

Tarheel Tandem

THE NEWSLETTER FOR PHYSICIANS' SPOUSES MAKING A DIFFERENCE!

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**NORTH CAROLINA
MEDICAL SOCIETY ALLIANCE**

SuEllen Fried to Speak on Bullying

*Friday, November 15, 2002, 1:15-4:15 p.m.
Grandover Resort and Conference Center,
Greensboro, NC*



SuEllen Fried, co-author of *Bullies & Victims: Helping Your Child Through the Schoolyard Battlefield*, is an international speaker on the topic of child abuse and bullying. She has appeared on Good Morning America, the TODAY Show

and MSNBC. SuEllen has delivered addresses and presented workshops at numerous national and international conferences on child abuse and neglect and has been a keynote speaker at child abuse conferences in 28 states. In addition, she travels extensively, speaking with students, educators and parents on the subject of bullying.

Mrs. Fried has been active in mental health organizations at the local, state and national levels, including an appointment in 1970 to the President's Task Force on the Mentally Handicapped. She served as a consultant to the National Institute of Mental Health and to the Center for Advanced Study and Continuing Education in Mental Health. Long an advocate for children, SuEllen founded the Kansas Committee for Prevention of Child Abuse in 1976, which served as the model chapter for the National Committee for Prevention of Child Abuse, now known as Prevent Child Abuse America. She has served as president of both the Kansas Committee and the national organization. In 1985, she participated in the Surgeon General's Task Force on Family Violence and founded the Kansas City's STOP Violence Coalition, a model coalition linking groups involved in child, spouse, elder, peer, sexual and substance abuse issues.

We invite you to join us on November 15th as Mrs. Fried speaks on the culture of bullying, the long-term effects of childhood bullying and most importantly, what we can do to "Stop the Bully Without Becoming One!" SuEllen and her daughter Paula have developed concrete solutions for parents, educators and communities on how to stop the cycle of abuse created by bullying.

What is being said about SuEllen Fried and her book, *Bullies and Victims*:

"Since the implementation of this (Mrs. Fried's) program, bullying in our school has dropped dramatically. Students have a sense of feeling safer and more respected than ever before." – *Phillip Hackett, Principal*

"This clearly written book is concise and to the point...concrete advice is given to parents, educators and therapists to help ameliorate bullying and victimization." – *Debra Reicher, Clinical Psychologist*

"I am grateful for the concrete solutions this book provides for parents and the blueprint for entire communities to reduce the devastation of bullying." – *Carolee Jones, Parent*

"This is a must read for teachers, social workers, parents and anyone else who lives with, works with or cares about children." – *Vera Albright, School Social Worker*

Invite fellow Alliance members, your community's teachers, school counselors, parents, physicians, clergy, social workers, law enforcement employees, and concerned citizens for Symposium 2002, "Bullying: Stop the Bully Without Becoming One!"

— *Ann Ashburn, Symposium Committee*



Retreat and Advance!

Summer faded, children returned to school and most of us reclaimed some semblance of routines and schedules. In late August our board retreated to the shores of Lake Norman to further prepare for a successful Alliance year, get to know each other better, understand our new job descriptions and how our individual tasks relate to the whole picture of a healthy alliance, and consider ways we can work together more efficiently to achieve our goals. With discussions facilitated by John Lovin, Strategic Planning Chair, the board began the process of reassessment of the Strategic Plan. The board reviews the Strategic Plan annually and gives consideration to any possible revisions needed, in order to keep us on track to achieve the objectives that ultimately accomplish our mission to improve the health and quality of life for the people of North Carolina.

We looked at who we are: for example, we realize the significant and continuing increase in female medical students in the future will affect our potential membership base; it will have a much higher percentage of males than in the past. If the Alliance is to remain healthy and its membership to thrive, we must embrace change and adapt. Also for your consideration will be the question of whether to follow the lead of the AMA Alliance and broaden our eligible membership to include (with certain limitations) divorced spouses of physicians and physicians themselves. Some county alliances and state alliances have already made similar changes. As these and other issues are studied, we look forward to hearing your ideas on these topics.



John Lovin reviews Strategic Plan.



Caution! Board at Work!

We also looked at where we are: John Lovin reviewed action steps determined in 2000, noting those we have completed and those yet to be done. The board will continue to address other important questions, including where we want to go and how we will get there, as this process of Strategic Plan reassessment proceeds. With your help, we are seeking the vision of what the State Alliance can be and what we can do, as all of our members across the state are dedicated to improving the health and quality of life for the people of North Carolina.



Patsy Reames (left) and Genie Hayes (right) hosted the Retreat, held at the home of Karen Holleman (center). Attendees appreciated their warm hospitality and wonderful meals.

With the retreat concluded, and its time for thoughtful contemplation, communication and decision-making, we now feel prepared to advance, to move forward into the future with the confidence of a well-founded plan for action and achievement of our goals. With your commitment and participation, these dreams will become reality.

—Karen Holleman, President



Enjoying a well-deserved break are, from left: John Lovin, Julia Floyd, Patsy Whitehurst, Renee Russell and Gay Bowman.



All work and no play? Not a chance! Relaxing at sunset are (front left, clockwise): Ginny McKay, Lynn Everett, Genie Hayes, Jamie Hosseinian, Karen Holleman, Stacey Griffin, Rachel Pace, Linda-Lee Hanrahan, and Susan Hammer.

Tarheel Tandem

Tarheel Tandem is published four times a year by the North Carolina Medical Society Alliance.

Upcoming Deadline: November 25

Changes of address should be sent to:
NCMSA Executive Director, Beth Wise
PO Box 27167
Raleigh, NC 27611

919-833-3836 • 919-833-2023 (fax)
ewise@ncmdesoc.org

Bits from Beth

Greetings from your Headquarters!

Recently, our auditor completed her annual audit of the NCMS Alliance finances for 2001-2002. We have a new auditor this year, and it was interesting to work with her as she did a number of things differently from our previous CPA firm. We were pleased that she issued the Alliance an “unqualified opinion.” This means that she found no material issues with our finances. Another way to say this is that the audit was “clean.”

I had the pleasure of attending our Board of Directors retreat and Board meeting on August 21-22. We met at Karen Holleman’s lovely home on the shores of Lake Norman. Karen had an outstanding retreat program lined up, and there was much learning, laughing, and bonding! Genie Hayes and Patsy Reames made all of the arrangements and served us wonderful meals and refreshments. It was truly a great experience and an excellent way to “kick off” the year.

Lou Ann and I are working on symposium registrations. We have received a number of phone calls and emails asking about the program. I think we have picked a perfect topic, and I am expecting a big turnout. See you there!

Please remember that Lou Ann and I are here to support you and your alliance work. Call us or email us if we can help you.



The Early Bird Gets the Worm

Wilson County Medical Society Alliance (Laura Krug, President) received funds of \$276 for an ongoing community project, “Hands Are Not for Hitting,” reaching all (approximately 1100) second graders in Wilson County. Alliance members present an interactive twenty-minute program in the classroom about good and bad ways to use hands. The presentation culminates with the students being asked to join the “Hands are Not for Hitting” club and receiving the corresponding AMAA activity booklets.

Gaston County Medical Society Alliance (Ann Kahn, President) received funds of \$400 for the first “Gaston County MSA Youth Health Fair” to be held at the West Gastonia Boys and Girls Club new facility. All high school youth in Gaston County will be invited. Teens will be educated on issues they face and ways to get help when needed. Parents will learn how to obtain help for their youth. AMAA brochures including Teen Suicide,



Eating Disorders, Youth Drug Use & Abuse, Stress, and Electronic Game Violence and the Solving the Violence Puzzles will be distributed.

Our next (and second) Grants Application deadline is November 15. Grants are available for projects and programs addressing health and health education issues. Applications and details can be found on our website www.ncmsalliance.org or contact Beth Wise at Ewise@ncmedsoc.org or (919) 833-3836.

If your county alliance needs funds to help make your health project idea a reality, perhaps you will be the next “early bird.”

—Susan Hammer,
Grants Committee Chair

Bullying-JAMA

An article in the April 25, 2001 issue of the Journal of the American Medical Association (JAMA) reports on a study that found relatively high percentages of bullying and being bullied for school-aged children in the United States. The study also found that bullying and being bullied were related to difficulty adjusting psychologically and socially. The authors concluded that bullying is a serious problem in the United States.

What is Health Literacy?

Health Literacy is the ability to read, understand and act on health care information.

Have there been times when you didn't know what your doctor was saying? Maybe you were nervous about your diagnosis or the doctor used medical terms that only another doctor could understand. Physician families are lucky. We have someone to explain those medical terms to us.

Imagine not having someone to explain that medical language. Imagine not being able to read or write. According to the 1992 National Adult Literacy Survey 90 million Americans have inadequate or marginal literacy skills. How can they successfully navigate our health care system and adequately act on the health information given to them?

These 90 million adults have difficulty with: consent forms, medicine labels and inserts, follow-up treatment plans, medical history forms, appointments, and insurance applications.

"...[W]hen they give you papers to fill out...you want to know what it means before you sign it. And when you can't understand it, you have to go ask somebody, that is embarrassing, that hurts me...sign this, sign that. I don't know what that means." – *Patient*

Low health literacy is a problem that affects people of all social classes. It is especially common among the elderly and those with chronic illnesses. People who have difficulty reading are often ashamed and hide their illiteracy from health care providers, friends, and even close family members. Literacy

researchers are frequently surprised at the poor reading skills of some of their most poised and articulate patients.

"I feel embarrassed to tell the doctor that I cannot understand. I feel really bad, that I am not worth anything." – *Patient*

Patients with low literacy are twice as likely to be hospitalized and twice as likely to report poor health. Health economists estimate that this problem costs the American health care system \$73 billion annually.

The AMA Foundation has established a Signature Program on Health Literacy and is implementing that program with the AMA. With assistance from the AMA Alliance every County Alliance President has received a Health Literacy Introductory Kit. This kit can be used to generate discussion of the issue and to help facilitate effective intervention strategies.

For more information, visit the AMA Foundation Web site at www.amafoundation.org or contact the AMA Foundation Health Literacy Hotline (800) 262-3211 ext. 5297

Information in this article came directly from and is used with permission of the Health Literacy Introductory Kit, a continuing medical education activity sponsored by the AMA.

—Rachel Pace, AMAA Health Promotion Committee

Don't Forget to Vote! November 5

Your vote does count! General elections in North Carolina are in a few weeks. It has never been more important to you and the Healthcare community to have your voice heard loud and clear.

If you are not currently registered the last day to register is October 11, 2002, at 5:00 p.m.. You can register at your local Board of Elections office or a DMV office. For your location you can check the State Board of Elections website at www.sboe.state.nc.us.

Time is not an issue in North Carolina as our election laws have been changed to allow absentee voting and in many counties One-Stop-voting prior to the election date without an excuse. What this means is that you can request an absentee ballot or if One Stop is available in your county you can vote prior to November 5, 2002. To request an absentee ballot you simply call your county Board of Elections and they will send you an absentee ballot request form. One-Stop voting simply means that some counties have a location (usually the Board of Elections office) that is available for early voting. Hours and locations vary so the best way to find out about this is through your local Board of Elections or the State Board of Elections at 929-733-7173 or visit their website www.sboe.state.nc.us.

Below are listed the statewide races but also get involved with your local legislators. Election time is a great opportunity to find out how your candidates/incumbents support the medical healthcare community.

Democrat Republican Libertarian

US Senate

NC Supreme Court

NC Court of Appeals

Please VOTE in the election November 5, 2002!

—Renee Russell, Vice-president for Legislative Affairs

North Carolina Physicians Health Program

Improving the quality of health care for the people in North Carolina through assurance of healthy medical professionals

For more than 13 years, North Carolina Physicians Health Program (and its earlier incarnations) has been available to assist physicians and, more recently, physician assistants, who potentially suffer from any form of impairment that could prevent them from practicing safely. Confidentiality and anonymity are key elements of the program. The names of those reported to North Carolina Physicians Health Program (NCPHP) are carefully guarded. In addition, the anonymity of our information sources is protected by law, so referrals to our program can be made without fear of repercussions or reprisal.

The generally accepted definition of "impaired practitioner" includes those with chemical dependency (alcohol, illicit or prescription drugs, etc.), mental illness, behavioral or occupational problems, physical illness, or aging problems that render the healthcare professional unable to care for his or her patients with reasonable skill, attention, or safety. NCPHP is available to aid any physician or physician assistant (PA) whose health and/or effectiveness have been significantly impaired by any of the aforementioned issues.

How the Program Works

The North Carolina program is designed to identify and assist troubled physicians and PAs before they endanger a patient or themselves. It is also our desire to be working with the affected physician/PA before the problems are reported to the NC Medical Board, or before other repercussions, (i.e. legal complications, family problems) enter the picture. While dangerously impaired practitioners must by law be reported to the NC Medical Board, a successful intervention program may help make drastic action – such as medical license revocation – unnecessary. When a possibly impaired practitioner is reported to NCPHP, one (or both) of the medical directors evaluates the available information and determines if a problem exists. If it appears follow-up is warranted, the medical directors approach the troubled colleague, do an in-depth assessment of the situation, and attempt to persuade him or her to begin an appropriate course of treatment.

In the case that a monitoring contract is deemed necessary, terms vary according to individual cases, but a standard contract for chemical dependency encompasses five years. Follow-up monitoring, provided by NCPHP Field Coordinators and volunteer monitors, is provided to help guard against a recurrence of the problem.

How well does the program work?

Nearly 90 percent of North Carolina physicians and PAs



participating in our program are in recovery and have actively returned to the practice of medicine. Of course, in psychiatric or behavioral issues, precise results are more difficult to gauge, but the affected professional can expect to benefit commensurate with his level of acceptance and cooperation.

Common Warning Signs of Impairment

Attitude/Behavior Changes:

- Rapidly turns from compassionate and caring to abrupt, caustic
- Withdraws from friends and activities
- Becomes mistrusting, anxious, depressed, irritable

Physical Changes:

- Loss of appetite or reduced level of exercise
- Appears tired; admits to insomnia
- Personal hygiene deteriorates
- Physical problems are self-treated

Performance Changes:

- Misses appointments
- Makes rounds at unusual hours
- Can't be reached when on call
- Sloppy charting
- Smell of alcohol on breath during the day

Effects on Relationships:

- Family communication deteriorates
- Frequent arguments; spouse blamed
- Spouse abuse, child abuse
- Children with poor school performance
- Jealousy, infidelity
- Separation, divorce

Confidential assistance or more information on NCPHP is available by calling our office in Raleigh at 800-783-6792 or 919-870-4480.

—Gail Grady, NCPHP

2002
North Carolina
Medical Society Alliance
Symposium

Registration Form: (Please complete and mail with payment.)

Name: _____

Phone _____

Address _____

City, State, and Zip _____

Email _____

Organization _____

General Admission _____ \$35

Student _____ \$15

Payment by check or credit card (Mastercard and Visa only)

By Charge: _____ (see below) By Check: _____

Please note: This charge will appear as a charge to the North Carolina Medical Society on your credit card statement.

PLEASE PRINT

Visa _____ Mastercard _____

Expiration Date: _____

Name On Card: _____

Card Number: _____

Signature: _____

Date: _____

Return form with payment to:
NCMS Alliance, P. O. Box 27167, Raleigh, NC, 27611-7167

The Personal Touch

If you are like me, you spread yourself thin. There are many organizations and charities to which I just cannot say “no.” My father is a 20-year cancer survivor, and I have proudly organized our county’s Relay For Life for the last two years.

The Community Free Clinic, Meals on Wheels, our local hospital foundation, the kids’ school and the Alliance all get some of my time as well as monetary support.

Why these organizations? Two reasons: 1) They have a personal meaning to me. I care about what they do for the community and feel that I make a difference in the world by participating. I clearly understand what they are trying to do, and I want to help. 2) Someone personally asked me to join!

In order to increase membership in your local alliance, it is first crucial that a potential member understands your mission in specific terms: what you do that contributes to the community or makes a difference. It can be as simple as one annual volunteer project, or your alliance may raise funds for several local organizations. Perhaps your alliance concentrates on social functions that serve to bring the medical community closer together and to help families feel welcomed and supported. Whatever you do, it has to be communicated passionately so that potential members feel they have a personal link.

Secondly, a verbal invitation to join can make all the difference. If each current member personally asked someone to join, you would see a marked increase in membership.

Taking the time to talk with someone directly about the Alliance is so important. It lets them know that we need them and that their membership will make a difference, not only to the community, but also to you personally. It is hard to say no to a friend!

Membership efforts must become the focus of all members in the Alliance, not just the membership chair. If each current member feels strongly about what their alliance is accomplishing, then they can help recruit new members through sharing their excitement and personal experiences.

Ask your members to pick up the phone and ask just one person to join or renew their membership today. This personal touch will go a long way in helping to differentiate the Alliance and in making our organization the one they want to join.

—Stacey Griffin
Vice-President for Membership Development



Strategizing on publicity, format and fundraising for the “Stop the Bully!” Symposium are, from left: Marilynn Walls, Ginny McKay and Ann Faris.

Preventing Violence in America

We in the health professions pledge to make violence prevention one of our highest priorities. Working with educators, judges, lawyers, psychologists, social workers, police, community activists, clergy, and others, we will take a firm stand against the violence that is devastating families and communities throughout this country. More school suspensions and more prisons are not the answer. The answer, rooted in public health, is PREVENTION. The Commission For the Prevention of Youth Violence and Prevention includes the American Medical Association Alliance, American Medical Association, US Department of Health and Human Services, American Academy of Child and Adolescent Psychiatry, American Academy of Family Physicians, American Academy of Pediatrics, American College of Physicians-American Society of Internal Medicine, American Nurses Association, American Psychiatric Association, American Public Health Association). The Commission's Call To Action is all about SAVE (STOP AMERICA'S VIOLENCE EVERYWHERE).

SAVE is a major focus for the AMA Alliance. This award-winning program provides support and publicity to organizations that help victims of violence and educate communities about this preventable yet deadly disease. Our

North Carolina County Alliances have a long, proud history of working with students on conflict resolution, anti-violence programs, health education centers, shelters, health fairs, and playgrounds, just to name a few. Our statewide symposium on BULLYING to be held November 15 in Greensboro goes to the root of violence to help us stop the spread of violence at its beginning!

AMA Alliance Resources web: www.ama-assn.org/alliance
e-mail: AMAA@ama-assn.org phone: 312-464-4470 and fax: 312 464-5020

Activity booklets and other resources include: I Can Handle Bullies, Hands Are Not For Hitting, I Can Be..., I Can Choose, I Can Be Safe, Be a Winner: Shape Up for Life, Monitor the Media, SAVE Program/violence, Hands and SAVE T-shirts, etc.

"SAVE Today" is an initiative highlighted across the country on the second Wednesday in October each year; yet it is an ongoing commitment by the AMAA, NCMSA, and our individual counties TO IMPROVE THE QUALITY OF LIFE IN OUR COMMUNITIES. As the only national volunteer organization committed to public healthcare and safety, we are our nations' "Hands," which we teach "...Are Not For Hitting!"

—Ginny McKay, Vice-President for Health Promotion

Law and Order

The NCMS Alliance began a strategic planning process over two years ago that culminated in August with the approval of organizational and financial policies and the distribution of new leadership guides. Like many other non-profit organizations, the NCMSA recognized that the changing demographics of society were having a direct bearing on our alliance. In the summer of 2000, the Strategic Planning Committee engaged an organizational consultant and considered questions such as what is our mission, who are our members and potential members, what projects and programs do we support, how will we finance our organization, and how could we operate more efficiently and effectively.

At the state alliance annual meeting in November 2000, the House of Delegates voted to give the Board of Directors the authority to restructure the organization, with recommendations to be presented at the 2002 House of Delegates. Next, the Strategic Goals and Action Plans were developed and approved early in 2001. Using those plans as a guideline – specifically Goal IV, which is to complete the reorganization of the Board of Directors and the Executive Committee – the Bylaws Committee began working in June 2001 on drafting the bylaws. The committee members are Rachel Pace (Wilmington), Peggy Hurt (Sylva), Karen Holleman

(Cornelius), Susan Hammer (Raleigh), Gay Bowman (Greensboro), and Executive Director Beth Wise.

Sweeping changes in the bylaws were approved at the annual meeting in High Point on May 4, 2002. The size of the board of directors was reduced from over 35 to 16, the number of pages from 30 to 13. Roberts Rules of Order defines bylaws as a document adopted by an organization, which contains the basic rules for governing itself and describes how the organization will function, noting that bylaws should help not hinder the organization.

The Bylaws Committee and the Board of Directors believe we have succeeded in meeting these criteria. The new bylaws were drafted to be user-friendly, flexible, and concise, but at the same time maintain the integrity, legality and intent of our organization. The details and the "how-tos" were put in the organizational and financial policies and in job descriptions for board and committee members. This information has been assembled into notebooks for the state board members and leaders of the local alliances. If you are interested in receiving copies of the bylaws, policies or job descriptions, please contact the state headquarters at 919-833-3836 or visit the website at www.ncmsalliance.org.

—Gay Bowman, Bylaws Committee Chair



Do you worry about your child? ... Grandchild?

Take one afternoon to learn how to help your loved ones navigate the schoolyard battlefield!

Don't miss this exciting, statewide opportunity to learn from the expert!

Your children may miss you on the 15th of November, but they will thank you over and over!

CALENDAR OF UPCOMING EVENTS

2002

October

- 9 SAVE Today (Stop America's Violence Everywhere)
- 6-8 AMAA Leadership Confluence I (Chicago, IL)

November

- 7-11 SMA Auxiliary Annual Meeting (Washington, DC)
- 14-15 NCMS Alliance Fall Meeting (Greensboro)

Committee and Board Meetings

- 15 Annual Health Education Symposium (Grandover Resort, Greensboro)
- 14-17 NC Medical Society Annual Meeting
- 30 Tarheel Tandem Deadline

2003

January

- 2 Resolutions for NCMSA House of Delegates Deadline
- 15 NCMSA Membership Retention Mailing (to unpaid state members)

February

- 2-4 AMAA Leadership Confluence II (Chicago, IL)
- 13 NCMSA Board and Committee Meetings (Raleigh)

Tarheel Tandem

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