Policy-makers get a look at how decisions play out

In January, nine New Hampshire policy-makers donned white medical coats and spent a day learning what it’s like to be a doctor at DHMC. They weren’t allowed to actually treat patients, of course, but they got to shadow physicians during inpatient rounds, outpatient visits, and even in the operating room. They were participating in Project Medical Education (PME), designed to give legislators and other policy-makers a better understanding of the complexities of academic medicine.

“One of our key goals in doing this is really demystifying the process of medicine,” said Dr. Stephen Spielberg, DMS’s dean, at the program’s welcoming dinner. At a post-dinner “graduation,” the policy-makers were all given a white coat, a statement of their medical school “loan debt,” and a “residency assignment” for the following day.

The participants were excited and a bit nervous as they began their nearly three-hour clinical experience the next morning. But the real medical residents who were their hosts quickly put them at ease. Afterward, the policy-makers were eager to offer feedback about PME to DHMC officials.

Watching: “I expected maybe they wouldn’t be too happy to have a politician watching them,” said New Hampshire State Senator Robert Clegg. “It was just the opposite. Of course, surgery was interesting. The attending physician was more than happy to treat me like I was really a resident and explain everything he did.”

“The one thing that stood out for me is how much attention these patients were getting,” said Darwin Cusack, chief of staff to one of New Hampshire’s U.S. Congressmen, Charles Bass. Cusack was also impressed with how well the physician he shadowed explained a patient’s situation to a family member. “He went over it in technical terms first and then went over it all again in terms she could understand and made sure that she knew exactly what the state of play was and answered all of her questions.”

Code blue: “I learned that you don’t take the elevator” when responding to a code blue, said New Hampshire State Representative Fran Wendelboe. She described needing to hustle up the stairs as her team rushed to the aid of someone who had gone into cardiac arrest.

In addition to shadowing residents, the policy-makers learned about the complexities of financing graduate medical education, visited several labs, heard from physician-scientists about the important role research plays in patient care, and were introduced to the daunting process of diagnosing a puzzling case.

Act: DHMC’s PME was based on a program of the same name run by the Association of American Medical Colleges (AAMC). It’s designed to give policy-makers information so they can make insightful decisions on issues that affect academic medical centers. The AAMC program began in the wake of the Balanced Budget Act of 1997, “which posed the most serious threat to federal support for our missions in recent memory and which heightened a long-standing concern about the meager understanding most policy-makers have of academic medicine,” according to Dr. Jordan Cohen, the president of the AAMC.

Legislators and government officials typically underestimate
the years of education and training required to become a physician, for example; have little appreciation of the degree to which educators are involved in research and patient care; don’t understand how research improves patient care; and don’t realize how much care academic medical centers and teaching hospitals provide for underserved and uninsured patients.

Without a full understanding of what such institutions do, legislators have no way to anticipate the impact that their budget cuts may have on academic medical centers.

**Funding:** In New Hampshire, funding for DHMC is in jeopardy partly because people don’t understand what graduate medical education is, explains Gina Balkus, DHMC’s director of government relations for New Hampshire. Balkus organized the PME program along with Dr. Worth Parker, DHMC’s director of graduate medical education, and Frank McDougall, vice president of government relations for the Medical Center. It was such a success that they plan to offer it again in June.

“Legislators who took part in the program now understand the challenges we face as an academic medical center,” says Balkus. In fact, Senator Clegg, who is the chamber’s majority leader, has expressed an interest in establishing a loan forgiveness program for DMS graduates who agree to practice in New Hampshire’s underserved areas. “This is a direct result of his participation in the PME,” says Balkus.

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