

# **Annual Report** 2012-2013

July 1, 2012 – June 30, 2013

Department of **Family & Community Medicine** 

UNIVERSITY OF NEW MEXICO SCHOOL OF MEDICINE



## **CLINICAL & COMMUNIT**

RESEARCH

**SUBMITTED BY:** 

**EDUCATION** 

MARTHA COLE MCGREW, M.D., CHAIR

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## **Chairs Message**



The Department of Family & Community Medicine is a department of innovative and diverse faculty and staff committed to the mission of improving the health of New Mexico citizens through the provision of clinical and community service, education, and research.

We educate Family Physicians, Physician Assistants, and Public Health experts to address the health and healthcare needs of our state. As part of the clinician education, there is an opportunity to complete a Public Health Certificate. All of our residents complete a longitudinal community project. Most of these projects are in communities that are underserved medically. Our Masters in Public Health graduates are serving the state in the Department of Health

and other government agencies and in my community groups and organizations around the state. We also have two fellowships- one in Maternal Child Health and one in Primary Care Sports Medicine.

Our research is focused on reducing health disparities and improving health services, particularly through Practice-based Research and Community based Participatory Research. Our reseachers work with communities around the state to identify the communities health needs and priorities' and to develop and evaluate programs to address the health needs. This year our Department was ranked 6<sup>th</sup> in the nation in NIH funding to Family Medicine Departments.

We provide clinical service throughout the continuum of life from pregnancy and birth to geriatrics and palliative care. In addition we have a number of programs that focus on special needs and underserved patients in our state- including Milagro (opioid addictied pregnant women) and Focus (for high risk children and families), TEASC (for developmentally disabled patients), corrections medicine for juveniles who are incarcerated, and community clinics at One Hope and Pajarito Mesa.

We are currently ranked 3rd in the nation in US News and World Report for Family Medicine residencies. We have received a Top Ten Award from the AAFP for the past three years for having a high percent of medical students from our medical school choose a career in Family Medicine.

We are honored to be part of improving the health of our state.

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Martha Cole McGrew, M.D. Professor & Chair Department of Family & Community Medicine University of New Mexico School of Medicine

## **Mission Statement**

The health and well-being of our stakeholders are measurably improved by the clinical, educational, research, community, public health, and institutional engagement activities of the Department of Family & Community Medicine. As well, we strive to make our work a place of well-being and satisfaction so that we may all contribute to our vision.

## **Vision Statement**

The Department of Family & Community Medicine (DFCM) is an enthusiastic and dynamic environment where faculty, staff, and students are engaged in learning, scholarship, collaboration, and providing effective healthcare. We partner with many communities in both rural and urban New Mexico in our mission areas. Our culturally diverse population is one of our strengths, with a spirit of equity, partnership and respect permeating our community, both internally and externally. Our curricula are designed to be innovative, practical, and relevant to the community's changing needs.

Graduates of our medical school, Master of Public Health, Physician Assistant, and residency programs experience success and are academically prepared to take advantage of myriad opportunities in family and community medicine and public health policy and advocacy. Our faculty and learners are engaged in learning together in our classrooms, clinics, and communities focusing on high quality and compassionate service to individuals while integrating public health and medicine so that they may improve the health of communities.

Our faculty and learners provide access, quality and safety, a whole person perspective, cost, and integrated services to our patients and our communities - in the university and in the community. We work in interdisciplinary teams to provide the best care for our patients.

Our faculty and staff experience a sense of accomplishment and are held in high esteem. They are known as team players, are competent, effective, and committed to professional growth. Collaboration with each other, with other departments and programs in the HSC and with the community is one of the keys to our success.

Our goal is to stretch the boundaries of educational innovation, provide exceptional patient care, and to increase relevant contributions to academic scholarship, leadership, and the development of faculty, staff, students, and patients.

## **Description of the Department**

The DFCM is a diverse department with over 186 employees who seek to improve the health of the people and communities of NM through the education of medical students, residents, physician assistants, public health students, community physicians, and faculty, through innovative educational programs, research initiatives, individual patient care, service, population health interventions, and health policy development.

The Department is managed by a Department Chair, Associate Department Chair, an Administrator, and six Vice Chairs that oversee the different programs within the department.

The DFCM is charged by the Chancellor for Health Sciences, to assume leadership within the University of New Mexico in mobilizing its educational, service, and research innovations to measurably improve the health of New Mexicans. The DFCM has a track record of developing, implementing and institutionalizing educational, community-based and public health innovations into the curriculum.

Family and Community Medicine faculty, staff, and resident trainees will continue to play crucial roles in the health of New Mexico's diverse and medically underserved populations. In addition, the Department continues to recruit and retain health professions graduates to areas of need, and help reshape institutional priorities and programs to meet community-prioritized needs.



### **Significant Achievements**



**Dr. Kay Bauman** was hired as the Medical Director of the Department of Public Safety through the Department of Family & Community Medicine – University of New Mexico.



**Dr. Lisa Cacari-Stone**, was selected for the 2013 Apple for the Teacher in the UNM HSC Biomedical Sciences Graduate Programs for her excellence in teaching. Apple for the Teacher provides students an opportunity to nominate and recognize teachers that have made a difference in their lives. She received excellent teaching evaluations from her students in Health Policy, Politics and Social Equity.



**Dr. Lawrence Leeman** introduced Basic Life Support in Obstetrics program in India, which has now trained over 3000 emergency medical personnel and is managing editor of ALSO program

Dr. Leeman is also a co-recipient of Pitkin Award for the article on Espey E, Ogburn T, Leeman L, Singh R, Ostrom K, Schrader R. Effect of progestin compared with combined oral contraceptive pills on lactation: a randomized controlled trial. Obstet Gynecol 2012;119:5–13.

Milagro Program for Substance Abuse in pregnancy has seen an increase of >50% in the number of pregnant women cared for.



**Dr. Warren Heffron** finalized the Warren and Rosalee Heffron International Fellowship for residents and faculty. Dr. Heffron presented the first two awards to residents Jenifer Lasman MD and Brian Smith MD.

Dr. Heffron served on the AAFP Center for International Health Initiatives advisory board and as faculty for the Global Health Conference in Minneapolis. He taught at medical education conferences in Thailand, Kosovo, and Albania Educational consultation to project AMOS in Managua Nicaragua.



**Dr. Celia Iriart** was honored with two international invitations based on her expertise in international health issues. The Health Committee of the Legislature of the Autonomous City of Buenos Aires, Argentina invited her to be the keynote speaker in the Seminar Social Responsibility in the Utilization of Medicines in July 2012. In April, 2013, the organizers of the Seminar "New Medicalization Processes in Mental Health: Challenges and Opportunities" at the Faculty of Social Sciences, University of Buenos Aires invited her to present the topic "Biomedicalization of the Childhood" based on her article published in December 2012.



**Dr. Arthur Kaufman's** team developed a Commonwealthfunded, on-line Health Extension Toolkit to disseminate nationally the work of NM's Health Extension Rural Offices (HEROs). Key aspects of HEROs is now being piloted in 18 states. The Community Health Worker model within Medicaid Managed Care developed by CARE NM, a joint project of the DFCM and the Office for Community Health, not only attracted a \$2 million contract from Molina to disseminate the model to 9 other states, but a grant from Blue Cross Blue Shield to develop a "Social Determinants Prescription Pad" (called WellRX) to introduce primary care clinic providers and staff to the important

roles community Health workers or promotores de salud play in addressing social determinants. This work will be piloted in the Family Medicine Clinic and in the South Valley Health Commons where residents and students train. Finally, Art presented HEROs and the Social Determinants work of community health workers to legislative aids on Capital Hill in July and it appeared on C SPAN.



**Dr. Janet Page-Reeves,** Research Assistant Professor in the Department of Family and Community Medicine and Senior Fellow with the NM Cares Health Disparities Research Center, works on a variety of disparities related projects through the Office for Community Health. In fall 2012, she received funding for a grant from the Blue Cross/Blue Shield Community Grants Program for "The WellRx Toolkit Initiative: Developing Social Determinants Prescription Referrals to Improve Health Outcomes in New Mexico." Over the past year, she has written two grants for One Hope Centro de Vida Health Center's diabetes prevention initiative that were funded by the Albuquerque Community Foundation and

the Bernalillo County Health Program. She was invited to serve as a board member for KUNM's new Poverty and Public Health Initiative. As part of a research project on women and food insecurity through NM Cares, she organized a panel and delivered a paper at the American Anthropological Association meeting in San Francisco in November, 2012. In February, 2013, she received a book contract from Lexington Press to turn the panel into an edited collection book that will be submitted later this year.



**Dr Daniel Stulberg** was invited to present at the AAFP's Skin Care Conference in Chicago, the AAFP's Annual Conference in Baltimore, and the AAFP's Geriatric conference. The topics ranged from Cryosurgery and Allergic Skin Disorders to Geriatric Immunizations.

He also published his 200th Derm Quiz in the series.



**Dr. Robert Otto Valdez,** received Congressional and ¡Excelencia en Educacion; recognition as "2012 Example of Excelencia in Graduate Education" for his direction of the RWJF Center Graduate Fellowship Program.

Dr. Valez organized a joint session of the 2013 New Mexico legislature on "Implementing the Affordable Care Act in New Mexico", 24 January 2013.

In addition, led a special session at the 140<sup>th</sup> annual American Public Health Association in San Francisco, addressing "Health Equity for Latinos: Are we making progress?"

Dr. Valdez directed the national American Economic Association Summer Training and Minority Fellowships program. He also renewed the RWJF Center for Health Policy operating grant.



**Dr. Teddy Warner** was selected under a UNM contract with the National Cancer Institute to lead as UNM PI and Multi-Site Project Coordinator a multi-site national study of *Ethical, Legal, and Social Issues of Cancer Patient Concerns Related to their Donation of their Tissues for Use in Future Research*. Dr. Warner led UNM, University of Pittsburgh, Emory University, and Boston Medical Center in collecting survey/interview data from 750 patients. Results will inform NCI for future policy development regarding patient donation of tissues for use in research, which is currently one of

NCI's major goals. NCI's focus on using tissues banked for use in research was highlighted a couple of years ago on the cover of *Time Magazine*.

Dr. Warner was also invited to write two chapters for *The Academic Medicine Handbook*, which were published in 2013:

- Warner, Teddy D. How to Evaluate Biomedical Research Publications Rigorously, pp. 225-232. In *The Academic Medicine Handbook*, ed. L. Roberts, 2013. New York: Springer.
- Warner, Teddy D. How to Understand Flaws in Clinical Research, pp. 233-242. In *The Academic Medicine Handbook*, ed. L. Roberts, 2013. New York: Springer.



**Byrch Williams, MD.,** and the clinical faculty have strived through our clinical services to meet our mission to "enhance the health and wellbeing of the people of New Mexico" This last year we placed three physicians, Drs. Shane Cass, Kevin Henry, and Celia Valdez, in Sandoval County. Located in the new hospital Sandoval Regional Medical Center, our physicians rapidly became busy. This was not surprising since Sandoval County is underserved by primary care. Our other providers continue to provide care in Albuquerque, both in a variety of outpatient clinical sites and in the hospital. Over 90,000 patient visits occurred in the clinics our providers see

patients at. Our hospital services continue to deliver one fifth of all babies at UNM Hospital, while we care for about one fifth of medical patients, one half of newborns and forty percent of babies in the Intermediate Care Nursery.

## **Goals from Previous Year**

### Administration

**Goal 1:** Work with the School of Medicine (SOM) Dean's Office to develop an advanced effort reporting tool.

**Outcome:** This goal has been accomplished. The administrator successfully worked with the SOM Dean's Office to provide constructive feedback on an advanced effort reporting tool that now includes effort for the faculty working at SRMC.

**Goal 2:** Work with the Office of Academic Affairs to further develop the department faculty equity grid.

**<u>Outcome</u>**: This goal is still in process. DFCM Leadership has continually met with the Office of Academic Affairs and with the DFCM faculty to discuss and further develop the faculty equity grid.

### **Education**

**Goal 1**: Implement Shiftplanning program to track educational FTEs within the department to improve accountability of educational effort and decrease inequities in teaching and education per assigned educational FTE.

**Outcome**: Shiftplanning has been implemented within the department with excellent results. It allows us to track both clinical and educational activity for our faculty and residents.

**Goal 2:** Establish a curriculum committee comprised of core residency faculty to improve offsite educational experiences as documented by resident evaluations of the program administered through the chief residents.

**Outcome**: Daniel Waldman, M.D. was appointed the new Family Medicine Residency Program Director and has appointed 2 Associate Directors, Elizabeth Grant, M.D. and Chris Camarata, M.D. The have identified core residency faculty who meet on a monthly basis to create, review, implement and evaluate resident experiences and curricula. **Goal 3:** Improve departmental support of the Family Medical Interest Group (FMIG) program to include dedicated faculty time (0.1 FTE of the assistant UME director's time), administrative support (defined within roles and responsibilities of the clerkship coordinator), and the generation and dissemination of an annual calendar of events that includes workshops, seminars, and gatherings of pre-clinical medical students plus residents and faculty.

**Outcome:** Dr. Elizabeth Grant and Dr. Elena Bissell have been appointed codirectors of FMIG. The work closely with the clerkship coordinator, Annette Creasman, to create events of interest to medical students interested in FM.

**Goal 4:** Do a systematic qualitative evaluation of each of the major service components of resident education, beginning with an evaluation of the MCH service and followed by an evaluation of the outpatient educational experience. This will be accomplished through focused interviews of residents, fellows, and faculty and documented in an executive summary presented to the department chair.

**Outcome:** We have completed a review of both the MCH service and the Physician Assistant Program. We will be completing the Inpatient and Outpatient settings.

## Research

**Goal 1**: Increase our grant submissions by 10% for FY2013.

**<u>Outcome</u>**: We saw a 1.0 % decrease in submissions. The reason is because faculty applied for fewer grants that offered larger amounts of funding.

**Goal 2:** Increase our grant funding by 5% over FY2013.

**Outcome:** We saw an 18.3%.increase.

**Goal 3:** Focus 75% of grants on Health Disparities in FY2013.

**<u>Outcome</u>**: Approximately 68% of grants were focused on Health Disparities.

**Goal 4**: Increase outreach and education activities to department research faculty, regarding grant services provided by the research management team. Improve departmental support of grant activity in FY2013.

**Outcome:** The Research Management Team has increased its outreach and support to our faculty and staff via multiple communication strategies including; individual meetings, group presentations, and increased electronic communications focusing on funding opportunities, new submissions and awards, publications, research resources and compliance reminders.

## Clinical

**Goal 1:** Continue to institute principals of the Patient Centered Medical Home in our clinical endeavors.

**Outcome:** This has been done and is a work in progress. Currently we are awaiting the results of our last NCQA survey to see if we have reached level 2 or level 3 status at our different clinics. We are currently level 1 at the clinics that have applied for this status.

**Goal 2:** Revitalize our Maternal and Child Health Service with input from stakeholders.

**Outcome:** This has been done and is a work in progress. We have interviewed and hired a Nurse practitioner, Grace Mishkin NP, who is working on the service 6 half days. This is one of the things that was desired by both residents and faculty. We have also hired another Family Medicine OB back-up, Nicole Yonke MD, and she will help alleviate some of the burden that our back-up feels making them more available when they are on back-up.

**Goal 3:** Continue to build on the successes of our Inpatient Service while stabilizing the number of patients served and number of hospitalists employed.

**<u>Outcome</u>**: Dr Waldman has done a terrific job with this and has now become Residency director. He will be hiring a new inpatient service director to continue this effort.

**Goal 4:** Meet the manpower needs of expanding clinical services planned by the Health Sciences Center.

**Outcome:** FTE has been fairly stable since Dr Martha Cole McGrew became chair although when she was first hired there was an increase. We are in a deficit currently, so we are working to see how we might increase manpower with the least amount of cost and a 4<sup>th</sup> year chief resident has been discussed as a possibility.

**Goal 5:** Meet the Quality goals determined both by the UNM Hospital and internally in the department.

**Outcome:** We have not met our meaningful use quality and safety goal of Medication Reconciliation at 95%. We are currently at 79%. We have been working to roll out the chassis in our clinics and at faculty meeting and resident school and since that time we have seen an increase in medication reconciliation, problem list use, e-prescribing, allergy entry, and messaging in Powerchart. Our expected mortality rates are at target. Our obstetrics patient satisfaction is just at target(85%) and ICN and 3N are at 83% (goal is >85%.) Currently we are meeting our core measures goals. To my knowledge we have not set internal quality goals within our department but we have a Clinical management meeting set to happen on 9/25/13 to meet about our current quality practices and safety goals.

## **Goals for the Upcoming Fiscal Year**

### Administration

- **Goal 1:** Continue to work with the Office of Academic Affairs to further develop the department faculty equity grid.
- **Goal 2:** Meet the financial goals determined by both the SOM Dean's Office and internally in the department.
- **Goal 3:** Build a comprehensive budget and projection system to allow for ease of practice with the finance function of the department.

### **Education**

- **Goal 1**: Work with the HSC Taskforce on Workforce and with the State Legislature to increase the number of Family Medicine matriculants by 9 per year beginning in 2015.
- **Goal 2:** The Residency Program faculty will expand and improve the community medicine/scholarly work curriculum for all resident
- **Goal 3:** The Physician Assistant Program will attain full accreditation.
- **Goal 4:** The Public Health Programs will continue to work with the larger institution toward the development of a College of Public Health.

### Research

- **Goal 1**: Increase our grant submissions by 10% for FY2014.
- **Goal 2:** Increase our grant funding by 5% over FY2014.

- **Goal 3:** Focus 70% of grants on Health Disparities in FY2014.
- **Goal 4**: Increase outreach and education activities to department research faculty, regarding grant services provided by the research management team. Improve departmental support of grant activity in FY2014.

## Clinical

- **Goal 1:** Continue to work towards higher NCQA recognition for our Patient Centered Medical Homes. For the clinics that have not yet become medical homes we will work with them to achieve it.
- **Goal 2:** Continue to strengthen our Maternal and Child Health Service with input from stakeholders. We will continue to use resident and faculty feedback to restructure service as needed and make it as efficient and effective as it can be. Currently it is very productive and we want it to be a healthy learning environment as well.
- **Goal 3:** Hire a new inpatient medical director and help them to build on the successes of the inpatient service. Work with them to lower readmission rates and length of stay on inpatient service to meet hospital target levels.
- **Goal 4:** Establish a value-based survey to assess provider satisfaction in the department specifically around ease of practice. With this data we can work towards ways to improve ease of practice for providers in our department and take that data back to School of Medicine and hospital leadership.
- **Goal 5:** Establish a functioning Family Medicine Quality and Safety Committee that will help our department meet the Quality and Safety goals determined by the UNM Hospital and other governing bodies. We will also work on developing our own evidence-based quality and safety goals for our department.
- **Goal 6:** Work with the medical group and compliance to provide effective resident and faculty billing, coding and documentation education twice yearly. We will use Crimson to monitor our coding variance and make sure that coding is at appropriate levels.

**Goal 7:** Work with systems management department to have all clinical activity reported in shift planning. We can then make sure that schedules are not in conflict, appropriate numbers of personal clinics and precepting are being done and clinical effort for FTE is appropriate.



## **Department Personnel**





## At a Glance

- 89 Department Faculty
- 84 Department Staff
- **12** New Faculty Members
- 7 New Staff Members
- 5 Faculty Departure
- 14 Staff Departure (includes 4 retirees)
- 4 Faculty Promotions



### **Executive Team**

The members of the Executive Team for the Department of Family & Community Medicine consist of eight key role positions that oversee the department's operations within the areas of administration, clinical, research, and education.



Martha Cole McGrew, M.D., Professor & Dept. Chair



Robert Rhyne, M.D., Professor & Vice Chair of Interim Research



Jennifer Phillips, M.D., Associate Professor & Current Vice Chair of Clinical Services



Betty Skipper, PhD., Professor & Associate Chair



Kristine Tollestrup, Ph.D., Professor & Vice Chair of Integration of Public Health



Byrch Williams, M.D., Professor & Former Vice Chair of Clinical Services



Katharine Rebolledo, MBA., Department Administrator



Melvina McCabe, M.D., Professor & Vice Chair of Diversity



John Leggot, M.D., Professor & Vice Chair of Education

## Faculty Appointments

Faculty Name	Arrived	Location
Maurice Moffett, PhD	7/23/2012	Office of Community Health
Janet Page-Reeves, PhD	8/1/2012	Office of Community Health
Shane Cass, DO	8/1/2012	Sandoval Regional Medical Center
Kevin Henry, MD	8/6/2012	Sandoval Regional Medical Center
Stephanie Long, MD	8/13/2012	MCH Fellow
Mario Pacheco, MD	8/20/2012	Office of Community Health
Kathy Johnson, PA-C	9/1/2012	Physician Assistant Program
Margaret Montoya, JD	10/10/2012	School of Medicine Administration
Karen Armitage, MD	11/1/2012	Office of Community Health
Valerie Carrejo, MD	11/19/2012	Family Medicine Clinic
Veronica Plaza, MD, MPH	12/1/2012	Research Group
Lauren Hund, PhD	1/2/2013	Biostatistics

## Staff Appointments

Staff Name	Department Position
Administration	
Norma Dye	Department HR Representative
Education Programs	
Theresa Mack	Administrative Assistant III
Clinical Programs	
Silaja Cheruvu	Staff Physician
Kim Larrichio	Field Case Support Coordinator
Research Programs	
Victoria Pham Gilchrist	Coordinator, Research
Daniel Rogers	Administrative Assistant 3
Maria Ward	Program Coordinator

### Promotion and Tenure



#### Summers Kalishman, Ph.D. Promoted to: Associate Professor

Dr. Kalishman's work in research/evaluation, faculty development and curricula is focused on education. In research and evaluation, she has been interested in applying evidence from deliberate practice, near peer and community of practice and self-efficacy to either descriptive or predictive evaluation practices with the projects and groups with whom she works. In collaboration with co-facilitators, Drs. Craig Timm and Judith Kitzes, Dr. Kalishman has applied the conceptual frameworks and best evidence from these evaluation practices and educational

theories to the development and revision of the Medical Education Scholars faculty development program. Dr. Kalishman works to improve education within the School of Medicine (SOM) through systematic review and engagement with students, and faculty and staff using Continuous Quality Improvement in Phase I, focus groups, retrospective reviews and block and course evaluation across the School of Medicine curriculum. Dr. Kalishman contributes and oversees clinician evaluation in Project ECHO telemedicine initiatives and works within the ECHO Institute to understand the perspective of clinicians, and to assess the impact of clinicians' ECHO participation on their self-efficacy, their use of information, and their clinical practices. Nationally, she recently completed a two year period as chair of the Medical Education Scholarship, Research and Evaluation Section of the AAMC Group on Educational Affairs.



#### Gayle Dine'Chacon, M.D. Promoted to: Professor

Dr. Gayle Dine'Chacon is a member of the Navajo tribe and embodies the "grow our own" concept. Born in Gallup, New Mexico and raised on the Navajo Nation, she began her higher education at a tribal college on the reservation and obtained an associate degree while raising two children. She also owned and operated an ice cream parlor on the reservation. Dr. Dine'Chacon graduated from UNM SOM in 1993. She completed her Family Medicine residency training at UNM in 1996 and is board certified in Family Medicine.

In 1996, she joined the Family Medicine faculty as an Assistant Professor. As a faculty, she served rural communities by commuting daily to Cuba, NM with family medicine residents and SOM medical students. She continues to provide quality teaching and support for

Family Medicine residents at the Albuquerque Indian Health Service. She has provided quality family medicine clinical services in pediatrics, adult medicine, geriatric care and obstetrics. Dr. Dine'Chacon was Co-PI of the Native American Research Center for Health (NARCH) and is PI of the Indians into Medicine grant. Since 2002, she has founded and directed the Center for Native American Health. In 2006, she was promoted to Associate Professor. It was important to one day return to the Navajo Nation and "give back". In 2011, she was appointed as Surgeon General of the Navajo Nation through an agreement between the Navajo Nation and UNM HSC. Governor Susan Martinez recognized her as one of the "2013 New Mexico Women of Influence" in health.



#### Valerie Romero-Leggott, M.D. Promoted to: Professor

Dr. Valerie Romero-Leggott, a Hispana New Mexican born, raised and educated in and around Santa Fe, received her B.A. at Harvard University in 1982, her MD at the UNM School of Medicine in 1992, and completed her family practice residency in 1996. She has served as a primary care provider treating populations burdened by socio-economic, racial and ethnic disparities. She is the Vice Chancellor for Diversity at the Health Sciences Center, Associate Dean for Diversity at the SOM, and Professor in the Department of Family and Community Medicine. She serves as the

Executive Director of the SOM Combined BA/MD Degree Program and Co-Chair of the SOM Admissions Committee. Dr. Romero-Leggott has extensive experience in teaching cultural competence, developing educational pipelines for disadvantaged youth, and mentoring minority women in the health sciences. She was awarded 2 grants (\$3.6 million) to enhance workforce diversity from middle school through the professional degree for underrepresented and disadvantaged youth. She has forged bridges between the health sciences and community groups and led in creating cross disciplinary programs with the law school and academic units. Recognized nationally, she has also provided statewide leadership, working with legislators and the NM Department of Higher Education. Dr. Romero-Leggott is a past member of the U.S. Department of Health and Human Services Advisory Committee on Minority Health, current President of the Hispanic Serving Health Professions Schools and serves as a NM Health Policy Commissioner. She is married to John Leggott, MD and they have 3 children, Kyle, Gabe, and Alli.



#### Saverio Sava, M.D. Promoted to: Professor

Dr. Sava joined our Department in 1995, bringing with him a wealth of experience as both a clinician and leader with the Indian Health Service and as a Community Health Center leader and faculty with the Brown University Department of Family Medicine. Dr. Sava has a solid commitment to patient care; first as lead clinician at our Southeast Heights clinic, at our Family Practice Center, and now as a First Choice clinician. Many students have chosen Family Medicine because of Dr. Sava's example of what a

rich experience being a Family Medicine physician is for him. One colleague comments how Dr. Sava's "enthusiasm and competence is comforting and inspiring to students deciding on a specialty." As a clinician educator, Dr. Sava has excelled at combining excellent clinical skills with teaching. He has, on several occasions, been selected as the Teacher of the Year by the Family Medicine residents. He has been particularly strong in the area of Community Health and has regularly helped in the development of our community curriculum and experiences for both residents and medical students. Before coming to UNM, Dr. Sava served as a physician in the IHS with the Mescalero Apache tribe in New Mexico and at Keams Canyon in Arizona working with the Hopi and Navajo people. He has served in three different systems (IHS, FQHC, and academia) and brings a wealth of knowledge and success in visioning and implementing how these three systems can break down silos to improve the health of the public.

## **Current Faculty**

FirstName	LastName	Degree	Rank
Karen	Armitage	MD	Visiting Associate Professor
William	Athas	PhD	Research Assistant Professor
Sally	Bachofer	MD	Associate Professor
Marlene	Ballejos	PhD	Assistant Professor
Heather	Banks	MD	Assistant Professor
Michelle	Bardack	MD	Associate Professor
Кау	Bauman	MD	Professor
Christina	Beato	MD	Associate Professor
Antoinette	Benton	MD	Associate Professor
Lisa	Cacari Stone	PhD	Assistant Professor
Christopher	Camarata	MD	Assistant Professor
Valerie	Carrejo	MD	Assistant Professor
Shane	Cass	DO	Assistant Professor
James	Cheek	MD, MPH	Associate Professor
Benson	Daitz	MD	Professor Emeritus
Daniel	Derksen	MD	Professor Emeritus
Gayle	Dinechacon	MD	Associate Professor
Lily	Dow y Garcia Velarde	PhD	Visiting Lecturer III
Sylvia Yvonne	Ellington	PA-C	Lecturer III
Floyd	Frost	PhD	Assistant Professor
Dianna	Fury	MD	Assistant Professor
Jessica	Goldstein	MD	Visiting Instructor
Roberto	Gomez	MD	Assistant Professor
Sarah	Gopman	MD	Assistant Professor
Elizabeth	Grant	MD	Assistant Professor
Alexis	Handal	PhD	Assistant Professor
Warren	Heffron	MD	Professor Emeritus
Deborah	Helitzer	ScD	Professor
Kevin	Henry	MD	Assistant Professor
Joanna	Hooper	MD	Assistant Professor
Lauren	Hund	PhD	Assistant Professor
Celia	Iriart	PhD	Associate Professor
Angela	Jo	MD	Associate Professor
Kathy	Johnson	PA-C	Assistant Professor

John	Jones	MD	Assistant Professor
Summers	Kalishman	PhD	Assistant Professor
Nikki	Katalanos	PA-C, PhD	Associate Professor
Arthur	Kaufman	MD	Professor
Cheri	Koinis	PhD	Assistant Professor
Karyn	Kolman	MD	Assistant Professor
Todd	LeCesne	PA-C	Lecturer III
Larry	Leeman	MD, MPH	Professor
John	Leggott	MD	Professor
Josh	Leiderman	MD	Assistant Professor
Mary	Lemon	MD	Professor
Melvina	McCabe	MD	Professor
Joanne	McCloskey	PhD	Visiting Research Assistant Professor
Martha	McGrew	MD	Professor & Chair
Margaret	Menache	PhD	Research Assistant Professor
Maurice	Moffett	PhD	Research Assistant Professor
Margaret	Montoya	JD	Professor
Sharon	Newbill	PhD	Research Assistant Professor
Charles	North	MD	Professor
Mario	Pacheco	MD	Visiting Associate Professor
Janet	Page-Reeves	PhD	Research Assistant Professor
Toby	Palley	MD	Professor
Nguyen	Park	MS, PA-C	Visiting Lecturer III
Tassy	Parker	PhD, RN	Associate Professor
Jennifer	Phillips	MD	Associate Professor
David	Pitonzo	PhD	Assistant Professor
Veronica	Plaza	MD, MPH	Research Assistant Professor
Robert	Rhyne	MD	Professor
Felisha	Rohan-Minjares	MD	Assistant Professor
Linda	Romero	MD	Associate Professor
Valerie	Romero-Leggott	MD	Associate Professor
Andrew	Rowland	PhD	Associate Professor
Laura	Saavedra	MD	Assistant Professor
Brad	Samuel	PhD	Associate Professor
Victoria	Sanchez	MPH, PhD	Assistant Professor
Saverio	Sava	MD	Associate Professor
Kathleen	Shore	DO	Assistant Professor
Betty	Skipper	PhD	Professor

Linda	Smoker	MD	Assistant Professor
Brian	Solan	MD, MPH	Professor
Francisco	Soto Mas	MD, MPH, PhD	Associate Professor
Daniel	Stulberg	MD	Professor
Andrew	Sussman	PhD	Research Assistant Professor
Norm	Taslitz	PhD	Professor
Kristine	Tollestrup	MPH, PhD	Associate Professor
Angelo	Tomedi	MD	Associate Professor Emeritus
Berthold	Umland	MD	Associate Professor Emeritus
Robert	Valdez	PhD	Professor
Celia	Valdez (Barraza)	MD	Assistant Professor
Lana	Wagner	MD	Associate Professor
Daniel	Waldman	MD	Assistant Professor
Nina	Wallerstein	PhD	Professor
Teddy	Warner	PhD	Research Associate Professor
Robert	Williams	MD	Professor
Byrch	Williams	MD, MPH	Associate Professor

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- Area Health education Center (AHEC)
- Family Medicine Residency Program
- Sports Medicine Fellowship
- Family Medicine Clerkship
- Public Health Program
- Physician Assistant Program



### Area Health Education Center (AHEC)

Division:	University of New Mexico Department of Family & Community Medicine
Period Covered:	July 1, 2012—June 30, 2013
Submitted by:	Helene Silverblatt, MD, Program Director
Content:	Overviews Significant Plans

#### **Overviews**

Goal 1: Develop the Health Professions Pipeline – by providing community-based health career awareness programs that promote health and increase the applicant pool from underrepresented ethnic minorities and from Health Professional Shortage Areas. Each year a minimum 2,400 students with at least 60% of students from an underrepresented minority will participate in health career awareness programs.

<u>Accomplishments for Goal 1</u>-The N.M. AHEC provided health career awareness preparation and training programs such as presentations, conferences and trainings for 3,857 elementary, middle school, high school, and college students during 23 health career preparation conferences, presentations, and workshops. Out of the 3,857 students, (62%) were Hispanic, (3%) were American Indian, (1%) were African American, and (35%) were from other ethnicities.

School personnel were given information related to health career integration for incorporation into their core curriculum. Materials included printed materials, videotapes, and science textbooks. Additionally, we distributed handbooks entitled, "Health Careers in New Mexico" to inform students about health career opportunities and the requirements necessary to pursue a career in health care.

Thirty students participated in the Dream Makers program and after school program for 9<sup>th</sup> grade students. This program offered a unique opportunity for students to explore career options in health professions while enhancing their math and science skills.

Goal 2: *Encourage Health Professional Students to Work in Underserved Communities* - by providing clinical training in rural areas for students in medicine, advanced nursing, pharmacy, physician assistant, occupational therapy, physical therapy, med. lab science, and residents in pediatrics, family medicine, and dental. Each year a minimum of 230 students and 25 residents will participate in the program.

<u>Accomplishments for Goal 2</u> - The N.M. AHEC provided monetary support for housing and travel for 371 students for the following UNM Health Sciences Center students: 148 medical, 37 physician assistants, 23 family nurse practitioners, 5 certified nurse midwifery, 6 acute care nurse practitioners, 9 pediatric nurse practitioners, 96 pharmacy students, 23 physical therapy students, 1 Med Lab Sciences student, and 4 occupational therapy students. In addition, there were 19 undergraduate nursing students from Luna Community College and 39 residents who were all placed throughout the State of New Mexico.

Goal 3: Supply and Quality/Career Effectiveness and Renewal improve the retention and quality of health care professionals serving minority/disadvantaged communities and/or populations – by providing a minimum of 30 continuing education and training programs per year that include no less than 2,400 participants. These programs promote the retention of health professionals in the N.M. AHEC counties in collaboration with community organizations.

<u>Accomplishments for Goal 3</u> - The N.M. AHEC provided a total of 42 conferences, workshops, and trainings throughout New Mexico that were attended by 2,745 participants.

Twenty four trainings were approved for continuing education credits so that licensed participants attending conferences/training received credits to secure and maintain their professional license. Eighteen educational trainings were provided to all level of health care providers who don't require continuing education credits.

N.M. AHEC collaborated in creating continuing education trainings, conferences, and workshops with state and community partners for health and mental health care professionals, with numerous hospitals and clinics, community-based state and private organizations, Department of Health, and universities and colleges participating. An intentional effort was made this year to enhance behavioral health/mental health literacy and training within the N.M. AHEC program statewide; our ultimate goal is to improve mental health services in this underserved state. Pipeline programs now specifically include behavioral health careers social work, counseling, psychiatry, psychology, etc.,--in their discussion of health careers. Behavioral health providers talk with students about mental illness/substance use and what they can do about it as citizens and perhaps ultimately as providers. By leveraging resources with the University of New Mexico's Health Science Center's Office for Community Health and the Psychiatry Department's Center for Rural and Community Behavioral Health, the N.M. AHEC program director was able to obtain funds to train 30 instructors in Mental Health First Aid (MHFA) from Optum Health New Mexico. This training enhances community capacity in Mental/Behavioral Health, develops mental health literacy, and teaches community members to be "first responders" to help those in crisis

#### **Significant Plans**

The N.M. AHEC Centers will work closely with the State of New Mexico to support and enhance programs in access to health care and wellness and prevention services. The centers will accomplish this in collaboration with the N.M. Health Insurance Exchange or N.M. Centennial Care, N.M. Department of Health, N.M. Managed Care Organizations, Health Exchange Rural Offices, N.M. Community Health Worker Advisory Council, N.M. Health Resources, N.M. Chronic Disease Prevention Council, N.M. Health Councils, as well as various other organizations. In collaboration with the N.M. Department of Health, the AHEC centers will provide Chronic Disease Self-Management six week classes for individuals with chronic illness or caregivers in rural communities. N.M. AHEC will continue to provide health career awareness preparation and training programs such as conferences and trainings for elementary, middle school, and high school students using a variety of approaches including health career preparation conferences, presentations, workshops, and summer camps. As in the past, we will make efforts to assure that most of students will be from underrepresented minorities. The N.M. AHEC will continue to provide monetary support for housing and travel for Health Sciences Center students in medicine, advanced nursing, pharmacy, physician assistant, occupational therapy, physical therapy, med. lab science, and residents in pediatrics, family medicine, and dental. The Affordable Care Act has emphasized the need to create healthy homes that would provide an integration of primary care and behavioral health services. To this end, the rural psychiatry residency track within the department of psychiatry residency program has begun a focus on co-training residents in family medicine and psychiatry early in a psychiatry resident's career. The N.M. AHEC program director has developed this initiative which will begin during the coming academic year.

Furthermore, N.M. AHEC has long recognized the need for our veterans and their families to have improved access to services throughout the country, particularly in communities without much in the way of established programs. The AHEC program director, in addition to setting up programs in primary care/psychiatry co-training, has also initiated a program in which psychiatry residents will work in rural Community-Based Outpatient Centers (CBOC) to treat veterans either on site or via telebehavioral health, enhancing the ability of our own VA to provide care as well as training our residents in the special needs of our rural veterans. This development of mental health training and community capacity by maximizing resources has

inspired others and resulted in the N.M. AHEC program being recognized as an innovator among AHEC programs. The program director was invited to discuss the development of this program at the National AHEC Organization's spring meeting and in the monthly HRSA/AHEC Webinar series.

The program will also work on the forgoing initiatives for the next year:

- N.M. AHEC will conduct a second Reproductive Health training in northern N.M. for health care practitioners by January 2014. And will offer CME/CNE's for participants. Proceed with finalizing the curriculum for statewide certification of Community Health Workers in collaboration with the N.M. Community Health Worker Advisory Council.
- Provide Mental Health First Aid training in rural communities.
- Provide a second Veterans Mental Health training in collaboration with the National AHEC Organization and the N.M. AHEC Program Office.
- Participate in the national AHEC training, webinars and teleconferences to stay current on the work of AHEC's and to reduce professional isolation.
- Work closely with the N.M. AHEC Advisory Board members to seek advice and support for N.M. AHEC statewide initiatives.
- Continue to work on building strategies for N.M. AHEC program sustainability.

### Family Medicine Residency Program

Division:	University of New Mexico Department of Family & Community Medicine
Period Covered:	July 1, 2012—June 30, 2013
Submitted by:	Daniel Waldman, M.D. Program Director, Family Medicine Residency
Content:	Significant Development Resident Projects of Note Professional Activities Significant Upcoming Plans

#### SIGNIFICANT DEVELOPMENTS

#### New Graduates

The UNM Family Medicine Residency Program celebrated the graduation of its 39<sup>th</sup> class on June 30, 2013. Since enrolling the first resident in 1973, the program has trained 406 family physicians who currently practice in 30 states as well as various international locations.

The 2013 graduates from the UNM Program have located in several states to pursue practice opportunities:

Roger Begay, MD	Fort D
Alemayehu Biffa, MD	Albuqu
Elena Bissell, MD	Albuqu
Cheri Blacksten, MD	Albuqu
Mona Flores, MD DO	Silver
Jason Kurland, MD	Zuni, N
Steven Ogas, MD	Albuqu
Rebecca Ryan, MD	Zuni, N
Robert Surawski, MD	Crown
Samuel Tri, DO	Albuqu
Antonia Way, MD	Housto

Fort Defiance, AZ Albuquerque, NM Albuquerque, NM Silver City, NM Zuni, NM Albuquerque, NM Zuni, NM Crownpoint, NM Albuquerque, NM Houston, TX



In addition, 4 interns with the 1+2 Rural Training Program completed their initial 12 months of training in Albuquerque. Drs. Sarakanti, Smith and Waltersdorf went to Santa Fe to complete their training with the Northern New Mexico Family Medicine Residency

Program. Dr. Cluff will complete his training with the new accredited Hidalgo Medical Services Family Medicine Residency Program in Silver City.

#### Recruitment

The 2012-2013 residency recruiting season was busy and successful for the program. The program received 827 applications, interviewed 123 candidates, and ranked 97 candidates. Thirteen first year positions were filled with excellent candidates. The program welcomed New Mexico natives as well as interns from around the world who were attracted to our community oriented program and the culturally diverse environment.



Working from already established

connections with communities throughout the state, rural rotations incorporating clinical and community health experiences in Zuni, Silver City, and Santa Rosa received excellent reviews by second and third year residents.

#### Program Leadership

Other developments included Daniel Waldman, MD being named the Residency Program Director along with Elizabeth Grant, MD and Chris Camarata, MD moving into roles as the Associate Program Directors. Dr. Dianna Fury served as Interim Director for much of the year.

#### Accreditation

The residency had a successful site visit and as of 5/20/13 received an extended accreditation status for 5 years with a maximum number of 39 residents.

#### Silver City 1+2 Location

Our affiliated Family Medicine Residency in Silver City (Hidalgo Medical Services) received accreditation as well. As a 1+2 location, the two residents per year will do their intern year training at UNM. Silver City has a mature group of medical providers and we have high hopes and expectations for their new program.

#### New Mexico Primary Care Consortium

The work of many over time also culminated this year in the formation of the "New Mexico Primary Care Consortium," a group composed of the New Mexico FM residencies. The board of directors consists of the program directors of each program. The purpose of the group is to be able to share information, and capitalize on shared processes and efficiencies gained by working together on issues such as recruitment, clinical experiences, and best practices for meeting residency requirements. The first meeting was in Las Cruces in the summer, and the consortium had a successful presence in the Kansas City AAFP Conference.

#### **RESIDENT PROJECTS OF NOTE**

#### Dr. Surawski

Resident Robert Surawaski from our Indian Health Service Clinic felt that he was missing some of the pertinent labs and studies that he needed to follow for his chronic disease patients. He felt he wanted something in his hands to look at as he took histories, examined his patients and ordered studies so that pertinent details were not missed. He also wanted to make sure he was not missing counseling opportunities.

Dr. Surawski researched clinical guidelines and developed pocket cards which outline history, physical, data and counseling that



should not be missed for chronic disease states such as Chronic renal failure, CHF, COPD and others.

He piloted use of the cards for a few months and felt that the quality of care he was giving his chronic disease patients was improved. He presented this project at resident school and presented all of his Family Medicine resident colleagues with a set of laminated cards.

The residency office assisted him in the physical construction of the cards and he consulted with faculty as he developed the information on the card.

#### Drs. Haley and Tejirian

Residents Miranda Haley and Carolyn Tejirian from Indian Health Services Center have been working on a QI project involving the initiation of prenatal dental care and helping set up a dental home for the whole family. It is a project with unique potential for Family Medicine since Family Medicine providers see both pre and post-natal mothers and infants from the neonatal period on.

As part of pre-natal visits they have been implementing the following:

- Spending one visit discussing the importance of prenatal dental care and how bacteria in mom's mouth can vertically transfer to infant's mouth.
- Applying fluoride in clinic.
- Utilizing nurse case managers to set up a dental appointment for our pregnant women at the IHS dental clinic.

• After infants are born, during routine well child visits, encouraging moms to return to the dental clinic for baby's first appointment before 12 months of age. Nurse case managers are utilized for this portion as well.

#### Dr. Grieg

Resident Elizabeth Greig from our First Choice South Valley Clinic is working with the Medical Assistants on improving charting for her DMII patients.

#### South Valley Residents

Third year residents at First Choice South Valley are working on improvement of glucose control among diabetics, measured in hemoglobin A1C tests (HbA1c's). They are educating the clinic's nursing staff to obtain HbA1c's in the office as opposed to sending their patients to the lab, which is expected to reduce the cost of the HbA1c's for the First Choice organization, including patients. This is will be tracked over time.

#### Drs Chavez, Kazi and Catinari-Shakked

Residents Juliana Chavez, Shahnaz Kazi, and Sara Catinari-Shakked from our Southeast Heights Clinic are working on a project with faculty member Dr. Dan Stulberg that is investigating whether QI projects are feasible for medical students during PIE experiences. This has included teaching medical students QI principles.

#### Dr. Waldman and Residents on the Inpatient Service

Our Family Medicine inpatient service has been focusing the past year on measurable outcomes: length of stay, heart failure core measures, and "time to consult" for ED patients.

Length of stay reduction has been a goal of UNMH, though the Family Medicine inpatient service has typically had a relatively low length of stay. Residents are instrumental participants in these efforts since all of our services are staffed with residents.

At this time the inpatient service is on track to meet its ambitious goal of reducing length of stay by 0.5 days, and keeping heart failure core measure statistics at greater than 90% compliance. Additionally, Family Medicine consistently has some of the lowest "time to consult" numbers of UNM inpatient services, which has been helped by resident attention to this issue.

#### **PROFESSIONAL ACTIVITIES**

Each year members of the residency takes part in various conferences and recruitment efforts. A goal moving forward with the Scholarly Activity Curriculum is to create a greater pipeline for residents to share and present their work at local and national AAFP and STFM Conferences.

Dr. Waldman also has been participating in the UNM Leadership Academy for the past year, and will be attending the National Institute for Program Director Development this coming year, funded by the department.

# SIGNIFICANT UPCOMING PLANS

The major plans for the upcoming academic year are as follows:

- Development of Scholarly Activity Curriculum
- Planning of FMC resident transition to new clinic on 4<sup>th</sup> street
- Continuing to address quality of obstetric experience, including the MCH service
- Creation of Practice Management Curriculum
- Implementation of QI project for interns

# **Sports Medicine Fellowship**

Division:	University of New Mexico Department of Family & Community Medicine
Period Covered:	Annual Report July 1, 2012—June 30, 2013
Submitted by:	Christopher McGrew, M.D. Program Director, Sports Medicine Fellowship
Content:	Overview Significant Developments Significant Plans Professional Activities Multidisciplinary Clinical Activities Scholarly Activities

# **Overview**

The Family Medicine Sports Medicine Fellowship Program (SM Program) has just completed its sixth year. The 12-month fellowship program is limited to one fellow each year, selected on a competitive basis that is open to physicians who have successfully completed an ACGME accredited residency in Family Medicine. During Academic Year 2012-



2013, the UNM Department of Family and Community Medicine, SM Program, accepted one fellow, Michael J. Swartzon, M.D., for the fellowship position. Dr. Swartzon successfully completed the fellowship and has taken a position as a Family Medicine Sports Medicine physician at the Baptist Health South Florida. This past year, Shane Cass, D. O. took his CAQ in Sports Medicine and passed the exam. The Sports Medicine Program has enjoyed a 100% pass rate for all fellows taking the exam!

Graduating fellow, Shane Cass, D.O. was offered and accepted the position of Assistant Program Director for the Sports Medicine Fellowship. Dr. Cass spends approximately 10 hours a week with the fellow and the program.

The Sports Medicine Fellow has been responsible for teaching and/or to attend at the following conferences:

- Albuquerque Community Sports Medicine Conference (monthly)
- NMOA Sports Medicine Journal Club (monthly)
- UNM Sports Medicine Journal Club (3 times monthly)
- UNM Family Medicine Resident School (twice yearly)
- Medical Students Phase III (8 times/yearly)
- Orthopaedic Podcasts (23 total)

# Significant Developments

Dr. Christopher McGrew continues his practice where various learners are offered experiential learning experiences at the OSIS clinic (sports medicine once a week); 1209 Clinic (two times a week sports medicine as an attending); UNM Athletic Training Room (two times a week including continuity clinics for phase one students); and Sunday afternoon athlete clinic (during football season). Added: Pediatric Sports Medicine patients at Carrie Tingley Hospital (once a week) providing sports medicine learning opportunities for Family Medicine and Pediatric residents as a result of losing Michael Pleacher who was the pediatric sports medicine physician.

Dr. Cass provides approximately once a month, on a Friday morning, instruction on musculoskeletal ultrasound on ankle, knee, wrist and/or shoulder. This musculoskeletal ultrasound training curriculum is in development by Assistant Program Director, Shane Cass, D.O., as well as musculoskeletal sports medicine quizes on monthly basis for any UNM physician, resident or other learner on a list serve. The fellow will assist Dr. Cass in developing quizzes.

In addition, Dr. Cass is also developing a preparatory Sports Medicine Certificate of Added Qualification curriculum for the fellow in which he provides a monthly preparatory session.

# Significant Plans

Our plans are to continue to refine the relatively new SM Program curriculum and continue to offer exciting learning opportunities. There are no plans to increase the number of fellowship positions at this time. We are in the development stage of creating an electronic data collection program to capture what the Sports Medicine Fellow procedures to access the program.

The SM Program is presently in its fourth year of an ongoing study (approved), "State Legislative Impact on High School Concussion Epidemiology" of Albuquerque High School Sports Concussions.

The SM Program has received a letter from ACGME moving the next site visit to be approximately May 2023. The ACGME is in the process of creating a new accreditation system to address core competencies by mid-2014.

The SM Program has established a Competency Committee that meets informally monthly and formally quarterly to review the program and the curriculum. The Committee will formally evaluate the curriculum and the program on an annual basis the 3-year rolling fellow with an exit survey and an annual survey by the faculty.

The SM Program has completed a quality improvement to standardize the process by creating a template during patient visits to assess common body parts while in the sports medicine clinic (i.e. shoulder, knee, etc.). This template has been implemented for dictation or for the EMR. The templates should assist the students to learn our convention, vocabulary, and the depth required for our office visit records. The template has streamlined the learner's learning curve and the standardization will allow for better transition of care from one student to another. In addition, the template allows the students to utilizing his/her time understanding the diagnosis and treatment plan as opposed to learning how to write the clinic note.

Dr. McGrew's position as an associate editor at Current Sports Medicine Reports has provided current and former Sports Medicine fellows Drs. Navarro, Cass, and Smith to have opportunities to publish articles. The mentorship continues after their fellowship concludes.

Interest in The Sports Medicine Program has grown, which has caused the program to develop a scheduling system to accommodate the various learners. In addition, to the Sports Medicine fellow, the following is a list of entities requesting rotation within the Sports Medicine Fellowship Program:

- 1. Family Medicine third-year and second-year residents
- 2. Phase II Clerkship students
- 3. Continuity Clinic I medical students
- 4. Continuity Clinic II medical students
- 5. Phase III Sports Medicine elective students/externships
- 6. MSIII students
- 7. Pediatric third-year and second-year residents
- 8. Pediatric continuity clinic
- 9. Visiting Resident from outside institutions
- 10. UNM Athletic training program students
- 11. UNM undergraduate students interested in family medicine health care careers
- 12. State-wide high school students shadowing (one-time four-time program out of Dr. Roth's office)

The SM Program is in the development stage of social media to include a Family Medicine Sports Medicine Facebook educational page where the program will be more responsive to today's fellowship applicant who utilizes various social media. The Facebook page highlights the program while keeping those interested in sports medicine up-to-date on the latest events within our program. In addition, snap shots of the sports medicine fellow activities are posted on Instagram and Snapchat as another means of marketing the SM Program.

# **Professional Activities**

Dr. Christopher McGrew continues his family medicine sports medicine/musculoskeletal practice seeing patients and supervising the sports medicine fellow in Family Medicine, Orthopaedics, and the UNM Athletic Training Room. He is also currently involved in the following sports medicine related professional activities: AMSSM's ITE Question Writing Subcommittee; ACSM's Section Editor for Head and Neck, Reviewer for the Current Sports Medicine Reports; UNMHSC Compliance Committee; Medical Advisor for UNM's Athletic Training Education Program Curriculum Committee; UNM HSC's CME; UNM SOM Evaluator - first year medical students Practical Immersion Experience; UNM Assistant Team Physician and continues as Highland High School Team Physician (volunteer).

Dr. McGrew continues to be the Director for the Sports Medicine Rotation Elective for third and fourth year medical students and family medicine residents; as Advisor for the UNM SOM Sports Medicine Interest Group; and evaluator and circuit rider for first year medical students.

Dr. McGrew continues coordination of the resident physician coverage for the Albuquerque Academy and Dr. Cass coordinates the topics/presentations for the Albuquerque Community Sports Medicine Conference that serves the Sports Medicine physicians for the Greater Albuquerque Medical Association, Albuquerque Public School athletic trainers, as well as various physical and occupational therapist from UNM.

Dr. McGrew presented "Update on Sport Concussion" at the 2013 New Mexico Athletic Trainers Association Annual Meeting and Symposium, Albuquerque, New Mexico

Dr. McGrew was the Program Director of the Primary Care Orthopaedics & Sports Medicine Update conference which was held April 2013.

# Multidisciplinary Clinical Activities

Dr. McGrew is collaborating with the Neuro-Psychology Department for a multidisciplinary approach on a statewide effort to assess epidemiology of sports related concussions in middle and high school athletes as well as developing a multidisciplinary outreach program for rural areas for sports concussion management and return to play.

Dr. McGrew is collaborating with the faculty at the MIND institute to develop innovative and novel approaches for assessment and management of sports concussions in UNM intercollegiate athletes.

# **Scholarly Activities**

Dr. McGrew along with former fellow Dr. Smith and Dr. Swartzon (just graduated from the SM Program) submitted and was accepted "Headaches in Athletes" to the Current Sports Medicine Reports in June of 2013.

Dr. McGrew co-authored "Recovery from Post-Concussion Visual Memory Deficits Takes Months to Years". Julia A. Cook, Richard Campbell, John King, Ronald Yeo, Christopher McGrew, Robert Thoma, 2013 Biology Research Day, UNM Albuquerque, New Mexico and "Construct Validity of ImPACT Using Healthy Athletes", Julia A. Cook, Richard Campbell, John King, Ronald Yeo, Christopher McGrew, Robert Thoma, 2013 New Mexico Shared Knowledge Conference, Albuquerque, New Mexico.

Dr. McGrew along with Thoma J, King JH, Yeo RA, Monnig MA, Pommy J, Lysne A, Long J, Ball a, Mayer A, Campbell R have submitted "Health Athletes Assessed Using ImPACT and Traditional Neuropsychological Measures" which is under review.

Drs. McGrew and Swartzon presented/taught the "Shoulder and Knee Exam", a four-hour course, during each block to the phase III medical students.

Dr. Swartzon presented to various groups to include the UNM Family Medicine Residency Resident School. In addition, Dr. Swartzon presented one article per week on pertinent subject matter to the Orthopaedic Sports Medicine Journal Club.

Dr. Swartzon presented three posters (with Drs. McGrew and Cass as co-authors) at the annual meeting for American Medical Society for Sports Medicine in April regarding pericarditis, concussions and abdominis muscle tear.

Dr. Swartzon participated in three mass events to include the USA Indoor Track and Field Championship, the New Mexico State Fair Rodeo, and the 2012 Junior Olympic Cross-Country Championship.

# **Family Medicine Clerkship**

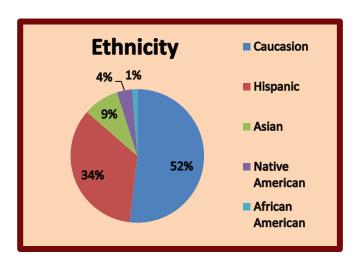
Division:	University of New Mexico Department of Family & Community Medicine
Period Covered:	July 1, 2012 – June 30, 2013
Submitted by:	Brian Solan, M.D., Program Director, Family Medicine Clerkship
Content:	Overview Significant Developments Significant Plans

### **Overview**

The Family Medicine Clerkship is an eight week program for physician students who are interested in becoming a better physician through hands-on experience. This is done through a combination of clinical, community, and health policy experiences which include: primarily an out-patient rotation, broad range of patients and clinical problems, rural and Indian health site options, Maternal Child Family Medicine service at UNMH, in-patient Family Medicine service at UNMH, and 2 credit hours of Health Policy and Advocacy.

# **Significant Developments**

During the recently completed Phase II academic year, 81 medical students completed their Family Medicine clerkship. The breakdown by ethnicity of these students was: 52% Caucasian, 34% Hispanic, 9% Asian, 4% Native American, and 1% African American.



Clerkship students did their clinic work at 30 different community clinics, as well as the Maternal Child Health Service and the Family Medicine Inpatient Service. Ten of the community clinics were in rural locations outside the Albuquerque metro area.

The clerkship continued to receive high ratings from students for quality of service and educational experience.

Working with the Office of Assessment we have implemented several changes in the Family Medicine OSCE for clerkship students. There are 2 real time Evidence Based Medical Practice cases. We also evaluate students' ability to do a diabetic foot exam using a glucometer.

We have integrated the Health Policy and Advocacy course into our clerkship with continued improvements in interactions with the community including site visits and a session with community leaders discussing a variety of health and social issues which affect patients' health.

The Family Medicine Interest Group was resurrected thanks to our assistant clerkship director. There were several successful activities within the University. Unfortunately we are without an assistant director and this time. We still face struggles with the anticipation of placing 20 students during a block in Family Medicine sites. This will require several students to go to rural sites every block, which is often resisted strongly by students.

# Significant Plans

We will continue to look at ways to improve the Health Policy course so it can be accepted as a transcribed course. Finding enough community preceptors is an ongoing challenge with no easy solution without additional resources.

# **Public Health Program**

Division:	University of New Mexico Department of Family & Community Medicine
Period Covered:	July 1, 2012—June 30, 2013
Submitted by:	Veronika Becker, Senior Program Manager, PHP
Content:	Overview Significant Developments Significant Plans

# **Overview**

The mission of the Public Health Program (PHP) at the University of New Mexico (UNM) is to provide leadership in graduate and community-based education and research grounded in social justice to improve the health of the diverse populations in New Mexico and the Southwest. The three major functions the program addresses are education, research, and service and practice.



The UNM PHP values and strives to:

- Provide a quality learning environment using a community and problem-focused curriculum for all learners.
- Promote ethical and scientific approaches to the practice of public health.
- Respect and incorporate cultural beliefs, norms, and practices in resolving public health problems.
- Promote broad collaborative approaches with a variety of partners including community members to respond to public health problems and crises.
- Understand the contributions of social and environmental factors to health equity and health disparities.

The program's commitment to these values is reflected in their integration into the classroom and interactions with students and the public. Faculty members apply these values in their research projects and interactions with communities.

# **Significant Developments**

The PHP presented the Jonathan Mann Lecture on September 20<sup>th</sup>, 2012. Dr. Theda Skocpol presented "Will Health Reform Survive and Flourish after 2012?" Theda Skocpol is one of America's leading social scientists, the author of numerous books on social policy and health care reform, including the award winning *Protecting Soldiers and Mothers, and Health Care Reform and American Politics* co-authored with Lawrence Jacobs.

This year at the annual New Mexico Public Health Association meeting in Albuquerque, several PHP students, alumni, and a faculty member received awards. Dr. Harris Silver, PHP student, received an award for his advocacy efforts with prescription drug abuse. PHP alumni, Kitty Richards, Terry Schleder, and Tom Scharmen received awards for their public health leadership in the community. Dr. Victoria Sanchez, a PHP Assistant Professor, received the Jonathan Mann Award for her lifetime commitment to public health and social justice issues throughout the state of New Mexico.

The PHP continued to be a leader in the New Mexico Public Health Learning Collaborative, a unique collaboration among the public health programs at UNM and NMSU, and the New Mexico Department of Health (NMDOH). With funding from NMDOH, Dr. Kristine Tollestrup worked closely with Dr. Sue Forster-Cox from NMSU to develop two workshops on assessment in public health and planning in public health. These workshops were delivered to over 300 public health workers throughout the state.

### Faculty

Dr. Lisa Cacari-Stone was selected for the 2013 Apple for the Teacher recipient in the UNM HSC Biomedical Sciences Graduate Programs for her excellence in teaching. Apple for the Teacher provides students an opportunity to nominate and recognize teachers that have made a difference in their lives.

Dr. Celia Iriart was honored with two international invitations based on her expertise in international health issues. The Health Committee of the Legislature of the Autonomous City of Buenos Aires, Argentina invited her to be the keynote speaker in the Seminar Social Responsibility in the Utilization of Medicines in July 2012. In April, 2013, the organizers of the Seminar "New Medicalization Processes in Mental Health: Challenges and Opportunities" at the Faculty of Social Sciences, University of Buenos Aires invited her to present the topic "Biomedicalization of the Childhood" based on her article published in December 2012.

Dr. Nina Wallerstein was invited to be the keynote speaker for the Clinical Translational Science Award National Conference on Community Engagement in Washington DC. Her presentation was on Community Engaged and Participatory Research: Models, Metrics and Measures.

# Recruitment and Outreach

For the first time since the PHP was established, staff and faculty members of the Public Health Program (PHP) attended the American Public Health Association's 140<sup>th</sup> Annual Meeting which was held on October 27-31, 2012. A booth was set up at the exhibit hall in which approximately 10,000 people visited during that time. There was a positive response from the attendees who visited the booth. The booth provided exposure to a diverse group of potential student applicants, many of whom did not know that UNM has a Master of Public Health Degree program. Approximately 500 brochures, cards and applications were handed out to potential applicants.

The Public Health Program hosted a booth at the Get Outdoors New Mexico event held at Tingley Beach. Sun-safe behavior was encouraged by giving out sunscreen and water to those attending the event. The Get Outdoors New Mexico event is part of a national effort to encourage healthy, active lifestyles by connecting the American public with outdoor activities available on their local, state, and national public lands. Brochures and information about the program were also available.

### Students

PHP students play key roles in the governance of the program in several ways. Students participate in the decision-making process as representatives on the Academic Committee and other ad hoc committees. They are also included in the admissions process as student members of the Admissions Committee. The Admissions Committee is interested in student feedback for improving the admissions and selection process for the following year. Student opinions are solicited informally by the PHP director and other faculty. These concerns are relayed to the Academic Committee or to the primary faculty during monthly PHP core faculty meetings. The PHP student organization (Public Health Students Association or PHSA) was approved as an official chartered student organization in August, 2010. The PHSA continues to sponsor and promote events. All 54 students are active members of the PHSA.





The PHP continues to attract a diverse student body (see table below).

	Asian	White	Hispanic	Native American	African American	Other
# of Students	1	25	11	3	0	5
% of Students	2%	55%	25%	7%	0%	11%

Race and Ethnicity of Students, July 1, 2012 – June 30, 2013.

The PHP also serves a large number of graduate students from other departments, as well as non-degree students who are interested in public health courses.

Non-Degree or Other Department Students Enrolled in the MPH Program			
Academic Year in	Students	Othe	Degree and Students from er Departments by Head nt and Percentage
	enrolled in PH Courses	нс	FTE
2012- 2013	408	198	48%

Delta Omega is the national honorary society for graduate students in public health. It was founded in 1924 at Johns Hopkins University School of Hygiene and Public Health. Gamma Epsilon is the University of New Mexico's chapter of Delta Omega. Gamma Epsilon was inaugurated in 2011. Now entering its third year of operations, current activities include the development of a mentoring program for current students obtaining a Master of Public Health degree. Interested students will be matched with a current member based on interests, needs, and future aspirations for scholarly exploration and employment. Members met with the incoming class of MPH students during the new student orientation to present information on Delta Omega, opportunities for student involvement with the local Chapter, and the mentoring program. Almost 100% of the incoming students requested mentoring matches.

# Curriculum

The third annual CBPR Summer Institute was held in June 2013. The CBPR is an intensive co-learning institute that explores how CBPR intersects with indigenous and critical methodologies, including the challenges for academics and community members to co-construct knowledge for improved community health. The goal of this Institute is to weave together theory and practice of CBPR with indigenous and critical methodologies through articles, presentations by community-academic partners, discussion, and self-reflection on our own research questions.

The Public Health Certificate (PHC) for medical students is designed to provide systematic training in public health skills and community-oriented approaches to health care. The expectation is that undergraduate medical students, residents and others who complete this certificate will be able to develop life-long integration of public health skills and concepts into their medical practice in order to contribute to the resolution of public health problems, in partnership with communities. Drs. Jim Cheek and Kristine Tollestrup were members of the School of Medicine PHC Steering Committee; Dr. Cheek continued to provide expertise as an instructor for the Health Equities course for first year medical students. The Health Policy and Health Systems course has been fully integrated into the Family Medicine Clerkship and is also a 2-credit transcripted course as part of the Public Health Certificate. Dr. Cheek also piloted a new public health oriented activity for medical students doing the PIE (Practical Immersion Experience) as a collaborative project with the New Mexico Department of Health. This project focused on evaluating infection control practices in outpatient setting and uses Project ECHO to give student participants weekly guidance with the project.

For the MD/MPH dual degree, Dr. Jim Cheek drafted a new MPH concentration for medical students who are currently completing the Certificate of Public Health. All courses for the Certificate have been approved for 15 hours of graduate public health credit by the Office of Graduate Studies. A formally transcripted program for the Certificate of Public Health is anticipated for December 2013. PHP faculty continued to work with Dr. Sally Bachofer on developing a public health certificate for family medicine residents. Dr. Victoria Sanchez and Dr. Bachofer developed and taught the core principles of public health course during the fall semester. Dr. Celia Iriart developed and taught the first part of the health care systems course in the spring.

# **Significant Plans**

Faculty members from the PHP will continue to work with other School of Medicine faculty to further refine the curriculum for the medical student PHC. Dr. Jim Cheek will continue to be the liaison between the public health faculty and the undergraduate medical education faculty in addition to leading the public health activities.

The PHP is also in the process of revising the curriculum for the dual MD/MPH degree. Since the undergraduate medical students are taking public health courses for their Public Health Certificate, a new framework for the dual degree must be developed and a new concentration designed to accommodate these students. The PHP faculty and staff members will be active participants in the planning of a proposed College of Public Health. Dr. Kristine Tollestrup is working closely with Dr. Deborah Helitzer who is leading the planning efforts for UNM. PHP faculty and staff will provide important expertise in planning a curriculum and developing an effective infrastructure for the proposed college.

The PHP will also continue to be a leader in the New Mexico Public Health Learning Collaborative. The group plans to continue training activities for the public health workforce over the next year and develop train-the-trainer workshops to enhance the training opportunities throughout the state. The program will also work closely with NMDOH as it is completing its accreditation proposal.

# **Physician Assistant Program**

Division:	University of New Mexico Department of Family & Community Medicine
Submitted by:	Christina Hoff, Ph.D., Program Operations Director
Content:	Overview Significant Developments Sponsored Funding (non-Research)

### **Overview**

The Physician Assistant Program opened in June of 1997 with a charter class of eight students. A Bachelor of Science degree was awarded to graduates through the PA Class of 2011 (157 graduates). The PA Class of 2012 was the first to earn a Masters of Science in Physician Assistant studies (MPAS).

### **Significant Developments**

Dr. Nikki Katalanos reduced her time in the PA Program and relinquished her duties as Program Director in June 30, 2013 and Medical Director, Dr. John Leggott took over as the Program Director with Dr. Byrch Williams taking on the responsibilities of Medical Director.

Christina (Tina) Hoff and Theresa Mack from the Department of Family & Community Medicine were transferred to the PA program to assist with Accreditation, Strategic Planning and other related administrative duties (Hoff) and as administrative support for the program's clinical education mission (Mack).

### Class of 2012 Graduation

Class of 2012 Physician Assistant students Jonathon Vigil, MPAS and Candice Hewitt, MPAS were inducted into the Pi Alpha Honor Society, Candice Hewitt, MPAS received the Natural Medicines Comprehensive Database Recognition Award, Brandon Wilson, MPAS received the Student Award for Excellence, Goldyn Rubio, MPAS received the Student Award for Community Service, and the Robert Norton Scholarship was awarded to Adam Newman, MPAS.

### Sponsored Funding (non-Research)

HRSA funded the PA Application "Affordable Care Act – Expansion of Physician Assistant Training Program (EPAT)" to increase the class size by one each year. Seventeen students were admitted in 2012. The PA Application "Physician Assistant Training in Primary Care" will continue through September 2016.

# University of New Mexico School of Medicine











Leslie Dunlap



Leah LaRusch





Michelle Garcia



Victoria McCoskey



Ryan Grange

Candace Miller

Bonnie Jariwala



Jacklyn Johnson

Candace Miller Stephen Soltero Physician Assistant Program -Class of 2015





Matthew Keeran



Elisha Song



Samantha Stevens

# **Clinical Activities**



- Patient Statistics
- Northeast Heights Clinic
- Southeast Heights Center for Family & Community Health
- 1209 University Clinic
- Family Medicine Center Clinic
- Senior Health Clinic
- Family Medicine Inpatient Service
- Maternal Child & Reproductive Health Program (MCH)
- Sandoval Regional Medical Center (SRMC)



# **Patient Statistics**

Clinic	FY 11 Visits	FY 12 Visits	FY 13 Visits	Variance*
1209 University	25,136	24,490	25,199	.3%
2400 Tucker	23,800	22,819	21,540	-9.5%
NE Heights	16,759	18,158	20,199	20.5%
Southeast Heights	20,481	21,038	26,349	28.7%
Senior Health	7,008	6,835	5,769	-17.7%
Total	93,184	93,340	99,056	6.3%

Overall, there has been a 6.3% increase in patient visits from FY 2011 and FY 2013. The explanation for this increase is multifactorial. While the change over the last two years has been negligible, the change over the current year has been significant (6.3%). As we reach closer to our department goal of adequate clinical faculty, we expected the increase in patient visits and we expect this trend to continue.

# \*Variance change FY11 to FY13

# **Northeast Heights Clinic**

Division:	University of New Mexico Department of Family & Community Medicine
Period Covered:	July 1, 2012—June 30, 2013
Submitted by:	Mary Lemon, M.D., Medical Director, Northeast Heights Clinic
Content:	Overview Significant Developments Significant Plans Professional Activities of Faculty Members

### Overview

The Northeast Heights Center for Family Health is located in Albuquerque's Northeast Heights and includes Primary Care by both Internal Medicine & Family Practice. The Family Medicine component serves the community with the following:

- Clinical Social Work
- PharmD
- RN Case Manager
- On-site Counselor for Behavioral Health support

The facility includes 19 exam rooms and two procedure rooms with four family physicians, four nurse practitioners, plus medical assistants and nurses on staff.

### Significant Developments

This last year we made such a significant improvement in our check-in, triage, and discharge processes, as well as meeting goals to satisfy a higher level of accreditation for the Patient Centered Medical Home, that our processes were used as the model institution-wide to have consistent, efficient, and effective systems in place at all UNM sites.

### Significant Plans

As part of the Patient Centered Medical Home, we are still developing more processes to help us and our patients manage chronic diseases more effectively and we have a new PhD psychologist here 6 half days a week (a marked increase in hours) to better manage behavioral issues.



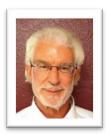
We are still in the process of preparing for the advent of the encrypted patient portal, an electronic way for patients to obtain information from their records as well as to communicate with their providers and teams.

We will continue our work with our Community Advisory Board.

# **Professional Activities of Faculty Members**



Dr. Lemon is on the Primary Care Leadership Team Committee and is the Family Medicine representative on the Physician's Advisory Group.



Dr. North is serving as the Executive Medical Director for Ambulatory Care at UNMH.



Dr. Rhyne is Vice Chairman for research in Family & Community Medicine and co-director of the Community Engagement and Research Core for the Clinical Translational Science Center (CTSC).



Dr. Jones is creating procedure clinics to help residents obtain more experience with office procedures. He is also a Patient Safety Officer for the Department of Family & Community Medicine, Pharmacy & Therapeutics committee member, and also, a Student Promotion & Graduation committee member. Dr. Jones was accepted into the 2013-14 and 2014-15 Medical Education Program.

# Southeast Heights Center for Family & Community Health

Division:	University of New Mexico Department of Family & Community Medicine
Period Covered:	July 1, 2012—June 30, 2013
Submitted by:	Jennifer K. Phillips, M.D., Medical Director, Southeast Heights Center
Content:	Overview Significant Development Professional Activities

# Overview

The Southeast Heights Center for Family & Community Health (SEH) is located in a multicultural, multi-ethnic, lowincome area of the Southeast Heights now named the "International District" of Albuquerque. The family health clinic is part of a "Health Care Commons," which serves the community and includes the Young Children's Health Center, the Maternity and Infants Program, as well as a multi-use center which houses WIC, Public Health, and other services.



Five faculty family physicians, two physician assistants, three nurse practitioners, a clinical psychologist, and a psychiatrist work with our family medicine residents and staff to provide care to our varied patient population, which is largely immigrant and refugee. The majority are from Vietnam, Cuba, and Mexico but there are significant populations from parts of Africa, Iraq, and Afghanistan. Fluency in Spanish or Vietnamese is useful but there are interpreters available in many languages.

The entire office is involved in a number of community projects. We have an ongoing smoking cessation project for Vietnamese men and many school based health projects in the area. A walking group takes place on Saturday morning and there is a monthly group diabetes visit for Spanish-speaking patients. There is also a Healthy Communities Coalition that meets at the site monthly and a patient/community advisory board.

# **Significant Development**

SEH Center for Family & Community Health has been given Level 2 patient centered medical home status by the NCQA. We are still working to get Level 3 recognition.

### **Professional Activities**



**Dr. Jennifer Karen Phillips** is medical director of the SEH clinic and participates with the SEH community advisory board. She also serves as the Vice-chair for clinical services in the Family Medicine department, supervises the MCH sub-internship, is education codirector for the teaching of the FCM residents, and helps supervise the 3rd year medical students during the Family Medicine Clerkship. She sees her own patient panel at SEH as well.



**Dr. Felisha Rohan-Minjares** is deeply involved with the office of diversity and the teaching of medical students and FCM residents. She is also very interested in refugee health and community medicine. She has been working at SEH since her residency and on faculty since 2008. She is passionate about the proper use of interpreters and issues around cultural competency.



**Dr. Angela Jo's** career interests focus on ways to improve the health of vulnerable populations by integrating research, clinical practice, and education. She brings to the department her extensive experience in developing, tailoring, and testing health interventions among the underserved minority populations in Los Angeles. She is a native speaker of Korean and also speaks Spanish.



**Dr. Josh Leiderman** is a Family Physician with a special interest in access to care of underserved populations. At the University of New Mexico since, spring 2011, his work continues to emphasize social medicine and active engagement of practitioners and trainees with the community at large.



**Dr. Joanna Hooper** joined the Department of Family & Community Medicine in September, 2011. Joanna received her M.D. here at UNM and completed her Family Medicine Residency at Providence Milwaukie Family Medicine Residency in Milwaukie, OR. Joanna has also served as a Peace Corps volunteer in Mzuzu, Malawi, a sales representative for Merck, and a researcher/community health worker trainer in Honduras and Guatemala. She sees patients at the Southeast Heights Clinic.



**Dr. Angelo Tomedi** retired but still continues with his teaching work at the clinic and working with underserved populations in Guatemala and Kenya. Our 21 exam room clinic was opened February 2009 with pharmacy and radiology.

# **1209 University Clinic**

Division:	University of New Mexico Department of Family & Community Medicine
Period Covered:	July 1, 2012 – June 30, 2013
Submitted by:	Toby Palley, M.D., Medical Director, 1209 University Clinic
Content:	Overview Significant Accomplishments Significant Challenge Significant Plans

# Overview

The 1209 Clinic is located near the UNMH on University Boulevard, in the same building that houses the UNMH Pharmacy. It is next door to the new UNM Cancer Center, the Outpatient Surgery and Imaging Center, and close to UNMH, and UNM main campus. This is a multidisciplinary clinic. Providers include Family Physicians, Internal Medicine Physicians, a Sports Medicine physician, family nurse practitioners, physician assistants, internal medicine



residents, a clinical pharmacist, a clinical psychologist, social worker, and nurse case manager. The patient populations are mixed, with many patients coming from Albuquerque's lower income neighborhoods, UNMCares, and Medicaid. However the clinic also attracts a range of patients, including hospital and UNM employees, professionals, and a wide range of insured patients. We offer minor surgery and dermatologic procedures, joint injections, gynecologic procedures, OB ultrasound, colposcopy, and LEEP. We serve patients of all stages, from newborn to geriatrics, as well as provide obstetric care. We continue to have a multidisciplinary diabetes group visit and a multidisciplinary home visit team, both of which occur once a month.

One strength of the clinic is a collegial and friendly environment between the various specialties. We also have a very functional management team, consisting of two medical directors (internal medicine and family medicine), director of advance care providers, unit manager, charge nurse, and clinic coordinator. The team functions well and cooperates

exceptionally well, for example we interview candidates for staff and provider positions together, and work together on addressing problems as they come up.

# **Significant Accomplishments**

- 1. Clinical psychology services. We have a full time clinical psychologist, Christopher Neumann, PhD., providing direct patient care 8 half days a week, and a PhD, psychology intern providing care an additional 1 half day a week. Dr. Neumann has implemented many effective and exciting innovations. He does short term therapy, offering mostly 30 minute appointments. He specializes in cognitive behavioral He also has many patient information and self-help materials and therapy. handouts, available to all the providers in the clinic. Once a month he gives a session for providers during the provider meeting, addressing any behavioral health concerns the providers have. He has started a monthly newsletter. The first issue addressed among other topics, useful hints in how to make referrals more effective. He has also implemented the "Warm Hand Off" any time he is in clinic, whether in session or not, he will come meet the patient with the provider, and arrange a new patient visit. This also includes emergencies. He has noted the show rate is significantly higher with the warm hand off and more effective referral process, including preparing patients with appropriate expectations.
- 2. Patient Centered Medical Home. We have continued to make progress in implementing patient centered medical home. The medical assistants are given 4 hours a week to perform "prework" including the review of age, gender, and disease related health care maintenance expectations. They also make pre-calls during this time, improving the show rate, and addressing issues and needs brought up by patients prior to the appointment. We track performance measures monthly at our staff/provider meetings, addressing challenges that are noted. We have implemented and are progressing with a referral tracking system, tracking and improving medication reconciliation, and problem list population. The medical assistants are now assuring that key diagnoses are on the problem list and adding them if not already there. We have also implemented nurse visits for goal setting on a number of topics including smoking cessations and diabetes management.
- 3. We have added one part time physician assistant, but lost FTE's for family medicine, internal medicine, and advance care providers, due to those providers cutting back on their clinic activities.

# Significant Challenge

1. One of the most pressing challenges remains filling provider positions, including primary care physicians and advance care providers. We have also had a significant turnover in nursing staff.

# **Significant Plans**

- 1. We hope to fill two internal medicine provider positions that are currently vacant and one advanced care provider position.
- 2. We will continue to implement and expand Patient Centered Medical Home and improve on achieving goals for the performance measures.

# **Family Medicine Center Clinic**

Division:	University of New Mexico Department of Family & Community Medicine
Period Covered:	July 1, 2012—June 30, 2013
Submitted by:	Valerie Carrejo, M.D., Medical Director, Family Medicine Center Clinic
Content:	Overview Significant Developments Significant Plans Faculty

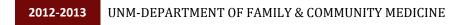
### **Overview**

The Family Medicine Center (FMC) is a busy multi-disciplinary primary care clinic located several hundred yards from University Hospital. With twenty-one exam rooms, on-site x-ray and laboratory, the clinic is one of the busiest primary care clinics in the UNM system. Our patient population is diverse and includes all ages with Pediatrics, Adults, and Seniors. Approximately 15 faculty, 5 interns, 10 upper level residents, 4 mid-level providers, 1 psychiatrist, 1 psychologist, 1 pharmD, 3 maternal child health fellows, 1 sports medicine fellow, 1 nurse case manager, and 1 social worker, provide broad spectrum primary care at FMC.



FMC is very actively involved in education. We are the continuity clinic site for the 16 Family Medicine Residents mentioned above. The FMC also has residents from Psychiatry who rotate with us for ambulatory medicine training. We are a clinic site for the Sports Medicine and Maternal-Child Health fellows from our department. The FMC is very active in medical student education and we have numerous Family Medicine Clerkship and Continuity Clinic students who rotate with

us. Additionally, we have Nurse Practitioner students, Physician Assistant students, and Medical Assistant students who receive training at our clinic.



The FMC is also the site of numerous specialty and subspecialty clinics that further the mission of care within our department. These clinics include:

- Developmental Disabilities clinics through TEASC
- Cardiac Risk Reduction and Diabetes Management
- FOCUS (which follows children born to mothers who had addiction issues during their pregnancies)
- Milagro (for pregnant women with addiction issues)
- Obstetrical Ultrasound
- Mental Health Services (Psychiatry and Psychology)
- Procedures Clinic
- Pediatrics Clinic

Additionally, the FMC is the location of and provides a large portion of the staff for the wildly successful drive-by flu shot clinic that has been offered for the past several years. At the drive-by flu shot clinic approximately 3,500 vaccinations are given.

# Significant Developments

Valerie Carrejo, MD joined our faculty in November 2012 and will be transitioning to acting Medical Director of FMC July 1, 2013.

Chris Camarata, MD, acting Medical Director will be transitioning to Associate Residency Director July 1, 2013.

John Leggott, MD transitioned to Medical Director of Atrisco Herritage clinic after many years of patient care at FMC.

We said goodbye to of our valued colleagues Elicia Lujan, FNP, who went in another primary care system in Albuquerque.

# Significant Plans

Over the next year, our management team will be working with UNM on building another wonderful facility on 4<sup>th</sup> street. The planning has begun and we are anxiously looking forward to the new facility.

We continue to work with our social worker and staff to connect more with the community we serve and are working toward getting community navigators to help with the needs of our clients in an attempt to mitigate the social barriers that lead to health disparities.

# Faculty

Sally Bachofer, M.D.	
Michelle Bardack, M.D.	Outpatient Education Coordinator
Antoinette (Toni) Benton, M.D.	TEASC
Christopher Camarata, M.D.	Medical Director for FMC
Valerie Carrejo, M.D.	Associate Medical Director for FMC
Dianna Fury, M.D.	Interim Residency Program Director
Sarah Gopman, M.D.	Maternal & Child Health Educational Director
Warren Heffron, M.D.	
Arthur Kaufman, M.D.	
Lawrence Leeman, M.D.	MCH Committee – Chair
Martha Cole McGrew, M.D.	Department Chair
Berthold Umland, M.D.	
Byrch Williams, M.D.	Vice Chair of Clinical Affairs UNMMG Physicians Advisory Group
Robert Williams, M.D.	

# **Senior Health Clinic**

Division:	University of New Mexico Department of Family & Community Medicine
Period Covered:	July 1, 2012-June 30, 2013
Submitted by:	Linda J. Romero, M.D.; Medical Director, Senior Health Clinic
Content:	Overview Significant Developments Significant Plans

### **Overview**

The Senior Health Clinic is dedicated to delivering comprehensive health care to seniors. The clinic is multidisciplinary with providers in Family Medicine and Internal Medicine. The clinic is located near the University of New Mexico and close to the I-25 and Lomas intersection offering easier access to seniors with handicap parking and shuttle service to and from UNM Hospital and nearby UNM clinics and pharmacy. We provide web cam interpreter services for non-English speaking patients. We offer patients an onsite interdisciplinary team of physicians, physician assistants, nurse practitioners, registered nurses, clinical pharmacists, podiatrist, psychiatrist, RN case manager, and social worker.

Our team can address the full range of senior health care needs from the routine to the most complicated of the geriatric syndromes. Our clinic also serves as a geriatric education training center for geriatric fellows, residents, and students. Our geriatric program has an accredited geriatric fellowship and we train one to two geriatric fellows per year.

### **Significant Developments**

Primary Provider Status: We are low on providers and our clinic remains closed to new patients. We have had a Family Practice Geriatric faculty posting open for several years and that remains unfilled. We requested one midlevel through UNMH, over a year ago, and that remains "status unknown". Since the last report 2012, one physician assistant (Laura Wylie) is back to 1.0 FTE (0.5 clinic, 0.3 home visits, 0.2 indirect patient care) following a six month maternity leave and another long time physician assistant (Kathy Johnson) reduced her clinic time to 0.1 FTE for 2012. Kathy Johnson's home care visit time was reduced to 0.1 FTE. The rest of her FTE will be devoted to teaching in the PA program. Judith Harris CNP continues to work 0.5 FTE with us in clinic. The rest of her FTE is as faculty with the College of Nursing. The provider positions are posted but have not been filled likely due to the shortage of geriatric trained physicians/providers. Due to our

shortage, for the first time ever, Senior Health Clinic panel closed to new patients beginning in 2010 and remains closed. We had an Internal Medicine faculty leave May 2013 (Dr. Hemphill). He was at 0.3 FTE in clinic. All of his patients had to be redistributed to the current providers when he left. Summary of current primary providers is the two Internal Medicine faculty, one on three month maternity leave; two FP faculty, three part mid-levels.

Other Providers: Dr. Roberto Gomez (psychiatrist) continues with us at 0.3 FTE with SHC and has been an asset to the clinic.

Two clinical pharmacist Dr. Melanie Dodd and Dr. Rucha Bond continue to work with us providing a total of three half day clinics per week in addition to staffing the Fellow's clinic.

We continued discussions/meetings with physical therapy and occupational therapy and they will join us at Senior Health in approximately October 2013.

Geriatric Fellow-We had one geriatric fellow from September 2012 to September 2013.

# **Significant Plans**

A significant priority is to recruit providers to build our geriatric team. We continue to have three major areas of focus which are falls, memory and cognition, and the frail elder. Our nurses started a Nurse Group Visit clinic November 2010 and this continues the second Monday afternoon of each month and has been successful. We will continue to develop our Patient Centered Medical Home along with the other UNM clinics. We will be adding more interdisciplinary health disciplines, hopefully this year (OT and PT in October 2013). We plan to develop and improve the area of fall assessment and treatment.

# **Family Medicine Inpatient Service**

Division:	University of New Mexico Department of Family & Community Medicine
Period Covered:	July 1, 2012 – June 30, 2013
Submitted by:	Daniel Waldman, M.D., Director of Inpatient Service
Content:	Overview Significant Developments & Projects Upcoming Plans Quality Data & Statistics

# **Overview**

The UNM Family Medicine Inpatient Service continues to care for a broad range of diagnoses, including cardiac conditions such as heart failure, neurologic conditions such as TIAs and seizures, along with many typical diagnoses that could expect to be found on a non-surgical service. Additionally, we comanage appropriate orthopedic and surgical patients, and are continuing to work with pediatrics to broaden our involvement in the hospitalizations of our routine pediatric The Family Medicine inpatient patients. service admits 20-25% of the adult inpatient medicine diagnosis patients, with a handful of pediatric patients per month.

There are two Family Medicine Inpatient

Teams (excluding the FM Maternal-Child Health Service). Both of these teams have an attending as well as an upper level FM resident. One team has two interns (FM Team B) while Team A has one. We have two inpatient midlevels (PA's) hired by the hospital, who work on our service during weekdays.

Combined census of the FM Inpatient Service for this past year was down slightly, averaging about 19. The FM admitting criteria was broadened in response to this trend, which is partly explained by a decreasing length of stay (see "section III: Quality Data & Statistics").

# Significant Developments & Projects

### 3N/Family Medicine Annual Goals

This year UNM leadership asked inpatient medical directors to choose from a list of defined, shared goals for the year. These goals are submitted by floor, but since 3N is a mixed floor, with an average of 3.5 of the 10 patients there being from non Family Medicine services, the Family Medicine service extended these goals to the Family Medicine service in general, whatever floor the patients are on.

Here are the goals as submitted to UNM Inpatient leadership in January 2013:

### Pillar 1: Growth and Strategic Plans (1d)

By our statistics (using Midas), the FM length of stay is currently about 5.3 days, but increases to 5.6 days when you take into account 2 outlying patients. Our interventions for this year:

- 1. identify specific diagnoses with higher LOS to develop interventions targeted towards that group
- 2. work with care management on solutions to discharging our extreme outlier patients
- 3. increase the amount of morning discharges, each of who could save about 6 hours of LOS (length of stay)

#### Pillar 2: Quality and Safety (2b)

Focus on heart failure core measures, working with cardiology and the heart failure program. Have at least 90% compliance for all HF core measures.

#### Pillar 3: Service (3a)

We have identified specific areas on the HCAHPS report that we would like to improve, improving each metric by at least 15% on the percentile ranks, focusing on communication:

Communication with nurses

- nurses treat with courtesy/respect
- nurses listen carefully to you
- nurses explain in way you understand

Communication with Doctors

- Doctors treat with courtesy/respect
- doctors listen carefully to you
- doctors explain in way you understand

Communication about medicines

- tell you what medicine is for
- staff describe medicine side effects



# Pillar 4: People (4e)

Nursing and medical leadership will work together on developing 360 degree evaluation forms that focus on effective interdisciplinary communication.

As part of the method to track these goals, a Family Medicine inpatient dashboard was created in conjunction with the help of Christina CdeBaca.

### <u>Care Transitions Pilot Project (ongoing)</u>

The service continued working with members of the UNM Department of Pharmacy on the Care Transitions Pilot project, which involved pharmacy residents interviewing our patients on admission, and pharmacists performing depart reviews of medications for more complex patients. This project was successful enough as a pilot that the Department of Pharmacy received additional funding to expand this project to other services.

### <u>Mortality Review Project (new)</u>

The inpatient service started a clinical review process for all deaths that occur on the service. The clinical review is being performed by the attending caring for the patient as well as one of the core inpatient faculty. The goal for these reviews is internal care improvement.

### <u>Ultrasound Curriculum (new)</u>

More physicians are using portable ultrasound as a point-of-care tool to aid medical decision making. Over the last year 3N was able to obtain the use of one of the older portable ultrasound machines in the hospital- a discarded SonoSite Titan, formerly used by the Rapid Response Team. Up until summer 2013, the applications of the ultrasound were limited by only having a vascular/superficial probe.

With the help of CIR, the resident union, the Family Medicine service was able to obtain an ultrasound probe capable of a more broad set of applications. As part of the general education in this new skillset, time was carved out from the resident's Ambulatory Surgery month (one 1/2 day per week during that block) where a mini curriculum is gone through. The curriculum is currently supervised by Jennifer Lasman (PGY3) and Byrch Williams, with help from Dan Waldman and Chris Camarata.

### New resident Call Room

The Perfusionist's call room outside 3N was given to the FM residents, including a general cleaning and painting of the space. While this doesn't have a major impact on the care given by the teams, it is felt to be a positive for the residents, as well as nursing who appreciates having the FM residents closer to 3N.

# **Upcoming Plans**

# Continue to Monitor Family Medicine Annual Quality Goals

With the aligning of hospital goals and unit goals, the FM Inpatient Service will need to prioritize hospital goals moving forward, though the goals don't need to be limited to just these. A couple metrics that will be interesting to keep an eye on specifically are LOS and readmission rates. In particular: do these initial gains in LOS reduction prove durable? Also, are we able to move more towards readmission rates for specific diagnoses, i.e. Heart Failure, COPD, etc. These are likely the rates that will matter to administrative bodies. To date we've had a problem getting useful data due to inconsistencies in coding.

# <u>Finalize 360 Eval</u>

Part of our chosen FM Inpatient Goal set was to improve interdisciplinary communication, and developing of a 360 degree evaluation was the tool we've chosen. The goal would be to create a brief 360 eval form to be filled out by 3N nursing staff about the interaction they have with our residents. We've found those to be useful in the clinic location for helping certain residents work on communication.

# 

This is going to be a departmental priority this year. Looking at inpatient documentation itself isn't always a helpful indicator for the attending involvement because the documentation is often from residents. We're trying to figure out a way that will investigate decisions made by attendings, such as antibiotic choice on discharge.

# <u> Faculty – Team Structure</u>

With Dan Waldman moving into the leadership position of the residency, the inpatient leadership needs to be turned over to someone new. The department is trying to hire someone new to put into an assistant inpatient director position, with the hope of that person transitioning into inpatient director over the next year or so.

The Inpatient service is excited to have two new graduates working as part time inpatient, part time outpatient faculty: Elena Bissell and David Stromberg. Both have strong New Mexico ties and are dynamic additions to both the inpatient service and the department in general. They will of course need additional support and mentoring, especially in this first year as they transition from resident to attending.

### **Observation Paperwork**

Dan Waldman is working with ED leadership on streamlining observation paperwork with the hope that easier paperwork will speed up decision-making processes for borderline patients. Additionally, it should save time on the discharge end as well.

# Pediatric Care Transitions

We are currently working on an inpatient transition for pediatric patients with chronic conditions. These are patients who are at risk for frequent illness and hospitalization, who then need to be admitted to adult floors when they turn 18. Understandably, the adult environment at UNM can be quite a transition for these young adults and their parents. Adult units also have different rules surrounding medication administration and visiting hours than their pediatric counterparts.

We're working with Internal Medicine and Pediatrics on how we can best help these patients while they are admitted.

# **Ongoing Support for Care Transitions Project**

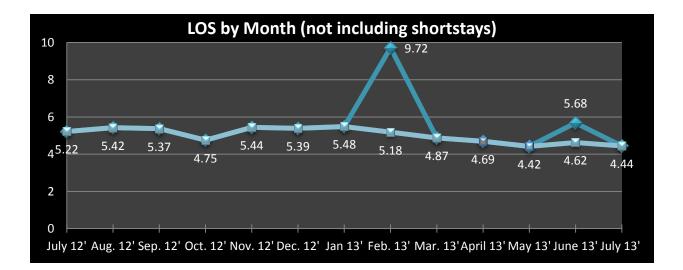
With the popularity and success of the Pharmacy Care Transitions Pilot project, it's going to be broadened to additional medical services, such as Gold Medicine. We will continue to support the project in whatever way we can as more resources and FTE's are allocated.

# **Quality Date & Statistics**

This year the quality statistics focused on were those set by the Family Medicine service goals- with a particular attention paid LOS and heart failure core measures.

# <u>Length of Stay</u>

There have been some impressive early success in efforts to decrease LOS. The efforts began with raising general awareness among faculty and residents and asking teams to prioritize one daily discharge to be performed during rounds. Since UH came out with a goal to decrease LOS by 5 days, we are tracking by days.



# Maternal Child & Reproductive Health Program (MCH)

Division:	University of New Mexico Department of Family & Community Medicine
Period Covered:	July 1, 2012 — June 30, 2013
Submitted by:	Larry Leeman, MD, MPH: MCH Director Stephanie Barnett, MPH: MCH Program Specialist Sarah Gopman, MD: MCH Education Director
Content:	Overview Significant Developments Significant Plans & Recommendations Professional Activities

#### **Overview**

The Maternal, Child, and Reproductive Health (MCH) Program is comprised of education, service, and research activities. Larry Leeman, MD, MPH, Professor in both the Family & Community Medicine and Obstetrics and Gynecology departments, is the MCH Director, while Sarah Gopman, MD serves as the program's Education Director.

Our program provides maternal, child, and reproductive health education to medical students, residents, fellows, and faculty. Our elective medical student rotations include a week-long introduction to our MCH service for 3<sup>rd</sup>-year clerkship students and a four-week Sub-Internship that allows 4<sup>th</sup> year students to gain experience in both the inpatient and ambulatory care settings.

Family Medicine residents each have four rotations on the MCH inpatient service, in addition to one in the Intermediate Care Nursery (ICN-3), one on the Obstetrics service, a one-week rotation on the Midwifery service, and an Ambulatory Women's Health rotation. Additionally, we provide maternal, child, and reproductive health education through resident continuity clinic sites, our Center for Reproductive Health, the Milagro Program, the FOCUS clinic, various weekly and monthly didactics, and annual clinical training workshops. Much of the reproductive health education is made possible by two resident training grants.

In 2003, we began a two-year Maternal, Child, and Reproductive Health Fellowship to train leaders in Family Medicine for rural or academic practice settings. Offered in collaboration with the UNM departments of Obstetrics and Gynecology and Pediatrics, the fellowship provides advanced clinical training in maternity, newborn, and reproductive health care, as well as Public Health coursework with the option to obtain a certificate or MPH. We have grown from one to three fellows at a time and have had eight graduates so far. The MCH program also coordinates continuing medical education for our twenty faculty members in topics including Advanced Life Support in Obstetrics (ALSO), Nexplanon insertion, immediate-postpartum IUD insertion, breastfeeding support, and, if desired, first trimester dating ultrasound and abortion care.

The Maternal, Child, and Reproductive Health Program provides patient care in both the inpatient and outpatient settings. Inpatient maternal and newborn care is provided on the MCH service, in the Newborn Nursery, and in the ICN-3. Outpatient prenatal care is provided through our MCH network, which includes clinics from UNM Family Medicine, First Choice Community Health, First Nations, and Cuba PMS. In 2011, we also took on the Milagro perinatal substance abuse program.

Postpartum long-acting reversible contraception (LARC) has been expanded in Labor and Delivery and in the Mother-Baby Unit due to a resident grant that enables us to provide free postpartum IUDs and contraceptive implants to women for whom cost would otherwise be prohibitive. Outpatient reproductive healthcare is provided not only in the Family Medicine continuity clinics and the weekly ultrasound and pregnancy options clinic, but also at the Center for Reproductive Health (CRH), which opened in 2007 as a collaborative effort of the departments of Family and Community Medicine and Obstetrics and Gynecology.

Maternal, Child, and Reproductive Health research topics have included vaginal birth after cesarean section, family planning, medication abortion, rural maternity care, outcomes after childbirth, and pregnancy outcomes for opioid-dependent women.

#### Significant Developments

Family Medicine's Maternal, Child, and Reproductive Health Program continues to excel in the core mission areas of education, service, and research, forging and strengthening collaborations with other departments and community partners in the process.

#### Education

The MCH Program provided residents and faculty with several educational opportunities this year in addition to our ongoing weekly and monthly didactics. MCH faculty presented the Advanced Life Support in Obstetrics (ALSO) Provider Course in August, where all 2<sup>nd</sup>-year Family Medicine residents and 1<sup>st</sup>-year Obstetrics and Gynecology residents are trained in emergency obstetrical care. In November, additional MCH faculty were trained to teach ALSO when they took the ALSO Instructor Course, taught locally with support from previously-trained physicians from our program. MCH and Ob/Gyn faculty also taught the Nexplanon training course in June, which certified all Family Medicine and Ob/Gyn interns in the provision of contraceptive implants. As part of our Baby-Friendly Hospital Initiative, Family Medicine residents and MCH faculty were also required this year to complete self-directed training modules from Wellstart International's breastfeeding curriculum. Additionally, residents and MCH faculty completed a self-directed electronic fetal monitoring course.

Family Medicine residents' reproductive health education flourished this year as well. In addition to the Nexplanon course and the ongoing LARC resident education grant, we established a resident training agreement with Planned Parenthood of the Rocky Mountains for first trimester abortion training. This training was funded by a \$33,734 resident education grant from an anonymous private foundation.

Our Maternal, Child, and Reproductive Health Fellowship accepted a new fellow, Stephanie Long, MD, in August. Dr. Long replaced Jessica Goldstein, MD, who graduated and completed her Public Health Certificate. As with most of our fellowship graduates, Dr. Goldstein's post-fellowship career includes resident education. Additionally, three current and former MCH fellows wrote scholarly journal articles that were published or accepted for publication this year.

#### Service

Family Medicine residents and faculty delivered 735 babies on our MCH inpatient service from July 1, 2012 through June 30, 2013.

Our MCH service team expanded this year with the addition of a Family Nurse Practitioner position. Grace Mishkin, CFNP, joined us in June to provide patient care for postpartum mothers and newborns, with a focus on breastfeeding support and contraception. We expect this to benefit our patients by providing continuity and enhancing the quality of care and to benefit our residents by creating more time for education. Furthermore, the addition of this position supports the hospital's goal of achieving a Baby-Friendly Hospital designation, an initiative in which MCH faculty have played an important role.

We are very excited about our success this year in increasing access to postpartum LARCs. Due primarily to our LARC grant, 20% of all patients who deliver at UH are being discharged with an IUD or contraceptive implant in place. Drs. Leeman and Espey worked closely with NM Medicaid to expand coverage to include postpartum LARCs, making New Mexico only the second state in the nation to provide this coverage and opening the door for postpartum women statewide to access the most effective forms of contraception.

Our Milagro perinatal substance abuse program has grown this year as well. In collaboration with the UH Addiction and Substance Abuse Program (ASAP), we provide comprehensive, coordinated care for pregnant women with a history of or current substance abuse issues. As we continue to work with our partners in the departments of Pediatrics and Obstetrics and Gynecology (Ob/Gyn), the program is gradually expanding and now includes the Family Medicine Southeast Heights clinic. Milagro has become a model program and is working with providers statewide to improve connections with and provide mentorship for other programs.

#### Research

Maternal, child, and reproductive health research and publications are expanding as we cultivate faculty and fellows' research interests. We frequently employ a multidisciplinary approach, working with faculty and resident physicians from the Ob/Gyn department and with medical students. We are currently conducting research with our colleagues in Ob/Gyn regarding pregnancy and neonatal outcomes of buprenorphine induction and

methadone opioid medication therapy for opioid-dependent pregnant women. Furthermore, Drs. Long and Leeman published an article this year in *Obstetrics & Gynecology Clinics of North America* about treatment options for high-grade squamous intraepithelial lesions. Additional MCH publications and presentations have already been accepted for next year.

#### Significant Plans and Recommendations

Next year we plan to hire a new MCH core faculty member and two MCH fellows. Nicole Yonke, MD, MPH will become our third FM-OB faculty member in November, serving as core fellowship faculty, seeing patients in the Milagro Program, attending on the MCH and ICN-3 services, and participating in research activities. In addition, Dr. David Stromberg will begin attending on the MCH service in January. In August, the MCH fellowship will welcome Dr. Mary Beth Sutter to the team. MCH fellow Dr. Jordana Price will graduate in January and be replaced by Dr. Sue Andrews. Our new hires will contribute to our mission areas of education, service, and research.

#### Education

In addition to graduating and hiring new fellows, the MCH fellowship plans to expand reproductive health education by establishing a fellow training agreement with Planned Parenthood of the Rocky Mountains.

We have significant plans for improving resident education as well. The 2013-2014 academic year will bring the first phase in moving our Ambulatory Women's Health rotation from the third to the second year of residency, thereby providing important reproductive health education sooner and allowing time for residents to seek additional training if desired. Additionally, we plan to move our Center for Reproductive Health to a larger building and are excited about the opportunity this will bring for expansion of general gynecology training through the creation of a clinic for evaluation and treatment of abnormal uterine bleeding. We will also introduce a new self-paced curriculum, Lessons to Enhance Awareness of Reproductive Needs (LEARN). In August, Family Medicine residents and others will be trained by our faculty to provide Advance Life Support in Obstetrics (ALSO). In June, the new Family Medicine interns will be trained to insert Nexplanon contraceptive implants. Finally, we will be applying for additional grant funding for resident abortion training.

Medical student education will expand next year as well when we begin to accept medical students from other schools for our Sub-Internship rotation. In addition to receiving a broad maternal, child, and reproductive health education in both inpatient and outpatient settings, students with a particular interest in Family Medicine obstetrics will gain knowledge of our program that will be useful in making residency program rank decisions.

#### Service

We are looking forward to the initiation next year of Medicaid payment for immediate postpartum IUDs and contraceptive implants. This will expand access throughout the state and allow us to provide this service to our Medicaid patients indefinitely, without reliance

on grant funding. Our LARC grant will still be in place, however, for those UH patients who are not eligible for Medicaid. In the future, we would like to see immediate postpartum LARC coverage expand to include patients with private insurance.

#### Research

With the addition of Dr. Yonke to our faculty, we anticipate an increased focus on maternal, child, and reproductive health research. Drs. Yonke and Leeman have already had an article, "First Trimester Surgical Abortion," accepted for publication next year. Drs. Yonke, Leeman, and Hooper will be presenting "IUD Troubles: Best Practices for Difficult Insertions, Removals, and the Malpositioned IUD" at the Association of Reproductive Health Professionals' (ARHP) conference in September. MCH faculty and fellows, the MCH program specialist, and Ob/Gyn faculty have had a poster entitled "Innovative Approaches in Postpartum Contraception" accepted for presentation at the ARHP conference as well. Additionally, "Diminishing Availability of Trial of Labor After Cesarean Delivery in New Mexico Hospitals," written by former MCH fellow Melissa Beagle, MD, MPH and MCH and Ob/Gyn faculty, will be published in *Obstetrics & Gynecology* in August.

#### **Professional Activities**

#### Clinical Partnerships

Drs. Larry Leeman and Sarah Gopman, with the MCH fellows, continue to provide prenatal care as well as consultation to mid-level providers serving rural prenatal patients in Cuba, NM, at Presbyterian Medical Services. Dr. Leeman also serves urban Native American and other underserved urban populations at First Nations Community Healthsource in Albuquerque, NM, where he works in collaboration with First Nations' Family Medicine physicians.

#### Advanced Life Support in Obstetrics

In addition to being Co-Director for UNM's annual ALSO Provider Course, Dr. Larry Leeman is the Managing Editor of the national ALSO program and is Co-Editor of the Global ALSO syllabus. He recently helped develop the new Basic Life Support in Obstetrics course to teach emergency obstetrical care to non-maternity care providers.

#### PB&J Family Services

Dr. Sarah Gopman is Vice President of the Board of Directors of PB&J Family. PB&J operates family-centered programs throughout Central New Mexico which are dedicated to helping at-risk children, including home-based programs, therapeutic preschools, and prison-related family support programs.

#### Baby Friendly Hospital Initiative

Drs. Gopman and Leeman are working to advance the UNM Baby Friendly Hospital Initiative with the UH Baby Friendly group and the UH MCH Committee. To receive the Baby Friendly designation, the hospital must meet international requirements for support of breastfeeding mothers and infants.

#### University Hospital Maternal and Child Health Committee

Dr. Leeman continues to chair this committee and Dr. Gopman joined the committee in 2009. Accomplishments and projects of the committee this year included development of revised guidelines for infants of diabetic mothers and neonatal hypoglycemia, collaborating with NM Medicaid to expand access to immediate postpartum long-acting reversible contraception, and starting to develop a guideline for breastfeeding infants of mothers with substance abuse problems.

#### APPLE Study of Pelvic Floor Outcomes During Pregnancy and After Childbirth

This five-year NIH funded study has completed enrollment this year. It is a collaborative effort of faculty in Family Medicine, Ob/Gyn and midwifery. Two manuscripts have been accepted, three are under consideration in journals and three more are in preparation and should be submitted within the next six months.

#### Medical School Curriculum Contributions

Dr. Gopman was the block Chair for Endocrinology/Human Sexuality and Reproduction in 2012, a five-week core course in the second year of the medical student curriculum. As course Director, she designed the curriculum, including a variety of learning experiences such as lectures, workshops, panel discussions, and tutorials. She also recruited faculty members to participate in teaching the block. She integrated large-group interactive models of learning, such as Web Clickers, to increase active learning by students. The block was a collaborative effort, including instructors from Family Medicine, Obstetrics and Gynecology, Internal Medicine (including the division of Endocrinology), and several other departments.

# Sandoval Regional Medical Center (SRMC)

Division:	University of New Mexico Department of Family & Community Medicine
Period Covered:	July 1, 2012 – June 30, 2013
Submitted by:	Shane Cass, D.O. Medical Director, SRMC
Content:	Overview Significant Developments Significant Plans Professional Activities

#### **Overview**

Sandoval Regional Medical Center is located in Rio Rancho, serving Sandoval County. Primary care is located in the Medical Office Building of the hospital. The family medicine providers at SRMC are practicing outpatient medicine including pediatrics, adult and geriatric medicine.

The facility includes thirteen examination rooms and two treatment/procedure rooms with three family physicians and two nurse practioners in addition to the nursing staff and medical assistants.



#### **Significant Developments**

Family medicine through SRMC has undergone tremendous growth. Two of our providers have filled their practices and the last family physician is close to filling. We have spent the majority of the year developing our panels and practices, working on processes to improve our access and streamlining our day-to-day functioning to meet the needs of meaningful use protocol. SRMC has had financial challenges, but primary care has been within its anticipated budgeted expectations at all stages of SRMC's growth. We have also been successful in getting phase 3 medical students in to our clinics for precepting and have accepted PA students and medical students for continuity clinics.

#### **Significant Plans**

We are currently recruiting for additional providers! We are currently looking for two more full time FTE positions. We will in addition be working on implementing advanced access principles and working on quality measures that improve patient care and outcomes. We hope to increase our teaching abilities and responsibilities as well. Lastly, we will continue to work on processes that will further our goal to become a part of the medical home model of care.

#### **Professional Activities**



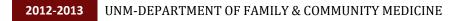
Shane Cass D.O., is currently the medical director for the Medical Ambulatory Services of SRMC. He is also the assistant director for the Primary Care Sports Medicine Fellowship and a team physician for the UNM Lobos. Dr. Cass practices outpatient primary care and has a sports medicine consultation practice at SRMC.



Celia Valdez M.D. is currently an assistant professor in the department of Family & Community Medicine seeing out-patient family medicine at SRMC. Dr.Valdez precepts once a week at the South East Heights resident clinic.



Kevin Henry M.D. is currently an assistant professor in the department of Family & Community Medicine seeing out-patient family medicine at SRMC. Dr. Henry precepts once a week at the Family Medicine Center.



# **Research & Scholarly Activities**



- Research Community
- FY13 Contract & Grant Awards
- FY13 Publication List
- New Mexico Center for Advancement of Research, Engagement, and Science on Health Disparities (NM CARES HD)
- Research Involving Outpatient settings (RIOS Net)



# **Research Community**

Division:	University of New Mexico Department of Family & Community Medicine
Period Covered:	July 1, 2012 – June 30, 2013
Submitted by:	Robert Rhyne, M.D., Interim Vice Chair of Research Gina Cardinali, Interim Program Manager of Research
Content:	Overview Contract & Grants Awarded Publication List

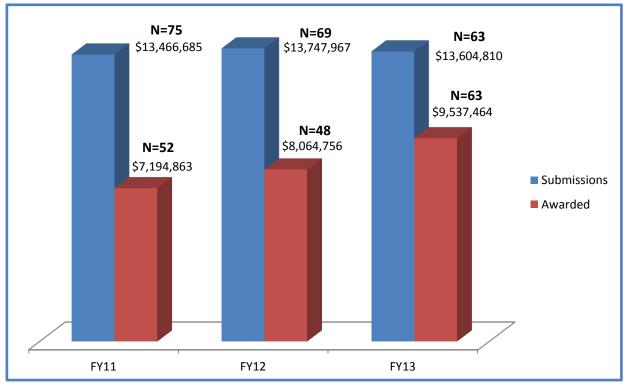
#### **Overview**

In recent years The Department of Family & Community Medicine (FCM) has consistently ranked in the top 10 nationally in NIH research funding among all departments of Family Medicine, and currently ranks 6<sup>th</sup>! The mission of the FCM Research Division is to advance the science of health, research, education, and service through community collaboration. Our goal is to improve health and healthcare for all New Mexicans. We strive to remain nationally recognized among departments of Family Medicine for innovative primary care research and education that improves the health of our communities and eliminates disparities in health care.



To accomplish this mission our investigators conduct novel research that asks and answers important questions relevant to the diverse communities we serve, primary care practice, and public health priorities. We apply rigorous qualitative and quantitative methods to create culturally-sensitive and often personalized solutions to problems. We are committed to producing high-quality scholarship and participating in systematic dissemination of our findings.

Fiscal Year (FY) 2013 saw an 18.3% increase in awarded grant dollars over FY12, with total award amounts increasing from \$8,064,764 to \$9,537,464. We currently have 63 ongoing grants and contracts awards. The total amount of grant funds requested in submissions decreased from FY12, \$13,747,967 to FY13 \$13,604,810, a decrease of only 1.0%.



Family & Community Medicine Submissions and Awards, FY11-FY13

Our awarded totals have been steadily increasing since FY11, and our submission totals have remained steady at over \$13,000,000 yearly. This has several possible interpretations. The quality and competitiveness of our faculty's submission are getting better. And the support from the research management team in the submissions process is improving.

Our faculty and staff conduct projects in areas such as health disparities, patient education, disease prevention, and chronic disease care and are involved in diverse efforts including running and participating in Research Involving Outpatient Settings Network (RIOS Net), a state wide primary care practice-based research network, the New Mexico Cares Health Disparities Center, the Center for Participatory Research, the Office of Diversity, the Center for Native American Health, the program for Maternal and Child Health, and the Institute for Indigenous Knowledge & Development and the Office of Community Health. Our faculty also collaborate with diverse countries such as Kenya, Ecuador, Cuba, Mexico, Albania, and Kosovo.

Projects are supported by various funding entities, including federal, state, local, and nonprofit sources. Recently our faculty have initiated more pilot projects funded through UNM internal mechanisms, e.g. the CTSC pilot awards and the Research Allocations Committee, in the School of Medicine. The goals of these pilot projects are to apply for larger extramural research grants. Our faculty, fellows, residents, students, and staff participate in a wide variety of scholarly activities including teaching, publishing, reviewing, mentoring, and presenting their research at local, state, national, and international conferences and community meetings. We offer a full spectrum of research training and strive to engage learners of all levels (undergraduates, medical students, graduate students, residents and fellows). We are committed to the development of junior investigators through mentorship by senior investigators.

In recent summers we have welcomed student-faculty research collaborations through the Undergraduate Pipeline Network and its sponsors. This past summer FCM hosted five undergraduate student research mentees from colleges all around the US, who were paired with department research mentors. Each student had the opportunity to work on a specific research project and attain skills needed to apply for and succeed in post-baccalaureate research education.

We have developed a well-functioning, comprehensive pre and post award Research Management Team that coordinates all grants and contracts submissions, operates the departmental IRB review for all submissions, and handles the grants management in the post-award period. The team has developed a compliance electronic reminder system, a periodic communications system that acknowledges peer reviewed publications and grants/contracts awards, and a "research notes" publication to all of DFCM members. Statistical, methodological, measurement, and survey consultation is available by our department's Biostatistics team.

The department recognizes the dedication of our faculty and continues to distribute monetary rewards for going "above and beyond" expectations. Our first Best FCM Research Poster Award was announced at the New Mexico Public Health Association & the New Mexico CARES Health Disparities Center National Health Disparities 2013 Joint Conference.

I believe the people of the Department of Family & Community Medicine are its greatest strength and would like to thank everyone within our research community for their tireless work and dedication to improving health in our communities. I'd also like to acknowledge the department's Research Management Team (Carolyn Lara-Smith, Danelle Callan, Virginia Chaves, Denise Ruybal, Dan Rogers, Miria Kano, Pam Sedillo, Kendall Alexander, Elizabeth Downs, and Gina Cardinali) for providing exceptional ongoing grant and contract administration and support.

I invite you to browse the following pages for more information on our collective projects and scholarly activities.

Sincerely,

Robert Rhyne

Robert L. Rhyne, M.D., Professor and Vice Chairman for Research

# FY13 Contract & Grant Awards

## **GRANTS:**

William Athas	
Region IX Education Cooperative	\$25,000
Development and Enhancement of NM Early Learning Data Resources	
New Mexico Department of Health	\$15,000
Geocoding and Functional Requirement Group Support and Consultation	
American Lung Association	\$10,000
Respiratory Illnesses, Air Toxics, and Multi-Unit Housing	
American Lung Association	\$750
New Mexico Multi-Unit Housing GIS Database	
Sally Bachofer	
HRSA/Health Resources and Services Administration	\$223,340
Residency Training in Primary Care	
Michelle Bardack	
Internal Pilot Project	\$0
Implementation of a Curriculum in the Family Medicine Center	

Clinic That Systematically Prepares the Interns to Provide Comprehensive Care of Their Complex Patients with Chronic Pain

#### Lisa Cacari- Stone

Santa Fe Community Foundation	\$50,000
Evaluating Health Equity in New Mexico: Impact of Place Matters, Health Impact Assessments	
Christina Getrich	
University of North Carolina Medical School at Chapel Hill	\$8,850
Development of a Spanish Language Colorectal Cancer Screening	
Deborah Helitzer	
NIH/National Institutes of Health	\$359,994
Achieving a Critical Mass of Women Biomedical Faculty: Impact of 3 US Programs	
University of Texas at Tyler	\$88,197
Evaluation Core of the SW Center for Agricultural Health, Injury Prevention and Education	
University of Colorado – Denver	\$18,496
MAP - ERC Occupational Safety & Health Education & Research Centers - T42	

Internal CTSC	\$20,040
Assessing the Reliability and Validity of Pain Measure for Chronic Non-Cancer Pain	
Angela Jo	
Internal CTSC	\$27,112
Underinsurance in New Mexico Health Workers	
Lauren Hund	
Internal SEAC	\$10,000
Underinsurance in New Mexico Health Workers	
Nikki Katalanos	
HRSA/Health Resources and Services Administration	\$130,000
Physician Assistant Training in Primary Care	
HRSA/Health Resources and Services Administration	\$204,239
ACA: Expansion of Physician Assistant Training Program	
Arthur Kaufman	
DHHS/Agency for Healthcare Research and Quality (AHRQ)	\$497,114
HERO: New Mexico's Health Extension for Primary Care Transformation Care	

Lawrence Leeman	
Anonymous Non Profit Foundation	\$33,734
Early Training Grant	
Tassy Parker	
HHS / Indian Health Service ( IHS )	\$170,000
American Indians Into Medicine – INMED	
University of Wisconsin	\$29,191
Healthy Children Strong Families: American Indian Communities Preventing Obesity	
Veronica Plaza	
SW Creations Collaborative	\$49,000
Hacia la Universidad in APS	
Robert L Rhyne Jr.	
University of North Carolina (American Cancer Society)	\$504,975
Improving Colorectal Cancer Screening for Latinos in Primary	
Care	
DHHS/Agency for Healthcare Research and Quality (AHRQ)	\$291,693
Health Extension Rural Office: Translating Research Into Localities (HERO TRaILs)	

Internal CTSC	\$29,608
Colorectal Cancer Decision Aid/Navigator Pilot Project	
Andrew Rowland	
Internal CTSC	\$29,695
Pilot Study of the Impact of a Mothers Parenting Style on Infant Cortisol in Late Preterm and Full-term Babies	
Helene Silverblatt	
HRSA/Health Resources and Services Administration	\$274,181
New Mexico Area Health Education Centers	
Kristine Tollestrup	
New Mexico Department of Health	\$89,675
ACA - New Mexico Public Health Learning Collaborative	
HRSA/Health Resources and Services Administration	\$1,987
New Mexico Public Health Traineeship	
Francisco Soto-Mas	
Internal CTSC	\$29,420
Health Literacy and Self-Efficacy in Hispanic Adults	

Nina Wallerstein	
NIH/National Institute on Drug Abuse	\$171,183
RezRIDERS Project and Program	
National Congress of American Indians	\$159,733
NARCH V Program at NCAI-PRC and University of New Mexico	
Healthy Native Communities Partnership, Inc.	\$82,000
Healthy Native Communities Partnership	
San Francisco State University	\$32,375
Distinguished Visiting Professor Agreement	
Pueblo of Jemez	\$19,999
Jemez JHHS Public Health Programs	
NIH/National Institute on Drug Abuse	\$11,412
RezRIDERS Project and Program	
Robert Williams	
NIH/National Institutes of Health	\$373,725
Stereo-typing in Medical Student Decision Making: presence, origins and solutions	

Wayne State University	\$7,000
Building Research Culture and Capacity with Quality Improvement	
CLINICAL CONTRACTS:	
Arthur Kaufman	
New Mexico Department of Health	\$18,500
New Mexico Immunization Coalition (FY14)	
Martha Cole McGrew	
New Mexico Children Youth	\$700,000
& Family Department	
Professional Services	
Blue Cross Blue Shield of NM	\$219,564
Care NM Services	
Bernalillo County Juvenile Detention Ctr.	\$95,415
Professional Physician Services	
First Choice Community Healthcare	\$85,916
Professional Services Agreement	

First Choice Community Healthcare	
First Choice Community Healthcare	
Central New Mexico Community College	\$37,467
Outpatient Professional Services	
Molina Healthcare of New Mexico	\$25,000
Care Coordination Services	
Molina Healthcare of New Mexico	\$25,000
Care Coordination Services	
Molina Healthcare of New Mexico	\$10,000
Case Management	

# **FY13 Publication List**

#### Armitage, Karen

Sava, Saverio, Armitage, Karen, Kaufman, Arthur. (2013) It's Time to Integrate Public Health Into Medical Education and Clinical Care. J Public Health Management Practice, 2013, 19(3), 197-198 Wolters Kluwer Health – Lippincott Williams & Wilkins, DOI: 10.1097/PHH.0b013e3182847b11

#### Bauman, Kay

**Bauman, Kay** (Contributing Author), The 5-Minute Clinical Consult. Chapters Written: "Varicella" and "Latent TB" ISBN-13: 9781451137354 ISBN: 1451137354

#### Cacari-Stone, Lisa

- **Cacari Stone, L**. & Avila, M. Rethinking research ethics for Latinos: The policy paradox of health reform and the role of social justice. Ethics & Behavior, 2012 22(6):445-460
- **Cacari Stone,** L., Stiemel, L., Vasquez, E. & A. Kaufman. Academic Health Centers and the Care of Undocumented Immigrants: Conflict between Policy and Ethics. Accepted, April 2013; Forthcoming, Spring 2014, Academic Medicine.
- Roybal, D., **Cacari Stone, L**., Guitierrez, M., Roybal, C. et al (2012). Health Equity in New Mexico: A Roadmap for Grant Making and Beyond. Con Alma Health Foundation.
- **Cacari Stone, L**. (PI), Tafoya, N. (coPI) (2013). Evaluation of the New Mexico Health Equity Partnership: Place Matters, Health Coalitions & Health Impact Assessments, WK Kellogg Foundation, Santa Fe Community Foundation (\$50,000).
- **Cacari Stone, L.** (2013). Access to Health Care in the US-Mexico Border Region: National Health Reforms, Issues, Impacts, and Policies. U.S.-Mexico Border Health Commission.

#### Cardinali, Gina

Magrane D, Helitzer D, Morahan P, Chang S, Gleason K, **Cardinali G** & Wu, C. Systems of career influences: A conceptual model for evaluating the professional development of women in academic medicine. J Womens Health 2012;21:

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- Folkema, Arianne M., Holman, Robert C., Dahlgren F. Scott, Cheek, James E., McQuiston, Jennifer H. Epidemiology of Ehrlichiosis and Anaplasmosis among American Indians in the United States, 2000-2007. The American Society of Tropical Medicine and Hygiene, 87(3), 2012, pp. 529-537., DOI:10.4269/ajtmh.2012.12-0060.
- Melius, E.J., Davis, S.I., Redd, J.T., Lewin, M., Herlihy, R., Henderson, A., Sobel, J., Gold, B. and Cheek, J.E. Estimating the prevalence of active *Heliobacter pylori* infection in a rural community with global positioning system technology-assisted sampling, Epidemiol. Infec., Page 1 of 9. Cambridge University Press 2012, DOI:10.1017/S095026881200714.
- Schotthoefer, Anna M., Eisen, Rebecca, J., Kugler, Kiersten J., Ettstad, Paul, Reynolds, Pamela J., Brown, Ted, Enscore, Russell E., Cheek, James, Bueno, Rudy, Targhetta, Joseph, Jr., Montenieri, John A., Gage, Kenneth L. Changing Socioeconomic Indicators of Human Plague, New Mexico, USA. Emerging Infectious Diseases, Vol 18, No. 7, July 2012, DOI:http://dx.doi.org/10.3201/eid1807.120121
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- Gordon, Paul H., Mehal, Jason M., Holman, Robert C., Rowland, Andrew S., and **Cheek**, **James E**. Parkinson's Disease Among American Indians and Alaska Natives: A Nationwide Prevalence Study. Movement Disorders, Published online in Wiley Online Library (Wileyonlinelibrary.com) DOI: 10. 1002/mds.25153.
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- Suryaprasad A, Redd JT, Hancock K, Katz J, Fry AM, **Cheek JE**: Severe Acute Respiratory Infections caused by 2009 Pandemic Influenza A (H1N1) among American Indians southwestern United States, May 1-July 21, 2009. Influenza and Other Respiratory Viruses DOI: 10.1111/irv.12123

## **Clithero**, Amy

- Clithero A., Sapien, R., Kitzes, J., Kalishman, S., Wayne, S., Solan, B., Wagner, L., Romero-Leggott, V. (2013). Unique Premedical Education Experience in Public Health and Equity: Combined BA/MD Summer Practicum. *Creative Education* (pp. 165-170). DOI: 10.4236/ce.2013.47A2021.
- **Clithero, Amy**, Solan, Brian, Grant, Elizabeth, Quintana, Renee, and Kalishman, Summers Because Sometimes a Prescription Isn't Enough Society for Teaching Family Medicine Predoctoral Education *San Antonio, Texas (Award Winner – Scholastics)*
- Grant, Elizabeth, Solan, Brian, **Clithero, Amy**. Public Health, Policy and Advocacy A Role for All Physicians Society for Teaching Family Medicine Predoctoral Education San Antonio, Texas
- **Clithero, Amy**, Wagner, Lana, Solan, Brian. Medicine in New Mexico: A Culminating Experience of the Integrated Public Health and Medicine Curriculum at the University of New Mexico for 4<sup>th</sup> year Medical Students The Network Towards Unity for Health *Thunderbay, Ontario, Canada*

## Getrich, Christina

- **Getrich CM**, Sussman AL, Helitzer DL, Hoffman RM, Warner TD, Sanchez V, Solares A, Rhyne RL. Expressions of *Machismo* in Colorectal Cancer Screening among New Mexico Hispanic Subpopulations. *Qualitative Health Research* 2012; 22(4):546-559.
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- **Getrich CM**, Sussman AL, Campbell-Voytal K, Tsoh JY, Williams RW, Brown AE, Potter M, Spears W, Weller N, Pascoe J, Schwartz K, Neale AV. Cultivating a Cycle of Trust with Diverse Communities in Practice-Based Research: A Report from PRIME Net. In press, *Annals of Family Medicine*.

## Helitzer, Deborah

- Magrane D, **Helitzer D**, Morahan P, Chang S, Gleason K, Cardinali G & Wu, C. Systems of career influences: A conceptual model for evaluating the professional development of women in academic medicine. J Womens Health 2012;21:
- Travis EL, Doty L, **Helitzer DL.** Sponsorship: A Path to the Academic Medicine C-suite for Women Faculty Acad Med. 2013 Aug 21. PMID: 23969365

- 2013 American Academy of Health Behavior Annual Conference "Discussions in Primary Care of Childhood Adversity as a Root Cause of Health Behavior". Marianna LaNoue, David Graeber and **Deborah Helitzer.**
- 2013 OB-GYN Grand Rounds, University of New Mexico. "Community Engaged Research: What it is and Two Case Examples." **Deborah Helitzer**, Brenda Pereda, and Gena Dunivan.
- 2013 Keynote Speaker, Albert Einstein Career Day for Women in Science and Medicine. "Women in Medicine and the Biomedical Sciences: Looking Back and Advancing Forward" April 16, Bronx, NY.

## Iriart, Celia

- **Iriart, C**., Iglesias, Rios L. Biomedicalizacion e infancia: trastorno de deficit de atencion e hiperactividad. Interface Comunic., Saude, Educ., v.16, n. 43, p. 1011-23 out./dez 2012.
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## Jo, Angela

Berman B, Booth H, Debra S. Guthmann, Ed.D., Philip Zazove, M.D., William G. Cumberland, Ph.D., **Angela Jo**, M.D., MSHS, Roshan Bastani, Ph.D. Community-academic partnered cancer prevention and control research among the racially and ethnically diverse Deaf population. Health Disparities Research at the Intersection of Race, Ethnicity, and Disability: A National Conference. Washington, D.C., April 25-26, 2013.

Kate McCalmont, MD, Jeffrey Norris, MD, Sherry Weitzen, MD, Joshua Leiderman, MD,
Angela Jo, MD. Underinsurance among patients at two Family Medicine clinics in
Albuquerque. NM PHA and NM CARES HD Center National Health Disparities 2013
Joint Conference. Albuquerque, NM; April 18-19, 2013.

## Kalishman, Summers

- **Kalishman S**, Stoddard H, O'Sullivan P. Don't manage the conflict: transform it through collaboration. Med Educ 46(10); 930-932, 2012
- Huggett KN, Greenberg RB, Rao D, Richards B, Chauvin SW, Fulton TB, **Kalishman S**, Littlefield J, Perkowski L, Robins L, Simpson D. The design and utility of institutional teaching awards: a literature review. Med Teach 34(11); 907-919, 2012
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- Uijtdehaage S, **Kalishman S**, O'Sullivan P, Robins L. How to Succeed as a Medical Education Scholar: Identifying Your Individual Strategy and Creating a Roadmap For Scholarship. MedEdPORTAL; 2013. Available from: <u>www.mededportal.org/publication/9472</u>
- Clithero, Amy, Solan, Brian, Grant, Elizabeth, Quintana, Renee, and **Kalishman, Summers** Because Sometimes a Prescription Isn't Enough Society for Teaching Family Medicine Predoctoral Education *San Antonio, Texas (Award Winner – Scholastics)*

## Kaufman, Arthur

- Sava, Saverio, Armitage, Karen, and Kaufman, Arthur. It's Time to IntegratePublic Health Into Medical Education and Clinical Care. J. Public Health Management Practice, 2013, 19(3), 197-198. Wolters Kluwer Health – Lippincott Williams & Wilkins, DOI:10.1097/PHH.0b013e3182847b11
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## Leggot, John

Kong AS, Vanderbloemen L, Skipper B, Leggott J, Sebesta E, Glew R, Burge MR. Acanthosis nigricans predicts the clustering of metabolic syndrome components in Hispanic elementary school-aged children. J Pediatr Endocrinol Metab. 2012;25(11-12):1095-102. doi: 10.1515/jpem-2012-0117.

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## **McGrew. Christopher**

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- Cook J, Campbell R, King J, Yeo, R, **McGrew C**, Thoma R. Construct Validity of ImPACT Using Healthy Athletes 2013 New Mexico Shared Knowledge Conference, Albuquerque, New Mexico.
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## Moffett, Mark

- Bali V, Raisch DW, **Moffett ML**, Khan N. Determinants of nonmedical use, abuse or dependence on prescription drugs, and use of substance abuse treatment. Res Social Adm Pharm. 2013 May-Jun;9(3):276-87. doi: 10.1016/j.sapharm.2012.04.008.
- **Moffett M**, Duvall C, De Vore-Bitahey C, Page-Reeves J, Edwards A, Kelley K, Romero J, Brandt R; Dan Young D, Sullivan K. Food Security in New Mexico: Research and Action for a More Equitable Food System. New Mexico Public Health Association Meeting, April 2013.
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## Montoya, Margaret

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**Montoya, Margaret**. Legal Education, Social Justice and the Law School Dean: Latinas at the Center, 48 CALIF. WESTERN L.R. 417 (2012)

## Page-Reeves, Janet

- **Page-Reeves**, **Janet**, Theresa Cruz & Sally Davis, "Another Look: The Healthy Kids Las Cruces Coalition 2011-2012." Report for the Department of Health.
- Page-Reeves, Janet, Theresa Cruz & Sally Davis, "Expanding Community Access to Outdoor Space at Schools: A Case Study of Three Joint-Use Agreement Pilots in New Mexico." Report for the New Mexico Department of Health.
- **Page-Reeves**, **Janet**, Theresa Cruz & Sally Davis, "HKLC Accomplishments Report: 2007-2013." Report for the Department of Health.
- **Page-Reeves, Janet**. Commentary: The Nexus of Poverty, Hunger, and Homelessness in New Mexico. Social Justice, Vol 38, No. 3.
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- **Presenter**: "It is always that sense of wanting...never really being satisfied": How Sharing "Platos", Meal-Stretching, and Women's Social Wealth Re-contour the Experience of Food Insecurity in an Urban Food Desert Community." **Annual Meeting, American Anthropological Association**, San Francisco.
- Presenter: "The Experience of Food Insecurity for Women in Santa Barbara/Martineztown." New Mexico Public Health Association/NM Cares Health Disparities Research Center Joint Annual Conference, Albuquerque.

## **Rohan-Minjares**

Goodkind J, Rohan-Minjares F, and **Romero-Leggott V**. A Multi-Method Approach to Assessing Cultural Competency in Medical Education, Hawai'i Journal of Medicine & Public Health, 2013; 72(8) August 2013, p13.

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Clithero A., Sapien, R., Kitzes, J., Kalishman, S., Wayne, S., Solan, B., Wagner, L., Romero-Leggott, V. (2013). Unique Premedical Education Experience in Public Health and Equity: Combined BA/MD Summer Practicum. *Creative Education* (pp. 165-170). DOI: 10.4236/ce.2013.47A2021.

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## Rhyne, Robert

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## Sanchez, Victoria

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## Sava, Saverio

Sava, Saverio, Armitage, Karen, Kaufman, Arthur. (2013) It's Time to Integrate Public Health Into Medical Education and Clinical Care. J Public Health Management Practice, 2013, 19(3), 197-198 Wolters Kluwer Health – Lippincott Williams & Wilkins, DOI: 10.1097/PHH.0b013e3182847b11

## Skipper, Betty

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- **Soto Mas, Francisco**, Elev8 Nm SBHCs: Reducing Health Disparities among Youth. New Mexico Public Health Association & The University of New Mexico Health Disparities 2013 Joint Conference, April 2013.

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- Sussman, Andrew L., Rivera, Marino. Be Gentle and Be Sincere About It: A Story About Community-Based Primary Care Research. Annals of Family Medicine, Vol. 6, no. 5, September/October 2008
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## Wagner, Lana

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## Wallerstein, Nina

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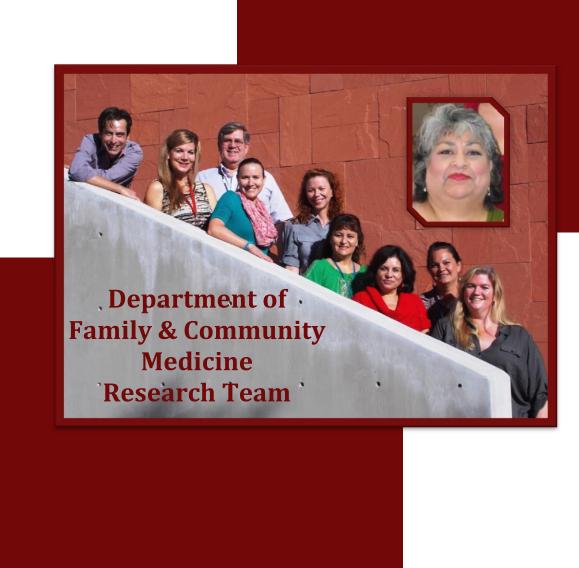
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# New Mexico Center for Advancement of Research Engagement and Science on Health Disparities (NM CARES HD)

Division:	University of New Mexico Department of Family & Community Medicine and HSC Office of Research
Period Covered:	July 1, 2012—June 30, 2013
Submitted by:	Robert Williams, M.D, MPH Director, NM CARES HD
Content:	Significant Developments Significant Plans Outside Sponsored Research

#### **Significant Developments**

The New Mexico Center for Advancement of Research, Engagement, and Science on Health Disparities (NM CARES HD) was established as a Center of Excellence in research on health disparities with the support of the



National Center for Minority Health and Health Disparities of the National Institutes of Health. NM CARES HD is an institution-wide collaborative effort to eliminate disparities in health and health care and to create health equity for all New Mexico's communities. Led by the Department of Family & Community Medicine and housed in the Office of Research of the Health Science Center, the NM CARES HD is a partnership of the Departments of Psychology, Psychiatry, Medicine, the Cancer Research and Treatment Center, the Office of Community Health, and the Colleges of Pharmacy and Nursing.

NM CARES HD provides infrastructure resources to expand research on solutions to health disparities and training for persons to conduct that research, as well as support for engagement with community representatives in planning and conduct of the research. Five projects are now funded through the NM CARES HD: 1) targeting serious behavioral and mental health problems in adolescents in a Native American community, 2) targeting

screening and brief intervention for substance use disorders in primary care practices belonging to RIOS Net, 3) examining causes and solutions to stereotyping in medical student clinical decision-making, 4) examining effects of arsenic and uranium exposure on DNA in environmental health disparate communities, and 5) testing an approach to reducing food insecurity in an urban community.

The overall aims of the Center are to:

- Expand research on health disparities interventions
- Expand the number of researchers in health disparities interventions
- Build partnerships with communities in furtherance of research on health disparities

While the Center's focus is primarily on NM's Hispanic and Native American populations, its resources are available to address disparities in other populations in the state.

#### Funded Health Disparities Related Pilot Projects

During this fiscal year (FY12), pilot research projects were funded through in-kind support from the Clinical and Translational Science Center (CTSC) and the Office of Community Health.

#### <u>The Third Annual University of New Mexico National Health Disparities Conference in</u> <u>Collaboration with the New Mexico Public Health Association</u>

On April 18-19, 2013, NM CARES HD sponsored the 3rd Annual Health Disparities Conference in collaboration with the New Mexico Public Health Association (NMPHA), the Clinical and Translational Science Center, the Robert Wood Johnson Center for Health Policy, and the Office of Community Health at the Hyatt Regency Hotel. The conference entitled "Disparity to Equity: Strategies to Solutions," was a two -day conference that brought together 420 disparities researchers, clinicians, public health practitioners, and community members from around the state to exchange strategies for disparities related research innovations, consider best practices for community engagement, and discuss approaches to converting research into policy. Keynote addresses by Dr. Junius Gonzales, and Dr. Linda Rae Murray were followed by 75 presentations by local researchers and, a TED-style talk session, and poster sessions.

#### NM CARES HD Undergraduate Summer Students

During the 2013 summer semester, NM CARES HD funded ten students and their mentors who participated in the Biomedical Research Education Programs Undergraduate Pipeline Network. The ten students presented their research to the NM CARES HD team, and developed posters that they presented in a Poster Session on August 2, 2012.

#### Co-Sponsored Speaker Engagement

In March, 2013, NM CARES HD collaborated with the Robert Wood Johnson Center for Health Policy to bring in Dr. Hortensia Amaro.

#### Community-Based Dialogues

The Community Engagement Core organized a series of community-based dialogues and co-learning institutes that will be initiated with community-academic partners interested in *or* currently conducting health disparities research in four geographically diverse areas. Three of the institutes, on Historical Trauma, Intercultural Communication and Community-Based Participatory Research were piloted at UNM. The goals of these community engagement activities are to:

- Facilitate cross-cultural dialogue and creative conflict resolution for conducting research with and across diverse communities in New Mexico;
- Understand and employ Community-Based Participatory Research methodologies;
- Build research capacities to bridge cultural and indigenous knowledge and practices with empirically supported theories and interventions; and
- Address research gaps and foster innovation and best practices to address and eliminate health disparities.

#### NM CARES HD Center Fellowship Program

This year, NM CARES HD created a fellowship program consisting of a body of researchers and leaders who have made distinguished contributions in the advancement of research, engagement, and science on health disparities as experienced by ethnic minority, underrepresented, or otherwise vulnerable populations at community, state, and national levels.

NM CARES HD Senior Fellows are encouraged to become active participants in NM CARES HD projects and meetings as well as mentors of Center Fellows, new or minority faculty, and UNM students. NM CARES HD Senior Fellows can propose new research involving the NM CARES HD, apply for funding for consultant visits, and request research and/or technical support. Senior Fellows are invited to participate in the University of New Mexico National Health Disparities Conference.

Similarly, NM CARES Health Disparities Fellows are a body of researchers, graduate and undergraduate university students, and staff interested in learning more about and participating in existing and emerging research to address health disparities at the local and state levels. NM CARES HD Fellows are given support when proposing new research involving the NM CARES HD, applying for funding for consultant visits, and requesting research and/or technical support.

Center fellows will be encouraged to participate in NM CARES HD activities, including community engagement and research trainings, mentorship opportunities and the National Health Disparities Conference. By developing a cadre of new and junior health disparities researchers, we will expand health disparities work across the state and work to promote health equity and eliminate health and social disparities in our New Mexico communities.

To date, we have 47 participating Senior Fellows and Fellows.

#### Significant Plans

In 2013-2014, the fourth full year of operation for NM CARES HD, the Center will continue to offer educational and training opportunities for learners at various levels within and outside UNM, resources to prepare and support the conduct of research on health disparities interventions, "think tanks" to expand concepts about research in this area, work to create partnerships with communities, and sponsor the 4th Annual Health Disparities Conference.

In September, 2013, NM CARES HD will co-sponsor the Congressional TriCaucus Health Disparities meeting in Albuquerque. That same month, NM CARES HD will facilitate a daylong workshop bringing together stakeholders in three key areas of health disparities – diabetes, mental/behavioral health, and environmental health – to strategize specific steps that will be taken over the coming year to advance the effort to eliminate disparities in each of these areas.

On November 22, 2013, NM CARES HD will co-sponsor an event with the Research Involving Outpatient Settings Network (RIOS Net). The day-long event, "Road Map to the Affordable Care Act (ACA): Primary Care and the Underinsured in New Mexico will bring together national-level guest speakers including Congresswoman Michelle Lujan-Grisham, Cathy Schoen of the Commonwealth Fund, Dr. Steffie Woolhandler from CUNY School of Public Health, Dr. Nandini Kuehn, Director of Health Services Consulting, Steve McKernan, CEO of UNM Hospitals, Dr. Dan Derkesen of University of Arizona School of Public Health, and Dr. Kiko Torres of New Mexico Health Connections. The event will bring together primary care clinicians from across the state, health disparities researchers and interested members of the public to discuss the impact of the ACA in New Mexico's underrepresented communities.

#### **Outside Sponsored Research**

"New Mexico Center for Advancement of Research, Engagement, and Science on Health Disparities (NM CARES HD)"; Funder: National Center for Minority Health and Health Disparities; Purpose: Establish a Center of Excellence in research on health disparities Start date; May 1, 2010, End date; January 31, 2015, Total award amount: \$7,656,710.

### **RIOS Net**

Division:	University of New Mexico Department of Family & Community Medicine
Period Covered:	July 1, 2012—June 30, 2013
Submitted by:	Robert Williams, M.D, MPH Director, RIOS Net
Content:	Significant Developments Significant Plans Outside Professional Activities

#### **Significant Developments**

#### PRIME Net:

RIOS Net is the founder and leader of this national consortium of eight primary care, practice-based research networks that have come together to conduct research targeting the health and health care of underserved populations. In this, its seventh year, PRIME Net has been engaged in several studies with RIOS Net:



- "QI in Primary Care Research" Funded by the Agency for Healthcare Research and Quality, this study assists practice-based research networks (PBRNs) to evaluate their current adherence to research best practices specific to the PBRN context, prioritize areas for improvement, build PBRN capacity to develop Standard Operating Procedures (SOPs), and disseminate the first resource designed to improve the quality of primary care research operations. We are currently wrapping up the project, and preparing to publish resulting QI resource.
- PRIME Net continued work under a grant from the Agency for Healthcare Research and Quality to create a Practice Based Research Network Center for Research Excellence. Under this grant, led by our partner MetroNet at Wayne State University, PRIME Net and RIOS Net will expand practice-based research and development of research methods suitable for these networks.

#### **RIOS Net Projects:**

#### Partnerships to Reduce Disparities in Substance Use Screening and Treatment Project:

For this project RIOS Net is working with primary care practices within New Mexican communities to develop ways to improve the delivery of screening and treatment services. The developed approaches will be flexible and take into account different cultural views about appropriate ways to address these problems. The project involves three phases.

- 1. Survey primary care providers that serve Hispanic and American Indian communities throughout New Mexico about their current alcohol and opiate use disorders practices.
- 2. Complete up to 12 case studies in selected primary care practices to explore in detail the current situation for screening and treatment of alcohol and opiate use disorders and identify challenges to improve these services.
- 3. Based on the initial findings, develop and implement two pilot projects in primary care practices aimed at improving screening and treatment for alcohol and opiate use disorders.

The research team, led by Dr. Andrew Sussman (the Principle Investigator), is collecting data for phase 2 of the project. Throughout the project, the goal is to partner with community members and substance use service providers throughout the State to better understand the full range of views about these problems and community-based solutions.

#### Health Extension Rural Office: Translating Research Into Localities (HERO TRaILs):

HERO TRAILs is federally funded through the Agency for Healthcare Research and Quality (AHRQ). The grant totaling \$842,284 was awarded to Dr. Robert Rhyne on April 1, 2013 and is funded through March 31, 2016. The goal of this project is to understand how to best disseminate Evidenced-Based information on Chronic Non-Cancer Pain (CNCP) to providers of vulnerable, underserved, multiethnic populations by using the following techniques:

- Different levels of practice detailing through community health extension agents (HEROS)
- Practice Based Research Networks (PBRN) clinical outreach
- Clinical Translation Science Center (CTSC) participatory evaluation techniques

This project will measure opiate prescribing data among physicians of chronic non-cancer pain at two FQHC clinic systems within RIOS Net Membership using a mixed-method comparative effectiveness trial. It will also evaluate the effectiveness of the dissemination strategies. The outcomes from the research grant will be to produce two dissemination products:

- 1. A health extension agent policies and procedures manual
- 2. An evidenced-based CNCP treatment tool kit

The project will take place in two Southern New Mexico participating clinic systems: Hidalgo Medical Services and Ben Archer Health Centers. Project partners will include: UNM Health Extension Rural Offices (HERO) program through the Office for Community Health, The UNM Clinical Translational Science Center (CTSC), The Research Involving Outpatient Settings Network (RIOS Net), The NM Primary Care Association, The Wellness Coalition, The New Mexico Department of Health, The NM Board of Pharmacy, *HealthInsight* NM, and Molina Health Care.

#### Improving Colorectal Cancer Screening for Diverse Populations

The goal of this RIOS Net project, led by Dr. Robert Rhyne and Dr. Chrissy Getrich, coinvestigators, is to determine, in a randomized controlled trial, the effect of a practicebased intervention that includes a colorectal cancer screening decision aid (a 13minute video in English or Spanish) plus patient navigation on colorectal cancer screening rates in diverse, vulnerable primary care patient populations. This five-year study funded by the American Cancer Society is a collaboration between researchers at the University of North Carolina-Chapel Hill and the University of New Mexico that started on July 1, 2013.

#### Scientific Publications:

Getrich CM, Broidy LM, Kleymann E, Helitzer DL, Kong AS, Sussman AL, On behalf of RIOS Net Clinicians. Different models of HPV vaccine decision making among adolescent girls, parents, and health care clinicians. *Ethnicity and Health*, in press.



Getrich CM, Sussman AL, Campbell-Voytal K, Tsoh

JY, Williams RL, Brown AE, Potter MB, Spears W, Weller N, Pascoe J, Schwartz K, Neale AV. Cultivating a cycle of trust with diverse communities in practice-based research: A report from the PRImary Care MultiEthnic Network (PRIME Net), *Annals of Family Medicine*, in press.

Getrich C, Sussman AL, Helitzer DL, Hoffman RM, Warner TD, Solares A, Sanchez V. Rhyne R. Expressions of Machismo in Colorectal Cancer Screening Among New Mexico Hispanic Sub-populations. *Qualitative Health Research.* 2012;22(4):546-59.

Gonzales M, Nelson H, Rhyne RL, Stone SN, Hoffman RM. Surveillance of Colorectal Cancer Screening in New Mexico Hispanics and Non-Hispanic Whites. *Journal of Community Health* 2012; 36(6):1279-1288.

Salz T, Oeffinger KC, Lewis PR, Williams RL, Rhyne RL, Yeazel MW. Primary Care Providers' Needs and Preferences for Information about Colorectal Cancer Survivorship Care. *J Am Board Fam Med* 2012 25:635-651

#### Scientific Presentations:

Tsoh J, Spears W, Campbell-Voytal K, Sussman A, Getrich C, Brown A, Potter M, Weller N, Pascoe J, Williams RL, Neale AV. Implementing Engagement Strategies to Recruit and Retain Underrepresented Patient Populations in Practice-Based Research: Report from a PRIME Net National PBRN Survey. Poster Presentation at the Science of Eliminating Health Disparities Summit. National Harbor, MD, December, 2012.

Spears W, Tsoh JY, Campbell-Voytal K, Sussman AL, Getrich CM, Brown AE, Potter MB, Weller NA, Pascoe J, Williams RL, Neale AV. "Implementing Engagement Strategies to Recruit and Retain Underrepresented Patient Populations in Practice-Based Research: Report from a PRIME Net National PBRN Survey." Poster presented at the 2013 Pediatric Academic Societies Annual Meeting, May 7, 2013, Washington DC.

Levy BT, Daly JM, Campbell-Voytal K, Aspy C, Nagykaldi Z, Mold J, Louks H, Smith P, Michaels L, Fagnan LJ, Patterson B, Dolor R, Kano M, Sussman AL, Williams RL, Sterling P, O'Beirne M, Rheaume C, Neale AV. "Developing Standard Operating Procedures for Practice Based Research Networks." Poster presented at the "Science of Community Engaged Research: Future Directions Meeting;" Bethesda MD, August 22-23, 2013.

#### Significant Plans

#### PRIME Net:

We will continue to build the research portfolio of the consortium and disseminate results of previous collaborative research. During the coming year, RIOS Net faculty and staff will continue to support the above consortium research project focused on PBRN best practices.



#### Postpartum Depression Survey:

RIOS Net, in collaboration with partners from the New Mexico Department of Health, will conduct a survey to examine the degree to which primary care practitioners treat women with Maternal Anxiety and/or Depression. The survey is designed to identify provider needs for additional information, and will provide a list of available resources upon completion of the survey.

#### <u>Underinsured:</u>

RIOS Net will conduct a study to examine the prevalence of <u>under</u>insurance among patients seen in network practices. The under-recognized phenomenon leads many persons to not seek care or to not follow through with recommended therapy. Our study will build on earlier work conducted by PRIME Net partner networks.

#### <u>NM CARES HD:</u>

RIOS Net is a close partner in the work of the NM CARES HD (see below), with staff supporting both RIOS Net and NM CARES HD. In addition, one of the initial research projects in NM CARES HD will be carried out entirely in partnership with and within RIOS Net.

In November, 2013, RIOS Net will collaborate with NM CARES HD to host a day-long



conference, "Road Map to the Affordable Care Act (ACA)." This conference will bring together RIOS Net clinician members, health disparities researchers, and interested parties from the community to listen to presentations by: Congresswoman Michelle Lujan-Grisham, Cathy Schoen of the Commonwealth Fund, Dr. Steffie Woolhandler from CUNY School of Public Health at Hunter College, Dr. Nandini Kuehn of New Mexico Health Connections, Steve McKernan, CEO of University of New Mexico Hospitals, Dr. Dan Derksen from the University of Arizona School of Public Health and Dr. F. Kiko Torres from New Mexico Health Connections.

#### **Collaborations with Institutional Partners**

We will continue to expand our collaborations with institutional partners, particularly including the Office of Community Health and the Clinical and Translational Science Center (CTSC). Through these collaborations, we anticipate better integration of community and clinical outreach activities. We hope to increase the potential for integration of HSC researchers with RIOS Net clinicians and communities.

#### **Outside Professional Activities**

Dr. Robert Williams's was involved in the following outside professional activities during the year:

- Associate Editor, <u>Annals of Family Medicine</u>; Manuscript reviewers for <u>Annals of Family Medicine</u>; <u>Journal of the American Board of Family Medicine</u>; <u>Family Practice</u>; <u>American Journal of Public Health</u>; <u>Health Promotion Practice</u>; <u>Preventing Chronic Disease</u>; <u>Ethnicity and Disease</u>; <u>Journal of General Internal Medicine</u>; <u>Education for Health</u>; <u>Field Methods</u>
- Presentations of RIOS Net and PRIME Net research results at national research conferences: North American Primary Care Research Group meeting; Agency for Healthcare Research and Quality Practice-Based Research Network meeting
- Grant reviewer, Patient Centered Outcomes Research Institute

# **Individual Programs**



- Biostatistics
- Community Access to Resources & Education in New Mexico (Care NM)
- Transdisciplinary Evaluation and Support to Clinic (TEASC)
- Family & Community Medicine Diversity
- Warren & Rosalee Heffron International Fellowship



## **Biostatistics**

Division:	University of New Mexico Department of Family & Community Medicine
Period Covered:	July 1, 2012 – June 30, 2013
Submitted by:	Betty Skipper, Ph.D. Director, Biostatistics
Content:	Mission Significant Developments Significant Plans

#### Mission

The mission of the Biostatistics team is to provide expertise in education, research, and service in the areas of biostatistics and data management for the Department of Family and Community Medicine and other programs within the Health Sciences Center.



#### **Significant Developments**

Dr. Lauren Hund, assistant professor, joined the department on January 1 after completing a Ph. D. degree and post-doctoral fellowship at Harvard University. Courses in biostatistics included Biostatistical Methods I for Public Health and Medical Sciences (Stat 538) taught by Dr. James Cheek; Biostatistical Methods II for Public Health and Medical Sciences (Stat 539) taught by Dr. Lauren Hund and Dr. Betty Skipper; Epidemiology Data Analysis (PH534) taught by Dr. Andrew Rowland and Dr. Betty Skipper. Additional teaching was done on a one-on-one basis individual medical students, public health students, residents, and occupational therapy students working on their required research projects. Research collaborations included investigators from the Departments of Family & Community Medicine; Internal Medicine; Obstetrics and Gynecology; Pediatrics; and Surgery. Additional research activities included participation in the following research centers: NM CARES HD, a center for health disparities research; and the Clinical and Translational Science Center (CTSC).

#### **Significant Plans**

As part of our educational mission we are continuing to work on developing techniques for teaching statistical concepts to public health students and medical students including a combination of in-class and on-line methodology. We will continue in our mission of research collaborations with investigators from the Department of Family and Community Medicine and other departments and programs within the Health Sciences Center.



# Community Access to Resources & Education in New Mexico (CARE NM)

Division:	University of New Mexico Department of Family & Community Medicine
Period Covered:	July 1, 2012—June 30, 2013
Submitted by:	Diane Johnson, Program Manager, CARE NM
Content:	Overview Significant Developments Significant Plans Other Relevant Information

#### Overview

CARE NM is contracted with Molina Healthcare, BCBS of NM, and UNMH SCI to provide coordination of care and services to their Medicaid/Medicare population. The Managed Care Organizations provide referrals for ED overutilizers, members with chronic diseases, high risk pregnancies, and Traumatic Brain Injuries. CARE NM has one Field Case Support Coordinator in Lovington who covers the south east portion of the state, three Field Case Support Coordinators in Las Cruces covering the areas from Alamogordo to the Texas border and north to T or C. There are also four Field Case Support Coordinators in the Albuquerque office covering the areas of Santa Fe south to Socorro, and the Albuquerque Metropolitan east to Moriarity. During FY 13, CARE NM received 2,485 referrals with only 299 unable to contact or refusing service. There were 2,186 encounters with 2,838 face to face and 11,125 phone calls with the member or on behalf of the member. All members were educated on alternatives to using the Emergency Room and were established with a Primary Care physician or nurse practitioner. Members were provided with resources and education to navigate the health care system more effectively.

#### Significant Developments

During FY 13, CARE NM and the Office of Community Health contracted with Molina Health Care to write and publish training curriculum based on the successful CARE NM model. In January 2013, CARE NM and the Office of Community Health began Train the Trainer workshops to provide the curriculum and necessary tools to ten states Molina has a presence in.

CARE NM expanded and moved into a larger office bringing the space for staff from four to seven.

#### **Significant Plans**

CARE NM will be providing ongoing support for the Molina expansion in their ten states.

CARE New Mexico is once again expanding and looking for a larger office area to accommodate new hires.

Negotiations are in the works to place Field Case Support Coordinators in various health care clinics and emergency departments. With the roll out of New Mexico's Centennial Care, CARE NM will expand our area in the state and the number of local staff to provide coverage for our Managed Care contracts.

#### **Other Relevant Information**



Kim Larrichio was hired in Albuquerque with CARE NM last September. Kim holds a Bachelor's Degree in Spanish and a Master's Degree in Latin American Studies. She is quite active volunteering as a client advocate with the Endorphin Power Company and has worked as a bilingual interpreter.



Yvette Gomez was hired in Las Cruces in June 2013. She has lived in Las Cruces all her life, is married and has three daughters. Yvette previously was a Community Living Supervisor at Tresco House in Las Cruces. She also worked at Alliance Behavioral Health and as a Special Education aide. Yvette is an expert the D.D. Waiver paperwork and requirements. She is currently working towards a degree in Special Education.

Patricia Saavedra retired after seven years on staff with CARE NM.



# **Transdisciplinary Evaluation & Support Clinic (TEASC)**

Division:	University of New Mexico Department of Family & Community Medicine
Period Covered:	July 1, 2012 – June 30, 2013
Submitted by:	Patricia Beery, MA Senior Program Manager, TEASC
Content:	Overview Significant Developments Significant Plans Professional Activities

#### Overview

What is TEASC?

The Transdisciplinary Evaluation and Support Clinic (TEASC), funded by the New Mexico Department of Health/Developmental Disabilities Supports Division, is a consultation team that includes family practice providers, psychiatrists, experts in social services and health care systems, and a clinical social worker. The team may include other specialists such as a neurologist, clinical pharmacologist, or sign language interpreter.



The TEASC Team members consist of: Antoinette ("Toni") Benton, MD, Family Practitioner, TEASC Principle Investigator (PI) and Medical Director; Helene Silverblatt, MD, Psychiatrist and TEASC C0-PI; Gail Thaler, MD, Psychiatrist; May Goldenberg, PA-C, Physician Assistant; Sara McGee, LISW, LPAT, Sr. Program Therapist; Elizabeth Donsbach, BA, Program Coordinator; and Carol Montoya, Admin Assistant 2.

Adjunct team members include Rick Campbell, Ph.D., Clinical Neuropsychologist; and Stephanie Baca, RDH, BS, MS, Clinical Dental Hygienist.

#### Who Does TEASC Serve?

TEASC offers in-home and clinic-based consultation to adults who have intellectual/developmental disabilities and complex medical, mental health, and support system needs. TEASC assistance does not replace the direct care provided by the client's primary care doctor, psychiatrist, therapist, interdisciplinary team, or other care givers.

#### Who Is Eligible for a TEASC Evaluation?

Any person with a developmental disability, age 18 or older, living in New Mexico, or their family, provider, or advocate may request a TEASC evaluation or consultation. TEASC services are provided at no cost to the individual. TEASC can be contacted for an evaluation by telephone or written request.



#### What Does TEASC Do?

- Evaluations by the team at the University of New Mexico Family Medicine Clinic (Adult Special Needs Clinic)
- Evaluations by the team in the community where the person lives, e.g. in their home, workplace or other location determined by the person's needs and wishes (TEASC Evaluation)
- Evaluations by the team at local community clinics (Outreach Clinic)
- $\circ$  Comprehensive written reporting of evaluation findings and recommendations
- $\circ~$  Participation in collaborative community clinics with local providers throughout the state
- Teaching and training for medical students and residents, as well as trainees in other disciplines such as nursing, OT, pharmacy, psychology, speech/language pathology, and PT
- Training for community providers
- Research and program assessment
- Collaboration and consultation with the state in system design and review

#### **Significant Developments**

TEASC completed its 21st year as a providing program statewide consultative services to individuals with intellectual disabilities. their families and their support teams. During this fiscal year, we have continued our interdisciplinary and interprofessional training in behavioral health model in our Adult Special Needs Clinic (SNC). This clinic is held bi-weekly in the Family Medicine Clinic. Partners in establishing and delivering this training model include TEASC, the

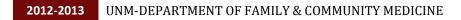


Continuum of Care (in the Pediatrics Department), the College of Nursing, the College of Pharmacy, the Department of Psychiatry, and the Department of Dental Hygiene. Learners have included medical students and residents, psychiatry residents and interns, nursing students, dental hygiene students, pharmacy students, occupational therapy students and high school students. Outreach collaborative clinics following the model of SNC have been provided to practitioners in Los Lunas, Belen, Roswell, Albuquerque, and Las Cruces.

TEASC continues to partner, through the Adult Intellectual and Developmental Disabilities/Mental Illness (IDD/MI) Project, in establishing guidelines and services for providing care and resources to individuals with the co-occurring conditions of intellectual/developmental disability and mental illness. Agencies participating in this project include TEASC, the Continuum of Care, OptumHealth, the NM Developmental Disabilities Planning Council, the Developmental Disabilities Supports Division (DDSD) of the NM Department of Health (DOH), and the Behavioral Health Services Division and Medical Assistance Division of the NM Human Services Department.

We have continued to provide collaborative DDMI outreach clinics throughout the state of NM. Currently there are seven outreach clinic sites that participate in this project: the La Familia Counseling Services in Roswell; the San Juan Regional Behavioral Health Services in Farmington; the Shiprock Indian Health Services Mental Health Clinic; the Taos Mental Health Center; Eastern New Mexico University in Roswell—Special Services Clinic; the private practice of Dr. Robert Mayfield, Ph.D. in Las Cruces; and Lifequest Developmental Disabilities Services in Silver City. These clinics focus on the needs of individuals with the co-occurring conditions of intellectual/developmental disability and mental illness, and giving guidance/mentoring to providers in the areas of diagnoses, medication management, counseling and therapeutic techniques, specialized training, and services and resources for individuals, their families and their support teams.

Last fiscal year TEASC provided training to the state of Mississippi regarding the provision of services to individuals with intellectual and developmental disabilities. This year we hosted officials from the State of Mississippi, and provided them with consultation



regarding current institutional and community models of services, and planning ideas around how their state can transition to more person-centered, collaborative, community-based medical and residential services.

In September 2013, we passed our 10-year anniversary for our secondary contract, the Pre-Admissions Screening and Resident Review (PASRR). This contract provides medical and psychiatric evaluation of individuals with mental illness for whom a request has been made for placement in a nursing home. This contract is administered by the NM Behavioral Health Services Division, and is intended to prevent the unwarranted placement of these individuals into nursing homes.

#### **Significant Plans**

We continue the collection and analysis of information obtained during our individual evaluations through TEASC and the Adult Special Needs Clinic. The database covers presenting problems, intake information, and assessment recommendations regarding individuals seen by our project from 1992 through the present.

Staffing levels and funding have remained stable for the program over this past year. Our primary funders continue to be the NM Department of Health, Developmental Disabilities Supports Division for our primary TEASC contract; and the NM Behavioral Health Services for our secondary PASRR contract.

#### **Professional Activities of Faculty and Staff**



Team members continue to serve on the following Developmental statewide task forces: the Adult Disability/Mental Illness (DD/MI) Project which addresses increased access and quality of behavioral health services for individuals with intellectual or developmental disabilities and mental illness; the Autism Task Force which addresses increased services and resources for individuals with autism spectrum disorders; and the DDSD Clinical Consultation Team which collaborates regarding improvements to individual health and systems needs in behavioral and physical health care.

TEASC provided consultation this year to various committees and subcommittees established by the Jackson Compliance Administrator (JCA). The JCA was appointed by the US District Court in NM to oversee the final resolution of the Jackson vs. the State of NM Lawsuit which resulted in the closure of the two NM institutions for individuals with intellectual/ developmental disabilities, and the expansion and improvement of community models of care and support to these individuals. TEASC participated on committees that focused on health and the measurement of health outcomes; management; individual service planning and case outcomes; and assistive technology.



Dr. Benton has participated in collaborative meetings with the UNM Departments of Pediatrics and Internal Medicine regarding the transition of children with disabilities to adult providers; she is the point person for children with developmental disabilities. Ms. Donsbach has served internally on the department's Events Committee, and participated in Diversity Activities.

(The above floral painting, "Untitled Acrylic on Paper", 29.5 " x 23", was done by Apprentice Artist, Angela Harrison, of the VSA North Fourth Street Art Center in Albuquerque, New Mexico).

# Family & Community Medicine Diversity

Division:	University of New Mexico Department of Family & Community Medicine
Period Covered:	July 1, 2012—June 30, 2013
Submitted by:	Melvina McCabe, M.D., Vice Chair of Diversity Christina Hoff, Ph.D., Staff Diversity Officer
Content:	Background Significant Developments

#### Background

The Department of Family & Community Medicine chairperson, Martha McGrew, MD, in November 2011 developed the new position of Vice Chair for Diversity and appointed Melvina McCabe, MD to this position. Dr McGrew assigned Christina Hoff, PhD and Pamela Sedillo as assistants to Dr. McCabe.

#### **Significant Developments**

#### **Staff Diversity Activities:**

Dr. McCabe and Philip Ortiz have continued direction and

activities for the staff diversity activities. Tina Hoff was reassigned to the PA program. The staff diversity topics and presentations were identified for the coming year by the staff in December, 2012. The staff requested that monthly presentations be held instead of the previous year's quarterly presentations. Katharine Rebolledo, Department Administrator and Philip Ortiz recommended that the diversity presentations be incorporated into the quarterly staff meetings so that all staff could benefit from these. This incorporation started in August, 2013. A staff diversity activity was held on February 27, 2013 on Tolerance and Understanding presented by Dr. Brad Samuel.

#### Faculty Diversity Activities:

Dr. McCabe presented to the faculty on diversity in December, 2012. The purpose was to determine from the faculty the diversity activities they would find most helpful. A subcommitee was formed composed of Pamela Sedillo, Francisco Soto Mas, Bradley Samuels, Felisha Rohan-Minjeras, Valerie Romero-Leggot, and Melvina McCabe to address the faculty recommendations for diversity education. The faculty suggested a full faculty



diversity retreat (including faculty from the PA, PHP, and Family Medicine programs), miniretreats for clinics requesting additional education, and diversity topics. The subcommittee is working on a plan incorporating the faculty requests.

Christina Hoff does continue to update and maintain the FCM Diversity Website and to identify diversity educational materials for both staff and faculty. These are posted on the website for faculty and staff who might be interested in expanding their diversity knowledge.

## Warren & Rosalee Heffron International Fellowship

Division:	University of New Mexico Department of Family & Community Medicine
Period Covered:	July 1, 2012—June 30, 2013
Submitted by:	Warren Heffron, M.D. Director, FCM Development Activities
Content:	Overview Significant Developments Significant Plans

#### Background

Teaching physicians to teach is an important way to impact world health. This does not seek to impose the American medical education system on others. Rather, it exposes faculty from other countries to new educational methods, allowing them to decide what is appropriate to incorporate into their own teaching. Every other year we plan to offer a fellowship to an international faculty member to come to UNM and, or another family medicine program to enhance their faculty skills. On alternate years we plan to offer the fellowship to a New Mexico resident in family medicine to fund an international rotation / study period in another country.

#### **Significant Developments**

The Department of Family and Community Medicine is pleased to announce that Dr. Jenifer Lasman and Dr. Brian Smith are the first two recipients of the Warren and Rosalee Heffron international fellowships. This award of \$3.000 each will be used for international study and work in family medicine during the next year of their residencies. This award is from an endowment dedicated partly to foster family medicine education among residents from family medicine residencies in New Mexico. Dr. Lasman is from the Albuquerque program and Dr. Smith is in the Santa Fe residency.

During her fourth year in medical school Dr. Lasman did a month rotation at Mulago Hospital in Kampala, Uganda, the largest hospital in the country. This experience was life changing for her and she plans to return this year to further deepen her understanding of delivering medical care in this challenging environment. She describes three foci of emphasis during this residency global health rotation. First, she wants to expand her knowledge of treating infectious diseases including tuberculosis, HIV, typhoid, malaria and other less common infectious ailments. Her second goal is to gain more experience in obstetrics with emphases on vaginal deliveries, obstetrical emergencies and some surgical obstetrical skills. Thirdly she hopes to explore some opportunities to return to Africa after completion of her residency working with the new Medical Peace Corps. She has an eventual interest in academic family medicine and the Peace Corps might give her an opportunity to work in some medical education programs, such as working with others to start a new family medicine residency. This work would most likely be in Uganda, Tanzania or Malawi.

Dr Smith worked in Guatemala in the Peace Corps for two terms before entering medicine. While there he was impressed with the health needs of Mayan women who lived in rural, poor, and isolated areas where access to health care was very difficult. While there he started a Non Governmental Organization (NGO) called CHILA Inc. The area is in Chisec, Alta Verapaz. This group has built and started a clinic and multiple community health education programs and incorporates traditional healers and beliefs and is introducing western medicine. It is managed by a local board and extensive involvement of local people and he has maintained active leadership roles during his time in medical school and residency. He plans to use his fellowship to visit some similar programs in Central and South America to learn how to make his organization self sufficient and to serve their communities on an ongoing long term basis.

Our department is excited to be able to share this award with two residents who have dreams of contributing to the health of other countries in manners that will be life changing for them and the people they will serve in the future.

#### Significant Plans

This Fellowship will continue to support and offer experiences in international health on two levels: 1. Fund faculty physicians from foreign countries for one to two-month study and faculty development in family medicine at UNM, and 2. Fund NM Family Medicine residents for one-month study in an international rotation.

# Conclusion

The year ahead is exciting and I am looking forward to continuing my work with our exceptional programs, faculty, staff, and learners to positively and dramatically impact the education, research, and health of New Mexicans.

Respectfully submitted,

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Martha Cole McGrew, M.D. Professor & Chair Department of Family & Community Medicine University of New Mexico School of Medicine October 21, 2013

