

27th Annual STFM

Conference on Families and Health

February 28-March 4, 2007

Hyatt Regency Austin on Town Lake
Austin, Texas



“The Art and Science of Relationship-centered Practice”

“This was the best STFM conference I have ever attended. I was most pleased with the location, topics, presenters, plenary sessions, and group discussions. Keep having conferences like this one and I will do whatever I can to try to attend”

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Conference on Families and Health

“The Art and Science of Relationship-centered Practice”

Dear Family Medicine Colleagues:

The 2006 STFM Conference on Families and Health marked a new era for a strong tradition when our host city changed to Austin, Tex. Early spring weather lured our discussion groups onto the hotel’s outdoor patio to mix rich conversation with a view of the water and Austin’s skyline. Our days were inspired by the “Call for Leadership” from dynamic plenary speakers and innovative workshops. Our evenings were host to gourmet restaurants, live music, and, for those who dared, line dancing. On the whole, the experience gave participants new ideas, networking opportunities, and a chance for play and renewal—Austin style.

In the spirit of 2006, the 2007 Conference on Families and Health promises to be another success. This year’s theme, “The Art and Science of Relationship-centered Practice,” plans to build on the conference’s rich tradition while ushering in a new era for family medicine. At the heart of the conference is our mission to provide primary health care in the context of patients’ lives—incorporating their family, their culture, and their economic systems into a collaborative plan of care. The Conference on Families and Health also serves as a forum to discuss larger health care systems and their impact on the families we work with. Nurturing relationships—learner-teacher, patient-doctor, families-health care team, and policy makers-citizens—is the “Art of Relationship-centered Practice.” The call for evidence-based practice is also a driving force in our work and at the core of the future of family medicine. Fortunately, emerging research provides evidence that relationships impact health. Therefore, the 2007 theme highlights the “Science of Relationships” as the other side of our healing practice.

I look forward to spending time with you in Austin—and to join you and your colleagues in shaping the future of family medicine—one relationship at a time!

—*Catherine D. Serio, PhD*
2007 Conference Chair

Conference Goals:

1. Learn how families affect physical and emotional health;
2. Understand the principles of integrated (physical and emotional health) care in a family medicine residency setting or family medicine office;
3. Appreciate the impact of collaboration with communities and other larger systems on the health of patients and families.

STFM Group on the Family in Family Medicine: Mission Statement

The mission of the STFM Group on the Family (GOF) is to promote the application of family systems principles to health care training, practice, and research. Emphasis will include the following topics: family health care; collaboration with all other health care professionals, including complementary and alternative health practitioners; community- and population-focused health initiatives; sociocultural aspects of health care; legislative and health care policy; and self-reflection in providing care. To accomplish this mission, the GOF will:

1. Organize an annual STFM conference
2. Promote the application of family systems principles in family medicine to students, residents, faculty, and practicing physicians
3. Stimulate research on topics mentioned above: family, community, cultural, ecological, collaborative, and health policy aspects of health care
4. Network with other organizations
5. Influence larger social systems such as government and health care policy

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Conference Highlights:
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- Outstanding plenary sessions addressing implications of and opportunities for family systems thinking and relationships from the individual, collaborative, and national practice levels
- Experiential workshops for acquisition of new skills
- Interactive seminars presented by family systems experts
- Innovative lecture-discussions presenting original work in systems thinking in primary care
- Engaging PEER papers addressing colleagues' family systems research, education, and clinical practice
- Special topic breakfasts and networking lunch opportunities for shared interests
- Unlimited networking opportunities for exchanging innovative ideas on family systems health care

Special Networking Opportunities for Learning, Sharing and Building Camaraderie!
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- Wednesday Evening Orientation Workshop
- Thursday Networking Luncheon
- Thursday and Friday Dine-out Groups
(*Second dine-out night added this year*)
- Discussion Groups Following Each Day's Plenary Session
- Friday Afternoon Optional Group Activities
- Saturday Morning Common Interest Breakfasts – Create Your Own Table Topic!
- Saturday Night Dinner and Dance

STFM extends a heartfelt thank you to the Conference Program Committee and STFM Group on the Family in Family Medicine Steering Committee for their continuing support and hard work in planning this year's meeting.

Conference Program Committee:
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2007 Conference Chair:

Catherine Serio, PhD
Healthwise, Boise, ID

2006 Conference Chair:

William Gunn, Jr, PhD
New Hampshire-Dartmouth FPRP
Concord, NH

2008 Conference Chair:

Robert Cushman, MD
University of Connecticut

Chair, STFM Group on the Family:

John Cavacece, DO
Grand Rapids Family Practice
Grand Rapids, Mich

STFM Group on the Family

Steering Committee:

Laurence Bauer, MSW, MEd
Family Medicine Education Consortium
Centerville, Ohio

John Cavacece, DO, Group Chair
Grand Rapids Family Practice
Grand Rapids, Mich

Colleen Fogarty, MD
University of Rochester

Arnold Goldberg, MD
Brown Medical School Family Practice
Pawtucket, RI

ThelmaJean Goodrich, PhD
University of Texas, Houston

Victoria Gorski, MD
Albert Einstein College of Medicine

Claudia Grauf-Grounds, PhD
Seattle Pacific University

Nancy Newman, MD
Hennepin County Family Practice
Minneapolis, Minn

Alex Reed, PsyD
Wesley Family Medicine Residency
Wichita, Kan

Deborah Seymour, PsyD
University of Colorado

Penny Thron-Weber, MD
St. Anthony Family Practice Residency
Denver, Colo

David Waters, PhD
University of Virginia

CONFERENCE SCHEDULE

Wednesday, February 28

- 7:30 am Preconference Workshop Registration
- 8 am–5 pm **Preconference Workshop:** “Getting Near the End: How Family Physicians Provide Palliative and End-of-life Care” (*Additional fee \$175; see page 7 for more information*)
- 8 am–5 pm **Preconference Workshop:** “Improving Health Outcomes Through Co-production of Health Services” (*Additional fee \$175; see page 7 for more information*)
- 4–6 pm Conference Registration
- 5–6 pm Welcoming Reception
- 6–7:30 pm **Special Orientation Session:**
Welcome and Conference “Kick-off”—*Catherine Serio, PhD, 2007 Conference Chair and John Cavacece, DO, Chair, STFM Group on the Family in Family Medicine*
- “Basic Family Systems Tools for Biopsychosocial Collaboration in Health Care: Creating a Map for Those New to the Territory”**
Susan Thrower, MSW, Mountain Area Health Education Center, Asheville, NC;
Michael Crouch, MD, MSPH, Baylor College of Medicine
- This preconference workshop focuses on the use of family systems clinical tools that assist collaborative biopsychosocial health care in today’s health care environment. Participants will work with the family genogram and family circle and learn how to use them in teaching and clinical care in their health care setting.
(*This session is included with the conference; no additional fee to attend.*)

Thursday, March 1

- 7–8 am Continental Breakfast
- 8:15–9:30 am **Greetings, Announcements**—*Catherine Serio, PhD, 2007 Conference Chair*
Opening Plenary Session: “Changing Organizational Culture to Support Relationship-centered Practice”—*Anthony Suchman, MD, MA, FACP, Relationship Centered Health Care, Rochester, NY*
Moderator: William Gunn Jr, PhD
- 9:30–9:45 am Refreshment Break
- 9:45–10:45 am Discussion Groups
- 11 am–12:30 pm Concurrent Educational Sessions
- 12:45–2 pm **Networking Lunch With Special Presentation:**
“The Family Portrait: Levels Beneath the Canvas”—*Lynne Feldman, Rochester, NY*
- 2:15–5:30 pm Concurrent Educational Sessions
- 3:45–4 pm Refreshment Break
- 7 pm Dine-out Groups

Friday, March 2

- 7–8 am Special Topic and Networking Breakfasts
- 8:15–9:30 am **Plenary Session: “Narrative Medicine from the Margins: Witness, Voice, and Vulnerability”**—*Sayantani DasGupta, MD, MPH, Columbia University*
Introduction: Eliana Korin, DiplPsic
Moderator: John Cavacece, DO
- 9:30–9:45 am Transition Break
- 9:45–10:45 am Discussion Groups
- 10:45–11 am Refreshment Break

11 am–12:30 pm	Concurrent Educational Sessions
12:45–1:45 pm	Special Session: “Narrative Medicine at Work: Reading and Writing for Better Medical Practice” — <i>Sayantani DasGupta, MD, MPH, Columbia University</i> What is narrative medicine and how does it work? This interactive session will address the role of narrative medicine in clinical work and medical teaching, introducing some of the theoretical underpinnings of the interdisciplinary field, and allowing participants to share their own experiences with the use of narrative texts in teaching and patient care. Participants will engage in a brief reading and writing exercise to help demonstrate narrative medicine “in motion.”
1:45 pm	Open Afternoon
7 pm	Dine-out Groups

Saturday, March 3

6:30–7 am	Conference Fun Run/Walk —family and friends are welcome to participate!
7–7:45 am	Common Interest and Networking Breakfast
8–9:15 am	Plenary Session: “Primary Medical Care for Families Revisited: An Unorthodox Rearrangement of Old Ideas” — <i>John Saultz, MD, Oregon Health and Science University</i> <i>Moderator: Catherine Serio, PhD</i>
9:15–9:30 am	Refreshment Break
9:30–10:15 am	Discussion Groups
10:15–10:30 am	Transition Break
10:30 am–Noon	Concurrent Educational Sessions
Noon–1:45 pm	Lunch (on own)
1:45–5 pm	Concurrent Educational Sessions
3:15–3:30 pm	Refreshment Break
5:15–5:45 pm	Closing Session
6:45–7:30 pm	Networking Reception With Cash Bar
7:30–11:30 pm	Dinner and Dance Party <i>(included in registration fee; additional fee for guests/children; see pg. 15)</i>

Sunday, March 4

8:30–9:30 am	Conference Steering Committee Meeting
8:30–10:30 am	Special Workshop “Whose Life Is This Anyway? Examining the Balance in One’s Personal and Professional Life” <i>Patricia Day Williams, MD, Nemours Center for Medical Leadership, Alexandria, Va; Robert Doughty, MD, PhD, Nemours Center for Medical Leadership, Jacksonville, Fla</i> Physicians are often so busy engaged with their work and personal lives that years pass without having an opportunity to reflect on whether they are meeting their own goals for long-term success and what changes might produce greater satisfaction. Faculty stress and burnout often result in negative behaviors toward patients, medical students, and residents. This workshop teaches skills to maximize personal and professional effectiveness and satisfaction. Individuals will participate in a number of challenging, thought-provoking, illuminating, and fun activities. Practical tools for changing one’s experience of work and personal life will be taught and reinforced through personal reflection and discussion with other participants. These tools apply equally well to students, residents, and patients who seek balance in their lives.

CONFERENCE INFORMATION

Conference Location and Accommodations:

Hyatt Regency Austin on Town Lake
208 Barton Springs Road
Austin, Texas 78704

Online Reservations:

https://resweb.passkey.com/Resweb.do?mode=welcom_ei_new&eventID=30443

Hotel Phone & Guest Reservations: 512-477-1234

Guest Fax: 512-480-2061

Conference Rate: \$149 single/double

To receive the special conference rate listed above, call Hyatt's reservations department at 512-477-1234 and tell them that you are with the STFM Annual Conference on Families and Health. **Reservations must be made by February 7, 2007; after that date, rooms will be assigned on a space-available basis.** Rates do not include state and local sales tax. Reservations must be guaranteed for late arrival with a credit card. Cancellations must be made at least 24-hours prior to arrival date. Check-in time is 3 pm and check-out time is noon. The conference rate is available 3 days prior to and 3 days following the conference, based on space availability at the time the reservation is made. **Please note, if conference attendance exceeds expectations, rooms in the conference block may be sold out prior to the cut-off date of February 7, 2007.** Please make your reservations as soon as possible to ensure your preferred accommodations. As a helpful reminder, request a confirmation number when making your hotel reservations. And in the unlikely event that you have to cancel your reservations, please ask for a cancellation confirmation.

If you would like to share a room, call STFM at 800-274-2237, ext. 5415. You will receive information for other persons interested in having a roommate, from which you can then make your own room-sharing arrangements.

Austin, Texas!

To find out more about Austin, visit the Web site at www.austintexas.org, or call the Greater Austin Convention and Visitor's Bureau at 800-926-2282.

Air Travel

Passport Travel, STFM's official travel agency, is available to help you with your airline arrangements. For travel assistance and other special services, call 800-417-2902 and ask for the "STFM Travel Desk." Office hours are 9 am–5 pm (CST) Monday through Friday.

Car Rental Discount

Budget Rent A Car System, Inc. is the official rental car agency for this year's conference. For reservations, call Budget at 800-772-3773, or you can make your reservations online at www.budget.com. Be sure to use the following convention discount code for our conference when making your reservation: U063655; special rate code: UD/UE. Rates for the conference begin at \$41 weekday/\$152 weekly/\$31 weekend day. All rates include unlimited mileage and are valid for up to 1 week before/after the conference. If a lower promotional or special rate is available at the time of booking, attendees will be eligible to receive the lower rate.

Child Care Services

Children's programs and daycare services are available by calling the Hyatt concierge desk. Services should be reserved 24 hours in advance. For more information, or to make arrangements, please call 512-477-1234, ext. 51.

Continuing Medical Education

Application for CME credit has been filed with the American Academy of Family Physicians. Determination of credit is pending.

This program is available for approximately 25 variable (maximum) continuing education (CE) credits for mental health professionals through the cosponsorship of PsychoEducational Resources, Inc. (PER) and the Society of Teachers of Family Medicine.

PER is approved by the American Psychological Association to sponsor continuing education for Psychologists. PER maintains responsibility for this program and its content. PER is an NBCC Approved Continuing Education Provider (ACEP) and a co-sponsor of this conference. PER may award NBCC approved clock hours for programs that meet NBCC requirements (Approval # 5536). Please check with your state counseling board to see if they accept the NBCC providership.

PER is approved as a provider for continuing education by the Association of Social Work Boards, 400 South Ridge Parkway, Suite B, Culpeper, VA 22701. www.aswb.org. ASWB Approval Period: 4/15/06 – 4/15/09. Social workers should contact their regulatory board to determine conference approval.

PER is approved as a Continuing Education Home Study Provider by the National Association of Alcoholism and Drug Abuse Counselors (NAADAC) Provider #374 (exp. September 30, 2007).

The individual sessions in this conference cover the following counselor skill groups: clinical assessment, ongoing treatment planning, counseling services, documentation, case management, and legal, ethical, and professional growth. PER maintains responsibility for this program and its content.

For additional information on these disciplines or individual state CE approvals, call PER at 800-892-9249 or e-mail support@pe-ce.net. For additional session information (content level of sessions, learning objectives, etc), visit www.stfm.org. Conference organizers reserve the right to change speakers and/or topics due to unforeseen circumstances.

For other credit, STFM will assist individuals by providing information needed to the extent possible.

Ground Transportation

Round trip service from the Austin Airport is available with Super Shuttle Transportation Service. Fares are \$12/one way or \$24/round trip. Shuttles are located in the "Ground Transportation" area located outside of the baggage claim area. Taxi service from the airport to the Hyatt is approximately \$18-\$20 (one way). Please be sure to confirm all fares before using any transportation service.

Wednesday, February 28
8 am–5 pm

Getting Near the End: How Family Physicians Provide Palliative and End-of-Life Care: A Forum to Improve Service and Education Through Collaboration

Christine Arenson, MD, Thomas Jefferson University; Gina Basello, DO, Alan Roth, DO, FFAFP, Jamaica Hospital Medical Center, Jamaica, NY; Peter Selwyn, MD, MPH, Montefiore Medical Center, Bronx, NY

There is need to improve the end-of-life experience for people in our communities and in the country as a whole. Family physicians play an important role in the care of people of all ages, including those in need of palliative care services and people approaching end of life. Family medicine’s philosophy of care is well suited to the needs of people seeking these services. Family physicians approach people using a biopsycosocial model of care that sees a patient in the context of his/her life and environment. They also have a strong commitment to a patient-centered approach to service planning and delivery.

Family physicians care for substantial numbers of people in the office, hospital, nursing facilities, and at home who need palliative care and end-of-life services. While a large percentage of the hospice directors in the United States are family physicians, within organized family medicine there is no group or effort that focuses the “voice” and experience of this group. There is also, at present, no venue that promotes dialogue between the family physicians interested in these issues and the leaders of the hospice and palliative care movement.

This program has three major purposes: (1) to provide a venue for dialogue and networking between leaders of the hospice and palliative care movement and family physicians with a special interest in end-of-life and palliative care; (2) to learn from one another by sharing best practices in clinical care and education; and (3) to identify strategies that can be employed at local, regional, and national levels that will strengthen the relationship between family medicine and hospice and palliative care organizations so that the best care is offered to those we serve.

As a result of participating in this workshop, participants will be able to:

- (1) Describe the best practices that can improve the end-of-life experience for those we serve;
- (2) Describe curricular innovations (the “how to”) that will improve end-of-life and palliative care training of students, residents, fellows, and practicing family physicians;
- (3) Compare and contrast a family medicine approach to end-of-life and palliative care with a traditional medicine approach to these issues;
- (4) Describe the steps that will be taken in the coming year to strengthen the relationship between family medicine and hospice and palliative care organizations at community, regional, and national levels.

(Additional Fee: \$175; includes boxed lunch and refreshments)

Wednesday, February 28
8 am–5 pm

“Improving Health Outcomes Through Co-production of Health Services”

Abby Letcher, MD, Lehigh Valley Hospital and Health Network, Allentown, Penn; William Doherty, PhD, Tai Mendenhall, PhD, University of Minnesota; Laurence Bauer MSW, MEd, Family Medicine Education Consortium, Dayton, Ohio; Anne Rogers, Community Exchange, Allentown, Penn; Michael Rosenthal, MD, Thomas Jefferson University; Ann Skelton, MD, Maine Medical Center, Portland, Me

Family physicians seek to improve quality and access to health care services for all groups. There are opportunities to accomplish these ends through active partnerships between family physicians and the leaders of innovative community-based programs that promote health promotion and disease prevention through co-production of health services.

A co-production philosophy of care challenges traditional models of service by emphasizing how providers of and receivers of care can work together to effect change. Time Banking and Citizen Health Care are two strategies designed to engage people in active co-management of their health. These approaches create opportunities to improve health outcomes while reducing the cost of medical services.

Time Banking involves a “local infrastructure” that measures and rewards the effort that people put in to help others in their community.

“Citizen Health Care has been described as a way to organize health care in which patients, families, and communities are co-creators of health and health care and not just consumers of services from professionals. It offers a new paradigm where physicians work alongside patients, thereby creating a democratic model of health care in which everybody has something to give and everyone involved receives as well.

This event will bring together family medicine leaders and leaders from community-based groups. Following this meeting, a working group will be created that can support a long-term effort that will plan and manage the creation of demonstration projects in communities throughout the nation.

As a result of participating in this workshop, participants will be able to:

- (1) Identify the core principles and strategies associated with co-production of health services;
- (2) Recognize the operating characteristics of two co-production strategies;
- (3) Explore the interface between the goals of family medicine/primary care and the co-production models;
- (4) Consider the potential for collaboration between Time Banking, Citizen Health Care, and the new model of health care called for in the Future of Family Medicine Report.
- (5) Consider the implications of the co-production strategies for family medicine predoctoral and residency community medicine curricular activities.
- (6) Identify strategies that will create linkages between health improvement service and advocacy organizations and family medicine organizations.

(Additional Fee: \$175; includes boxed lunch and refreshments)

Thursday, March 1
8:15–9:30 am

“Changing Organizational Culture to Support Relationship-centered Practice”

Anthony Suchman, MD, MA, FACP, Relationship Centered Health Care, Rochester, NY

Relationship-centered care (RCC) is a clinical philosophy and approach characterized by partnership and shared decision-making at every level: between patients and their clinicians, between members of the interdisciplinary health care team, and between the health care system and the community. While the clinicians’ communication and relationship skills facilitate such partnerships, an even more important factor is the nature of each clinician’s relationship with self and the capacity to be fully and authentically present to others.



The organizational environment has an important effect on the nature and quality of care. All too often and without anyone’s explicit intention, the environment elicits behavior that is impersonal, hierarchical, and controlling—the very antithesis of RCC. So the next generation challenge in health care is to develop a practice of relationship-centered administration, fostering organizational environments that facilitate (rather than inhibit) relationship-centered care.

The very thought of organizational change on this scale may seem so daunting and hopeless that we shrink from taking even the first step. However, by examining the way we think about organizations and organizational change, we can discover a number of limiting assumptions and unrealistic expectations that evoke fear and defensiveness.

We can also identify an alternative perspective, informed by relationship-centered care and complexity, that offers fresh insights and new strategies. By showing the feasibility of change, it also offers us the hope we need to carry this work forward.

Anthony Suchman, MD, MA, FACP, is a practicing physician, organizational consultant, and clinical professor of medicine and psychiatry at the University of Rochester. He studied patient-clinician relationships, medical decision making, physician satisfaction, and the spiritual dimensions of medical care. He has become known as one of the leading proponents of relationship-centered care.

After 15 years of academic pursuits, Dr Suchman became interested in health care organizations, particularly how the values expressed in administrative processes and in the behavior of leaders affect processes of care. He helped to found the Highland Physicians Organization and was its first executive director. He subsequently helped to establish the Strong Health Managed Care Organization and was its first CEO and chief medical officer. He also earned an MA degree in organizational change.

Currently Dr Suchman is working with clinicians, administrators, and board members in health systems in the United States and internationally to advance the practice of relationship-centered care.

Friday, March 2
8:15–9:30 am

“Narrative Medicine from the Margins: Witness, Voice, and Vulnerability”

Sayantani DasGupta, MD, MPH, Columbia University

Narrative movements in medicine have given professional recognition to what was always intuitively known by patients and practitioners: that the heart of health care lies in stories. The illness narrative is a story co-created by teller and witness, a relationship entered into by the individual experiencing suffering and the health care provider charged with giving recognition to that suffering. Such narratives give form to what was once experienced as chaos, make public what was once private. However, the telling of such stories requires cultural and social access to the tools of narration—a facility with formal structures of English language and storytelling. Unfortunately, the stories of marginalized populations—children, people of color, gays, lesbians and bisexuals, immigrants, impoverished or imprisoned individuals—are often the narratives that are quite literally ‘lost in translation,’ since effective narrating implies the ability to both speak and have one’s intended message heard and interpreted correctly. How do we as health care providers learn to interpret untellable stories? How do we witness the voices of the most vulnerable?



Sayantani DasGupta, MD, MPH, is assistant clinical attending in pediatrics, as well as board member and faculty in narrative medicine at Columbia University. She is the author of two books, *The Demon Slayers and Other Stories: Bengali Folktales*; and a memoir of her time at Johns Hopkins Medical School, *Her Own Medicine: A Woman’s Journey from Student to Doctor*. She is the coeditor of a forthcoming anthology of women’s illness writing, *Stories of Illness and Healing: Women Write their Bodies*.

Conference on Families and Health: DISCUSSION GROUPS

The Conference on Families and Health has always been a gathering where folks don’t just come to present, or listen and learn. This is a meeting where people come to connect, network, stimulate ideas, consult with each other, share strategies and experiences—part of what makes this possible are the discussion groups during the meeting. How do they work? Groups of about 10-12 randomly assigned attendees, facilitated by two Family Conference regulars, get together to share what they have experienced so far at the meeting, exchange views and ideas from their own programs back home, and make connections for lunch, dinner or a fun afternoon outing to see area attractions! Everybody goes home with a new group of colleagues they can look forward to seeing at the conference next year. The “number” on the bottom of your name badge designates your group!

Saturday, March 3
8-9:15 am

“Primary Medical Care for Families Revisited: An Unorthodox Rearrangement of Old Ideas”

John Saultz, MD, Oregon Health and Science University

From the earliest days of family medicine, there has been disagreement about “family” as a central concept for our discipline. As we approach the end of our 4th decade as a specialty, we find ourselves in an era of turmoil and change unequalled since the decade of our birth. Our discipline has recently completed a comprehensive strategic plan commonly referred to as the Future of Family Medicine Project. This strategic plan calls for major changes to our clinical and educational models and national demonstration projects are now underway to begin implementation of this plan.



But this new model of care has relatively little to say about the care of family units. To what extent will our field remain committed to the care of families? How can the new model of care be developed in a way that respects our traditional focus on the family in family medicine? Is the care of families simply a part of personal, relationship-oriented care or does the new model need to be modified or clarified with this concern in mind? Can a family focus actually be enhanced by the development of team-based care? This presentation will outline how our past can serve as both a guide and a cautionary tale for family medicine’s future and how the future of American medicine may depend on the choices we make in this process.

John Saultz, MD, is professor and chair at the Department of Family Medicine at Oregon Health and Science University (OHSU). From 1986 to 1994 Dr Saultz was the family medicine residency director at OHSU. He is currently chair of family medicine and assistant dean for primary care of the OHSU School of Medicine. He also has served as director of Oregon’s statewide Area Health Education Centers (AHEC) Program from 1995-2006. In 2003-2004, he was named an STFM Bishop Fellow.

Dr Saultz is a diplomate of the American Board of Family Medicine, a fellow of the American Academy of Family Physicians, and a member of the Society of Teachers of Family Medicine.

Dr Saultz is a past president of the Association of Family Medicine Residency Directors and the Oregon Academy of Family Physicians. He served on the Residency Review Committee for Family Practice from 1999-2005 and on the Accreditation Council for Graduate Medical Education from 1992-1998.

Dr Saultz is the author of three books and more than 90 journal articles and book chapters. His current research interests include continuity of care in the doctor-patient relationship, medical decision making, and the future of family medicine.

Conference Track

Core New Approaches to Fundamental Skills = [C]
(tracking code will follow the presentation title, where applicable)

Educational Session Formats:

Workshops—2 ½-hour task-oriented, small-group educational experience; gain an increased understanding of and/or skills in teaching or clinical applications.

Seminars—Ninety minutes of didactic presentation and audience discussion are involved in the exploration of ideas or information in these sessions.

Lecture-Discussions—These presentations will provide 45 minutes of didactic presentation and discussion on a variety of types of topics; two of these sessions on a common topic are given consecutively in a 90-minute time slot.

PEER Sessions—As Professional Education Experience Review sessions, these 20-minute presentations provide a forum for sharing research projects, curricular ideas, teaching experiences, or other educational concepts in a brief format, including time for discussion with the audience.

New This Year!

**Online Personal
 Conference Scheduler**

Be sure to visit the STFM Web site at www.stfm.org to select the sessions you’re interested in attending. Once you have chosen your itinerary, you can print out a personalized schedule so you don’t miss a single minute of this year’s STFM Conference on Families and Health.

CONCURRENT EDUCATIONAL SESSIONS

Note, there is no pre-selection of sessions for the conference. All sessions will be filled on a first-come, first-served basis on-site.

Thursday, March 1
11 am–12:30 pm

SEMINARS

S1: Fostering A Relationship-centered Culture for Clinical Care and Teaching

Jeri Hepworth, PhD; Robert Cushman, MD, University of Connecticut

S2: Ceremony and Celebration: Recreating Family Medicine Residency

Glenda Stockwell, PhD; Reid Blackwelder, MD, Kingsport Family Medicine Residency, Kingsport, Tenn

S3: Relationship-centered Counseling in End-of-life Care [C]

Robert Houston, MD; Reetu Grewal, MD, Spartanburg Family Medicine Residency, Spartanburg, SC

S4: From Nightmares to Dream States: Chronic Pain Patients' Relationships

Sandy Coleman, PhD; James Werrbach, PhD, Eastern Maine Medical Center Family Medicine Residency, Bangor, Me

S5: Teaching Counseling Skills: A Collaborative Approach [C]

Mary Anne Carling, MA, LCSW, Bronx-Lebanon Hospital Family Medicine Residency, Bronx, NY

LECTURE DISCUSSION

L1A: The Effects of Self-care and Relationship-centered Professionalism Education on Medical Students

Lynn-Beth Satterly, MD; Tiffany Koszalka, PhD, SUNY Upstate Medical University

L1B: You Can't Teach Relationship-centered Care in a Traditional Lecture-based Curriculum [C]

Charles Christianson, MD, ScM; Rosanne McBride, PhD; Richard Vari, PhD, University of North Dakota

L2A: Smoothing the Way: Transferring Educational Models From One Institution to Another

ThelmaJean Goodrich, PhD; University of Texas, Houston; Craig Irvine, PhD, Columbia University; Jose Bayona, MD, MPH, University of Texas, Houston

L2B: Building Relationships Across a State: Colorado's Association of Family Medicine Residencies

Austin Bailey, MD, Fort Collins Family Medicine Residency, Fort Collins, Colo; Charles Raye, MD, Southern Colorado Family Medicine, Pueblo, Colo; Stephen Cobb, MD, Exempla-St. Joseph Family Practice, Denver, Colo

PEER PAPERS

PEER SESSION A:

PA1: Using Case Presentations to Integrate Behavioral Science and Medicine

Theresa Drewniak, PhD, Medical College of Wisconsin

PA2: Physician-Patient Relationship In Chronic Pain Care: A Psychodynamic Approach

Sean Hearn, MD, Allina Medical Clinic, West St Paul, Minn

PA3: The Integrative Care Clinic: Dual-trained Physicians Providing Integrated Care

Charles Motsinger, MD, Andrews Family Medicine Residency, Andrews AFB, Md

PA4: Treating Clinical Depression: A Relationship-centered Approach

Michael Bishop, PhD, Austin Academy for Individual and Relationship Therapy, Austin, Tex; Sam Cangelosi, MSSW, Austin, Tex

Thursday, March 1
1:45–3:15 pm

SEMINARS

S6: From Rescuing to Understanding: Using a Behavior Change Model to Intervene In Family Violence

Joanna Dognin, PsyD, Montefiore Medical Center, Bronx, NY

S7: Boundary Crossings and Violations

Amy Ellwood, MSW, LCSW, University of Nevada

S8: Reciprocity in Health Care Relationships: Why Is Focusing on What We Receive From Patients Important?

Valerie Ross, MS; Sharon Dobie, MD, University of Washington

LECTURE DISCUSSIONS

L3A: Improving Relationships—Creating a Medical Home: A Focus on "Challenging Interactions" [C]

William Gunn, PhD, New Hampshire-Dartmouth Family Medicine Residency Program, Concord, NH

L3B: Shrink Rap: Creating Tighter Relationships with Residents and Patients

Martha Adams, PhD; Diana Snow, PhD, University of South Alabama

L4A: Residents in Difficulty: The Good, the Bad, and the Ugly

Suzanne Allen, MD, University of Washington; Catherine Serio, PhD, Family Practice Residency of Idaho, Boise

L4B: Recognizing and Addressing the Needs of the Very Draining Resident

Alex Reed, PsyD; Deborah Outwater, MD, Wesley Family Medicine Residency Program, Wichita, Kan

Thursday, March 1
1:45–4:30 pm

WORKSHOPS

W1: Family Rhythms and the Blues: A Family Care Approach to Bereavement

Deborah Taylor, PhD, Central Maine Medical Center Family Medicine Residency, Lewiston, Me

W2: The Essential Role of Balint Groups in Enhancing Doctor-Patient Relationships [C]

Jeffrey Sternlieb, PhD, Lehigh Valley Hospital Family Medicine Residency, Allentown, Penn; Laurel Milberg, PhD, Forbes Regional Family Medicine Residency, Monroeville, Penn

W3: Meditation and Relationship-centered Care: Lessons from the Tibetan Medical Tantras

Bryan Bayles, PhD, University of Texas HSC at San Antonio

Thursday, March 1
3:30–5 pm

SEMINARS

S9: Trauma Response Teams: Important Considerations Regarding the Conduct and Ethics of Fieldwork

Tai Mendenhall, PhD, University of Minnesota

S10: Evidenced-based Treatment for Adolescent Depression in Family Medicine

Michael Bloom, PhD, Sioux Falls Family Medicine Residency, Sioux Falls, SD

S11: Seeing the Trees in the Forest: The Identification and Management of the Impaired Resident

Joseph Kertesz, MA, University of North Carolina

LECTURE DISCUSSION

L5A: Life Coaching: A Relationship-centered Approach to Personal and Professional Development of Residents

Rae Schilling, PhD, Eau Claire Family Medicine Residency, Eau Claire, Wis

L5B: Enhancing a Resident’s Self-care and Self-awareness While Teaching Family Assessment Tools [C]

Susan Mathieu, MD; Jeffrey Mathieu, MD, Lehigh Valley Hospital Family Medicine Residency, Allentown, Penn

Conference Track

Core New Approaches to Fundamental Skills = [C]

L6A: Relationship-centered Maternity Care for Socially High-risk Populations

Anita Kostecki, MD, MA; Lucy Candib, MD, University of Massachusetts

L6B: Well Infant Group Visits—A Collaborative Journey for Families and the Health Care Team

John Sutton, MD; Theresa Galayda, MD, Aultman Hospital Family Practice, Canton, Ohio; Kelli Viscounte, MSED, Aultman Hospital Birth Center, Canton, Ohio

SPECIAL SESSION

SS1: Workforce Preparedness—STFM’s IMG Training Program

Deborah Seymour, PsyD, University of Colorado; Jane Corboy, MD; John Rogers, MD, MPH, MEd, Baylor College of Medicine; Kathy Zoppi, PhD, MPH, Community Health Network-Indianapolis Family Medicine Residency, Indianapolis

Friday, March 2
11 am–12:30 pm

SEMINARS

S12: The Brave New World of Antidepressants: No Need to Grieve

Michael Bloom, PhD, Sioux Falls Family Medicine Residency Program, Sioux Falls, SD

S13: Reading is Fundamental: Using Literature to Build Health Care Teams

Craig Irvine, PhD, Columbia University; ThelmaJean Goodrich, PhD, University of Texas, Houston; Daria Boccher-Lattimore, DrPH, Columbia University

S14: A Relationship-centered Approach for Administering a Residency Program [C]

Kim Marvel, PhD; Austin Bailey, MD; Cherie Glazner, MD, MSPH, Fort Collins Family Medicine Residency, Fort Collins, Colo

S15: When Dr Harry Meets Nurse Sally (or the Reverse): Teaching Residents About Office Relationships

Jeffrey Sternlieb, PhD, Lehigh Valley Hospital Family Medicine Residency, Allentown, Penn

LECTURE DISCUSSION

L7A: Community Involvement by Way of Research Networking—A Practical Guide

Ann Reichsman, MD, Neighborhood Family Practice, Cleveland, Ohio

L7B: Medical-Legal Partnerships: An Innovative Strategy to Promote Patient Health

Patricia Lebensohn, MD; Edward Paul, MD; Anne Ryan, JD, University of Arizona; Ellen Lawton, JD, Boston University

CONCURRENT EDUCATIONAL SESSIONS

Friday, March 2
11 am–12:30 pm

PEER PAPERS

PEER SESSION B:

PB1: Relationship-centered Residency Parallels Relationship-centered Practice

Kay Levin, PhD, West Suburban Family Practice, River Forest, Ill

PB2: Building Relationships Through Research: A Community Participatory Project to Prevent and Reduce Obesity

Anita Webb, PhD; Richard Young, MD; John Peter Smith Family Medicine Residency, Fort Worth, Tex

PB3: Relationship-centered Systems-based Practice: Physician Illness and Its Effects on Us

Virginia Simons, MSW, LISW, Fairview Hospital-Cleveland Clinic, Cleveland

PB4: Attitudes of New Mexico Physicians Toward Gay Men and Lesbians—10 Years Later

Cecilia Tellez, MD, Memorial Medical Center Family Medicine Residency, Las Cruces, NM

SPECIAL SESSION

SS2: Enhancing Communication Skills With Technology: The Road Toward Competencies

Robert Cushman, MD; Jeri Hepworth, PhD; Linda Sinapi, MSW, ACSW; David Henderson, MD, University of Connecticut; William Gunn, PhD, New Hampshire-Dartmouth FPRP, Concord, NH

Saturday, March 3
10:30 am–Noon

SEMINARS

S16: Healthy Neurophysiology for Providers and Patients

Sarah Aguilar-Prinsloo, MA, St Mary's University; Thelma Jean Goodrich, PhD, University of Texas, Houston; Randall Lyle, PhD, St Mary's University

S17: Boys Will Be Boys? Exploring the Link Between Masculinity and Boyhood Violence

Robert Roose, MD, MPH; Eliana Korin, DiplPsic; Joanna Dognin, PsyD, Montefiore Medical Center, Bronx, NY

S18: Implementing the Healer's Art Course in Medical Student Education

Lucille Marchand, BSN, MD, Madison Family Medicine Residency, Madison, Wis

S19: Evidence-based Medicine and Relationship-centered: Complementary or Contradictory?

Lucy Candib, MD, University of Massachusetts

LECTURE-DISCUSSIONS

L8A: Identifying Life Goals in Nursing Home Residents

Appleton Mason, MD, Albany Medical College

L8B: Beating the Blues: Quick Tools for Sadness, Guilt, Grief, and Depression [C]

Sally Dunlap, PhD, Sandra Burge, PhD, Lewis Rose, MD, University of Texas HSC at San Antonio

L9A: Helping Our Patients Make Marriage Work—What to Do With Couples in Distress

Rhonda Faulkner, PhD, Northwestern University

L9B: Saying Good-bye to Your Patients at the End of Residency Training [C]

Arnold Goldberg, MD, Memorial Hospital of Rhode Island, Pawtucket; Kim Salloway, MSW, Brown University

PEER PAPERS

PEER SESSION C:

PC1: What Professional Values Are Learned Through the Process of Case-based, Problem-centered Learning?

Rosanne McBride, PhD; Charles Christianson, MD, ScM, University of North Dakota

PC2: An Effective Method for Teaching Patient-centered Communication Skills to Second-year Medical Students

Rachel Bramson, MD, MS; Angela Heads, MA; Robert Wiprud, MD; Michelle Jeter, Texas A&M University

PC3: Evolving the Physician-Patient Relationship: Teaching Medical Students the Art and Science of Chronic Disease Management

Cynthia McGrath, MS, FNP; May Lutfyya, PhD, University of Illinois, Rockford

PC4: Using Broad Strokes to Teach the Art of Medicine

Joanne Williams, MD, MPH, Emory University

Saturday, March 3
1:45–3:15 pm

SEMINARS

S20: Relationship-centered Care in the Community: Extending the Relationship-centered Care Model for Resident Education

Abby Letcher, MD; Julie Dostal, MD, Lehigh Valley Hospital Family Medicine Residency, Allentown, Penn

S21: Manage Your Chronic Pain Patients Before They Manage You and Your Clinic

Elizabeth Rulon, MD; Jill Chrisman, MSW; Kelly Cushing, DO, Family Practice Residency of Idaho, Boise

S22: Reaching Out to Teen Parents: A Community-based Residency Program's Multidisciplinary Approach

Shannon Moss, PhD; Kathleen Bennett; Rajasree Nair, MD, Baylor Family Practice, Garland, Tex; Mary Jarcey, North Garland High School, Garland, Tex

LECTURE-DISCUSSIONS

L10A: Challenges and Cultural Implications in Practicing Medical Family Therapy in Japan

Hideki Wakabayashi, MD, PhD, University of San Diego; Misako Suzuki, MA, Gifu Prefectural General Medical Center, Gifu, Japan

L10B: Implications of an HIV Partner Notification System for Patients and Families in Guatemala

Victoria Gorski, MD; Ana Matos, MD, Montefiore Medical Center, Bronx, NY

L11A: Chronic Pain—Preserving the Doctor-Patient Relationship

Penny Thron-Weber, MD; Mary Fairbanks, MD, St Anthony Family Medicine Residency, Westminster, Colo

L11B: Fibromyalgia: Diagnosis and Management in a Chronic Disease Model

Robert Avina, MD, Loma Linda University

**Saturday, March 3
1:45–4:30 pm**

WORKSHOPS

W4: Practicing What We Preach: Confronting Overwork and Workaholism

Patricia Williams, MD, Nemours Center for Medical Leadership, Alexandria, Va; Robert Doughty, MD, PhD, Nemours Center for Medical Leadership, Jacksonville, Fla

W5: The Citizen Health Care Program: Engaging Patients, Families, and Communities as Co-producers of Health

William Doherty, PhD; Tai Mendenhall, PhD; Jerica Berge, PhD, University of Minnesota

Conference Track

Core New Approaches to Fundamental Skills = [C]

**Saturday, March 3
3:30–5 pm**

SEMINARS

S23: The Pain Scale: Exploring Complex Relationships Between Patients, Their Pain, and Resident Providers

John Cavacece, DO; Victor Wagner, PhD; Terry McGovern, MSW, PhD, Grand Rapids Family Practice, Grand Rapids, Mich

S24: The Team as the Unit of Relating in the Future of Family Medicine [C]

Alexander Blount, EdD; Nellie Freydin, PsyD; Christopher Wheelock, MD, University of Massachusetts, Worcester

S25: Nuggets: Core Teaching Concepts and How to Make Them Work [C]

David Waters, PhD, University of Virginia; William Gunn, PhD, New Hampshire-Dartmouth Family Medicine Residency, Concord

S26: High-utilizing Patients With Medically Unexplained Symptoms: Can Reflecting Interviews Change the Patient-Health Care Team Relationship?

David Agerter, MD; Norman Rasmussen, EdD, LP; Joseph Furst, MD, Mayo Medical School; Alan Smith, PhD, University of Kansas; Macaran Baird, MD, MS, University of Minnesota

LECTURE-DISCUSSIONS

L12A: Therapeutic Interventions for Counseling Parents With Difficult Teens

David Boyle, PhD, Louisiana State University

L12B: Empathy: Meanings and Implementation in Teaching and Practice

Edmund Erde, PhD, UMDNJ-School of Osteopathic Medicine

**Sunday, March 4
8:30–10:30 am**

SPECIAL WORKSHOP

W6: Whose Life Is This Anyway? Examining the Balance in One's Personal and Professional Life

Patricia Williams, MD, Nemours Center for Medical Leadership, Alexandria, Va; Robert Doughty, MD, PhD, Nemours Center for Medical Leadership, Jacksonville, Fla

SPECIAL TOPIC AND NETWORKING BREAKFASTS

Friday, March 2
7–8 am

SPECIAL TOPIC BREAKFASTS

This morning's sessions offer an informal, educational networking opportunity that provides a unique forum for speakers to share experiences and ideas and lead discussion with participants. Tables are limited to 10 persons each.

B1: Patients' Spirituality: The Soul of Practice

Jennifer Frank, MD, Fox Valley Family Medicine Residency Program, Neenah, Wis

B2: Community Medicine: Meeting the Requirements and Benefiting the Residency and Community

Veronica Deza, MD, Baltimore, MD

B3: Finding Our Way: Mother-Daughter Relationships and Working

Janice Benson, MD, Cook County-Loyola-Provident Family Medicine Residency, Chicago, Ill; Lauren Mizock, MA, Suffolk University

B4: Teaching Counseling Skills to Residents [C]

Carol Adams, PhD, McLeod Family Medicine, Florence, SC

B5: How Do We Develop/Foster Relationships That Support Those Who Support?

Kay Levin, PhD, West Suburban Family Practice, River Forest, Ill

B6: Using Family Genograms—A Tool for Relationship-centered Practice Across the Life Cycle [C]

Rhonda Faulkner, PhD, Northwestern University

Saturday, March 3
7–7:45 am

NETWORKING BREAKFASTS

This morning's breakfast time offers informal networking roundtables for participants to discuss common interests. Tables are limited to 10 persons each. Conference participants will have an opportunity to create a variety of chat tables at the conference, based on areas of mutual interest (creativity is encouraged; not limited to medical discussions.) A list of interest tables will be constructed during the conference and posted at the Saturday morning breakfast.

New This Year!

Online Personal Conference Scheduler

Be sure to visit the STFM Web site at www.stfm.org to select the sessions you're interested in attending. Once you have chosen your itinerary, you can print out a personalized schedule so you don't miss a single minute of this year's STFM Conference on Families and Health.

Conference Track

Core New Approaches to Fundamental Skills = [C]

“Great conference! Austin was an excellent choice. As always, the content of the sessions was useful and thought provoking.”

Copy this form for multiple registrations. Please print or type all information.

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Institution _____

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Registration Fees	Before 2/7/2007	After 2/7/2007 and Onsite
<input type="checkbox"/> STFM Member	\$ 410	\$ 485
<input type="checkbox"/> Nonmember*	\$ 635	\$ 710
<input type="checkbox"/> One Day	\$ 250	\$ 325
<input type="checkbox"/> Fellow	\$ 275	\$ 350
<input type="checkbox"/> Resident	\$ 200	\$ 275
<input type="checkbox"/> Student	\$ 150	\$ 225

* This fee includes STFM membership for either active physician or active non-physician membership categories.

Additional/Optional Conference Fees:

Preconference Workshop: Getting Near the End: How FPs Provide Palliative and End-of-life Care \$175

Preconference Workshop: Improving Health Outcomes Through Co-production of Health Services \$175

Saturday Evening Dinner and Dance Additional Tickets
 Regular Menu Vegetarian _____ tickets @ \$40 each

Additional Continuing Education Credits \$50 each
 Credits available for psychologists, social workers, professional and addiction counselors, and marriage and family therapists.
 (see information on page 6)

TOTAL: \$ _____
 (total registration fee and optional fees)

Payment Method:

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CANCELLATION POLICY:

50% of the total registration fee will be refunded if a cancellation is necessary and written notification is received in the STFM office by February 13, 2007. After that date, no refunds will be issued.

There is no pre-selection of sessions for the conference. All sessions are filled on a first-come first-served basis on-site.

Major Professional Role (check only one):

- | | | |
|--|--|--|
| <input type="checkbox"/> Predoctoral Director | <input type="checkbox"/> Predoctoral Faculty | <input type="checkbox"/> Department Chair |
| <input type="checkbox"/> Residency Director | <input type="checkbox"/> Residency Faculty | <input type="checkbox"/> Practicing Physician |
| <input type="checkbox"/> Behavioral/Social Scientist | <input type="checkbox"/> Dietitian | <input type="checkbox"/> Pharmacist |
| <input type="checkbox"/> Nurse | <input type="checkbox"/> Nurse Practitioner | <input type="checkbox"/> Researcher |
| <input type="checkbox"/> Health Educator | <input type="checkbox"/> Physician Assistant | <input type="checkbox"/> Coordinator/Adm Staff |
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| <input type="checkbox"/> Other _____ | | |

Work Setting (check only one):

- Medical School Residency Program Private Practice
 Association Managed Care Organization
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So We May Better Serve You at the Conference:

- This is my first time to attend the Conference on Families and Health
 Special dietary needs: Vegetarian Kosher (72-hour notice)
 Check here if you have a disability and may require special accommodation(s) to fully participate. You will be contacted by STFM for further arrangements.

REMINDER: The deadline for hotel reservations is February 7, 2007

How Did You Hear About the Conference?

- E-mail from STFM
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Register online at www.stfm.org

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Society of Teachers of Family Medicine,
 11400 Tomahawk Creek Pkwy, Ste. 540
 Leawood, KS 66211

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