching Award
- Lars Osterberg, MD, Kaiser Family Foundation Teaching Award
- Peter Pompei, MD, Kaiser Family Foundation Teaching Award
- Abraham Verghese, MD, Arthur L. Bloomfield Teaching Award
- Ron Witteles, MD, David A. Rytand Teaching Award

Newsworthy Mentions

New Director for PCAP
Lucinda Hirahoka, PA-C, FNP-C, MPH, is newly appointed to lead the Primary Care Associate Program (PCAP) in the Center for Family and Community Medicine. With Foothill College, the program trains 40-45 physician assistant students in a sixteen-month curriculum that focuses on primary care.

DOM Faculty Receive Grants from NIH Stimulus Funds
Amar Das, MD, PhD, was awarded $1,610,696 for an open-source tool-kit for knowledge-based querying of time-oriented data.

Mark Nicolls, MD, was awarded $298,162 in supplemental AARA funding for autoimmune pathogenesis of pulmonary artery hypertension research.

Abraham Verghese Invited to White House Town Hall on Health Care
His astute analysis of President Obama’s plans for health care reform in the compelling Wall Street Journal article “The Myth of Prevention,” led Senior Associate Chair Abraham Verghese to a seat at President Obama’s recent town hall meeting on health care reform. He was among 161 people participating in the discussion.

Global Health Scholars Program Expands to Stanford
Six internal medicine residents and five faculty members will participate in the Yale–Stanford Johnson and Johnson Physician Scholars in International Health Program led by Michele Barry, MD, FACP, Senior Associate Dean for Global Health and Director of Global Health Programs in the DOM.

Summer Awards and Promotions

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