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C O M M U N I T Y

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BUMC panel weighs merits of Clinton health plan

The Clinton Administration's health care reform plan was discussed with cautious enthusiasm at Boston University Medical Center on Thursday, Sept. 23, at a forum featuring BUMC leaders and other members of the local health care community. The symposium, held in the newly renovated Bakst Auditorium in the School of Public Health, drew a standing-room-only audience of students, employees, faculty and administrators.

"I applaud the President,

because this is about access," said John Cradock, chief executive officer of the East Boston Neighborhood Health Center and one of the seven panelists. "If in my lifetime [this country] could see universal entitlement only—not that I don't want a lot more—I'd be delighted," he said. "I didn't believe that it could happen until very recently."

Panelist Michael Eliastam, MD, MPP, medical director of Boston City Hospital, shared this sentiment. "I was very pleased that my decision to vote for

[Clinton] was a good one," he said. "I really think he is going to do great things."

In fact, all seven panelists, as well as School of Medicine Dean Aram Chobanian, who moderated the event, expressed general support for the President's mission. All panelists agreed that health care delivery in America must change, and that the debate stimulated by the presentation of the Clinton plan is much-needed and overdue in a country where foreign policy seems to have taken precedence for years.

"It's exciting to hear a

presidential address on a major, important domestic issue," said Robert Meenan, MD, MPH, director of the School of Public Health. "Now that we don't have to perhaps worry about a bomb arriving on our doorstep from the Soviet Union, we can focus on very important issues of domestic policy," he said.

On the specifics of the plan, the panelists were more cautious, each assessing the reform proposal from the perspective of their areas of expertise. As a group, they touched on all major elements of the plan, which were outlined by the president as security, savings, choice, quality, responsibility and simplicity.

Cradock, Eliastam and

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BUMCH-SPONSORED EVENT MAKES STRIDES AGAINST BREAST CANCER

Undaunted by the rainy weather, scores of Boston University Medical Center Hospital walkers joined a crowd of approximately 4,000 supporters in the Making Strides Against Breast Cancer benefit walk on Sunday, Sept. 26.

BUMCH served as the flagship sponsor of this event, which, according to the American Cancer Society, raised an estimated \$350,000. The funds raised will directly benefit local efforts to fight breast cancer

through research, early detection and advocacy, and will also go to funding rehabilitative support services.

"It was heartwarming to see so many people having the gumption to stand in the mud on the Esplanade early that morning, waiting for the walk to start," says Joannie Jaxtimer, BUMCH's director of marketing, communications and public relations. "It really sent a message about how important it is to find a cure for the devastating disease that breast cancer is."

About an hour before the start of the walk, which began and ended on the Esplanade, words of encouragement about the walk, as well as information about breast cancer, were offered to the crowd from the Hatch Shell by BUMCH surgical oncologists Maureen Kavanah, MD, and Marianne Prout, MD, MPH, and radio and local television personalities representing the walk's media sponsors—WHDH-TV/Channel 7 and WMJX FM.

BUMCH encouraged the involvement of employees, who signed up with their families and friends. BUMCH's volunteer organization, The Friends of The Hospital, also contributed funds to the walk through efforts spearheaded by the organization's president, Sonia Nersessian.

"The Hospital was proud to be an integral part of this important event," said Jaxtimer. "We intend to lend our efforts in support of the walk in order to ensure its continued success."



Enthusiasm was not lacking at the first annual Making Strides for Breast Cancer walk on Sept. 26. Several families signed in at the Hospital (pictured at left) before heading to the Esplanade, where, above, surgical oncologists Marianne Prout, MD, MPH, left, and Maureen Kavanah, MD, middle, both members of the BUMCH Breast Health Center, along with WHDH/Channel 7 news anchor Margie Reedy, fired up the crowd in preparation for the 5.7-mile trek.



Partnership spurs construction of outpatient dialysis facility

Dramatizing BUMCH's continuing efforts to respond to the demands of a changing health care market, ground was broken recently for the REN Center-Boston Dialysis Clinic. The partnership between REN and BUMCH represents the Hospital's latest arrangement to provide affordable, convenient health care in the South End.

The outpatient dialysis facility is being built on Harrison Avenue between East Canton and East Dedham Streets, and its development comes as a result of an agreement between the REN Corp. and BUMCH. Under the agreement, REN Corp., a Tennessee-based national provider of renal dialysis services, has assumed the man-

agement and treatment of any BUMCH outpatient who needs such services, regardless of his or her financial status, while BUMCH continues to provide inpatient tertiary care to these patients. REN will also staff the Hospital's acute renal dialysis service for inpatients.

All patients will continue to be cared for by the physicians of the BUMCH Section of Renal Medicine. Yvonne O'Meara, MD, a member of the renal staff, will serve as medical director of the new center.

By providing affordable care in a convenient location, "REN and BUMCH are responding to the clear national mandate for more rational health-care delivery," said Hospital President J. Scott

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Panel examines how violence affects children

The need for adults to recognize the impact and repercussions that violence in the community has on children was the central focus of a forum held last month at Boston University. The panel, comprised of a variety of local leaders and educators, included William Bratton, commissioner of the Boston Police Department and Massachusetts Attorney General Scott Harshbarger. The forum was sponsored by the Department of Pediatrics at Boston University School of Medicine (BUSM)/Boston City Hospital (BCH) and The Endowment for Children in Crisis, a local nonprofit organization.

The speakers focused on the importance of treating children emotionally scarred by witnessing violence in the community and the need to root out the violence itself. While they all characterized the current situation as dire, the panelists also expressed some optimism that the problem can be solved.

"These are hard times," said Bratton, acknowledging that many people are scared

for their future, and the future of their children. "But one of the good things about fear is that it generates awareness, and awareness generates solutions and success, and that's what we need to be talking about," he said.

Moderator Barry Zuckerman, MD, chairperson of the Department of Pediatrics at BUSM/BCH, agreed. "It is really important, at all levels, that we think and believe we can make a difference," he said.

Harshbarger advocated a major effort to do just that. "If we as professionals care about this issue and don't respond, we fail not just ourselves, but sadly, we fail the children, and we have failed them long enough."

Harshbarger minced no words in pin-pointing the real problem. "The fact is that if any of the results of studies that are produced by Boston City Hospital had occurred in a pediatric clinic in Wayland, Weston or any major suburban community, we would have already rallied the troops to deal with the short term causes and the begun to address the underlying causes

of how could it occur," he said. "We, in fact, accept as inevitable a level of violence in our urban communities that would never be tolerated in any other community in this state. That is why the issue of violence as it relates to children, not just as victims but as witnesses, is not only a major public protection and public safety issue, it is a major civil rights issue. Some communities are being denied equal protection and equal justice, and our children are paying the price."

"This is not a problem for police and prosecutors alone," Harshbarger continued. "If we think we are going to solve this problem by having more jails, more police, more prosecutors... the death penalty, we will absolutely fail." The bottom line, he said, is that the city of Boston has to solve the problem, and that will require educational programs that teach youth how to listen to each other and resolve conflict without resorting to violence. Comprehensive safe neighborhood efforts are now being instituted to make headway in this effort,

he said. It will take the efforts of city leaders as well as parents to reach a long-term goal of curbing violence in the community, Harshbarger said. "The reality is, we taught our children all these things," he said. "What do they see? The vast majority of children today, especially in urban communities, grow up with violence on the streets, violence in their homes, violence on television, violence as a matter of national policy, in fact, violence is the dominant way to respond to any situation."

In the short term, he said, aid has to be offered to the victims of violence, especially in the home, where violence is prevalent in society today. Programs for battered women "who are trying to break out of the cycle of family violence with their children," for example, need to be increased, Harshbarger said.

Bratton also noted the importance of providing positive role models in the community, noting the "need for police to be much more than just the individuals who come onto the scene, make the arrest and just move on."

"Police need to be much more involved in the idea of how we can get better in the game of preventing violence in the first place, and we have to understand that violence does impact our youth," he said. He noted that the Boston Police Department has

set a goal of becoming less desensitized, and he said he hopes to inundate the local community with officers on the "neighborhood beat."

To address the impact that violence has already had on the children in Boston, two of the panelists called for increased attention to treatment. "It's time to recognize violence as the serious public health threat that it is," said panelist Jeanne Taylor, PhD, executive director of the Roxbury Comprehensive Community Health Center. "When we talk about impact," she said, "it is not only on the children, but violence impacts on us as providers, as citizens, as neighbors, and as human beings." This problem of violence is "a disease that can't be cured with a Band-Aid," she said.

Leland Clarke, EdD, an elementary teacher in the Boston Public School Department, agreed. "All of us as adults need to allow children to express what's going on inside them," he said. "It is time for us to shut up and listen, listen, listen, and then respond." Clarke likened his idea to attending a funeral: You don't have to say anything to the bereaved, because just being there means so much.

The BUSM/BCH Department of Pediatrics and The Endowment for Children in Crisis plan to hold similar forums in the future.

GILLER HONORED FOR YEARS OF SERVICE TO COMMUNITY



The Worcester Square Area Neighborhood Association (WSANA) recently honored Donald Giller, BUMCH's former vice president of regional operations, for his years of committed service to the local community. WSANA President Ron Blanchard, left, presented Giller with two citations during a program held in Giller's honor at the Hospital on Tuesday, Sept. 28. One proclamation was presented on behalf of acting Boston Mayor Thomas Menino as a gesture of appreciation for Giller's work as President of the Interinstitutional Transportation Management Association, a consortium comprised of Medical Center and Boston City Hospital representatives that is working to improve public transportation services to the South End medical area. The second proclamation was bestowed on Giller by the WSANA as an expression of thanks for his dedication in working with the association and the South End. Giller, who resigned from his Hospital position last month to pursue other career ventures, worked at BUMCH for more than 21 years.

Dental problems prevalent among the disabled: Partnership formed to improve quality of care

As the nation presses toward health care reform, a handful of institutions are working together to ensure that one aspect of health care is not overlooked: dental care for people with physical or mental disabilities or who are mentally retarded. Access to dental care has long been a problem for the nation's estimated 43 million people with physical or mental disabilities. Many have no way of paying for treatment, and few professionals are trained to treat them. Often, dental care is simply not seen as a priority for people with so many other, more pressing medical concerns. In order to address the problem, which ultimately results in serious and costly complications, Boston University's Goldman School of Graduate Dentistry has formed a partnership with the Academy of Dentistry for

the Handicapped and Oral Health 2000, a national preventive dentistry initiative, to improve access to dental care for people with special needs. The partnership was announced at the recent Second Oral Health 2000 National Consortium in Washington, D.C. The partnership, which has already won the support of Special Olympics International, is the result of a program that was held earlier this summer, when the GSGD teamed up with the Massachusetts Special Olympics to offer the first-ever dental screening at the state's 1993 Summer Games. More than 700 athletes participated in the screening and countless others received much-needed dental education, as well as a list of local dentists who provide care to people with special needs. According to screening organizer Steven Perlman, DDS, MScD, an assistant clinical

professor in pediatric dentistry at the Goldman School, several athletes screened there had not received professional dental care in more than 10 years. The initial phase of the project will focus on preparing educational materials and marketing the Special Olympics screening concept to dental schools around the country. In the second phase, continuing education courses and pre- and post-doctoral guidelines will be developed for dental professionals. In the third and final phase, nutritional guidelines for Special Olympics will be created, and the data from all Special Olympics screenings will be compiled and published.

SPH signs unique agreement with Peace Corps, Housing Authority

The School of Public Health recently signed agreements with the Peace Corps Fellows/USA Program and the Plymouth Housing Authority that, together, establish a unique fellowship program for returning Peace Corps volunteers.

Under the program—the first of its kind between the Peace Corps and a U.S. housing authority—13 returning Peace Corps volunteers will apply their overseas experience to the problems facing tenants in Massachusetts housing projects. In return, they will be granted fellowships to pursue master of public health degrees at the School of Public Health simultaneously. The volunteers will live and work at various housing projects

across the Commonwealth, conducting programs in substance-abuse prevention, family self-sufficiency training and violence reduction.

The Plymouth Housing Authority is just one of several housing authorities throughout the Commonwealth that the School will work with, including those in the local area.

"We hope that this program will be a model for the rest of the country," said Henry Fernandez, director of the Peace Corps Fellows/USA Program.

Jonathan Howland, PhD, MPH, MPA, an associate professor of public health, who played a key role in the program's development, pointed to the multiple interests served by the program. "From the perspec-

tive of the Peace Corps, it brings the investment in overseas experience home to contribute to situations here; it allows the housing authority to begin to address the health and social needs of its residents, and it begins to build links between the community and the School of Public Health," he said.

The director of the SPH, Robert Meenan, MD, MPH, pointed out that the program reflects the SPH's broad mission, which includes working with populations at high risk for health problems. The "broad concept" of health—which includes such factors as education, income and housing—is central to the School's mission, he said. "This program speaks directly to that issue."

Quit smoking with Hospital program

Smokers who want to kick the habit have only to enroll in BUMCH's "Toss 'Em For Good" stop smoking program which is being offered to anybody seeking assistance in smoking cessation.

The five-session group program is under the direction of Margo Mitchell, RN, an experienced counsellor, who has utilized her program with the cardiac rehabilitation population for two years. Each group consists of 12 to 15 members, but the program is individually tailored to meet the needs of each participant. Methods taught as part of the

program include relaxation techniques, self-hypnosis, weight management, and the proper use of nicotine patches (in cooperation with an individual's physician).

Sessions are held in the conference room at the Cardiovascular Exercise Center located on the third floor of the Preston Family Building. Each program's five sessions are held over five consecutive weeks. The five-week rotation is continuous, so there is always a program running. The one-time fee for the program is \$100. For more information and to enroll, contact Mitchell at 638-8720.

For answers to questions about cancer and other general health concerns, pick up the phone and call us...

BUMC CANCER HELPLINK
1-800/524-8541

BUMC HEALTH CONNECTION
617/638-6767



First BioSquare building opened on Oct. 14

The grand opening of the Center for Advanced Biomedical Research, the first building and a key element of BioSquare, a \$350 million development being undertaken by Boston University and BUMCH, was held on Thursday, Oct. 14, at the 700 Albany St. site.

The Center for Advanced Biomedical Research has nine working floors, 180,000 square feet of research space, 5,400 square feet of retail space, modular laboratory space, advanced environmental control systems, and a state-of-the-art animal-care laboratory facility.

The building will house key elements of the School of Medicine and the Goldman School of Graduate Dentistry: the Whitaker Cardiovascular Institute, the Department of Biophysics, the Center for Human Genetics, the Department of Periodontics, GSGD's Division of Oral Biology, the Department of Urology, the Department of Cardiology and the Animal Laboratory Science Center. The medical campus bookshop will also relocate to the new building. The process of moving will continue through Dec. 20.

#10 bus route service increased

Thanks to successful negotiations between the MBTA and the Interinstitutional Transportation Management Association (ITMA), service on bus Route #10 (City Point/Copley Square) has increased, on a trial basis.

The #10 bus, which offers service to Andrew station (Red Line), Back Bay station (Orange Line) and Copley station (Green Line), now runs every 15 to 17 minutes (up from the previous every 25 to 30 minutes) during weekday peak hours. Additional trips are now available on Saturday, as well as a new service on Sunday. Because this is a pilot project and the MBTA will be evaluating the number of riders regularly, ITMA urges medical area employees and residents to use this service.



BUMC PANEL
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Meenan shared the panel with Richard Egdahl, MD, director of BUMC; Spencer Frankl, DDS, dean of the Goldman School of Graduate Dentistry; Patricia Barry, MD, MPH, chief of geriatrics at BUMCH, and Wendy Mariner, JD, MPH, professor of public health (health law) and socio-medical sciences and community medicine at BUSM/SPH.

Hospital President J. Scott Abercrombie, MD, was unable to participate in the event because he was at the White House Rose Garden that afternoon, having been invited to join the President and Hillary Rodham Clinton, as well as other academic health center professionals, in a kickoff event marking the beginning of the Clinton health care reform campaign.

BUMC Director Egdahl was optimistic about the role academic medical centers play in Clinton's plan. "One thing that is very good from our perspective," he said, is that "there is \$6 billion in there for such things as academic medical centers." How these funds will be spent is yet to be determined, he pointed out, but that money would be in addition to the kinds of reimbursements received from hospitals.

Though research will be funded, Egdahl said the Clinton plan will not alleviate payment problems that face hospitals now. Decreases in Medicaid and Medicare and reduced physician fees will continue to mean cuts in hospital budgets, he said. Under the Clinton plan, "there will be a very different kind of situation" Egdahl said.

"Primary care doctors will do better than they have in the past [and] we will phase out about 30 percent of specialty residencies over the next several years and increase primary residencies up to 50 percent or more" if the Clinton plan is passed. "This will in effect be by government fiat," Egdahl said. BUMC is already positioning itself for the future by vigorously promot-

ing primary care through programs such as the Generalist Physician Initiative and the Center for Community Health Education Research and Service (CCHERS).

Eliastam supported BUMC's efforts to bolster its

lacking," he said. No matter what a person's circumstance, he added, all American residents should be covered by a health care plan.

Mariner, while expressing pleasure with the Clinton



BUMC's first forum on health care reform drew a large crowd. Panelists were, from left, Wendy Mariner, JD, MPH, Richard Egdahl, MD, Patricia Barry, MD, MPH, Spencer Frankl, DDS, John Cradock, Robert Meenan, MD, MPH, and Michael Eliastam, MD, MPP. Aram Chobanian, Dean of BUSM, pictured at right, served as moderator.

primary care service. BUMC "absolutely has to become known as a place that is terribly committed to primary care in all its ramifications ... in order to survive," he said. To carry out this mission, he said, BUMCH and BCH must unite and integrate services as soon as possible. This plan is already being developed.

Goldman School of Graduate Dentistry Dean Frankl applauded the reform package's commitment to insure dental care, initially for children, and later for adults. "I'm very pleased that the Clinton plan will include dental care as part of its reform package," he said. "Perhaps tomorrow, as a result of this health care reform package, dental treatment will no longer be considered discretionary or optional, but rather will be considered necessary, vital and valuable, especially for

plan's emphasis on universal access, said that she saw "irony in the fact that it only comes as the result of a financial crisis, not some enlightenment about our own ethical obligations to society." Still, she said, "I'll take it."

In assessing the proposal's plan for the fastest growing population in America, the elderly, geriatrician Barry was cautious, saying that the specifics of the plan concerning the elderly were difficult to discern at this point.

She did, however, note what she thought a commitment to "a continuum of care" for the elderly should be part of the plan. "One of the things I would like to see addressed, if we formalize this plan," she said, "is some sort of attention to how to move elderly people through different aspects of the system so that they can be where they need to be and receive the appropriate level of care based on their need at the time."

Meenan noted the importance of incorporating public health practices into a health care reform plan. Programs addressing such issues as teenage pregnancy, drug addiction, and AIDS must be structured and funded in order for health care reform to work, he said.

As the panel discussion demonstrated, there are numerous components of the Clinton plan, and these now must be scrutinized

and digested by Congress. Senate hearings on Capitol Hill and field hearings around the country have already begun.

Egdahl cautioned that the Clinton plan will undergo significant changes while it travels through the halls of Congress.

REN CLINIC
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Abercrombie Jr., MD, at the groundbreaking ceremony. Construction on the site is progressing swiftly, and the clinic is expected to open in mid-1994.

The REN Corp., selected from a large field of candidates, was chosen because of its "tradition of excellence in quality of care," says David Salant, MD, chief of the BUMCH section of renal medicine.

The proposal has received a warm response from the South End community itself. "We are very serious about our welcome," said South End State Rep. Byron Rushing during the ceremony. "We hope [BUMCH] will continue to be a good neighbor to the South End."

REN Corp., the fourth largest provider of kidney dialysis services in the country, has relationships with several other teaching institutions and has a reputation for bringing the critically needed health care service of renal dialysis to rural areas. The REN clinic, which will be housed in a three-story, 33,000-square-foot brick building with 48 surface parking spaces, is the REN Corp.'s first clinic in Massachusetts.

The renal dialysis program at BUMCH has been in service for many years, says Salant. Until now, the Hospital often has had to send those in need of outpatient care to other clinics located elsewhere in Boston. This arrangement put a strain on the physician/patient relationship, as visits were infre-

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Breaking ground at the site for the REN Center-Boston Dialysis Clinic are, from left, Hospital President J. Scott Abercrombie Jr., MD, REN Corp. President and CEO Lawrence Centella, State Rep. Byron Rushing and REN Corp. Chief Financial Officer Brad Wear.

quent due to the distance of travel, Salant says. With the convenient location of the REN clinic, patients and their physicians here at the Hospital will be in much closer contact.

In addition to meeting the health care needs of local dialysis patients, the Clinic will create employment opportunities for the residents of the local community, according to REN officials. The landscaping, including the addition of trees and lights, will also bolster the physical environment of the area.

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"It's exciting to hear a presidential address on a major, important domestic issue."
.....

—Robert Meenan, MD, MPH.

our nation's children. Today, dental care is mandated for all residents in our correctional systems, while dental care for children has, to date, never been mandated."

Eliastam, meanwhile, took issue with the fact that the Clinton plan for universal care excludes illegal aliens and prisoners. Picking up on Frankl's remark about prisoners, he said, "While [prisoners'] dental care is good, their health care is