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Letters to the Editor

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Letters to the Editor

From Chaos to Care

Dear Dr. Nash,

I am a clinical social worker and recently read your editorial ("From Chaos to Care," June 2003).

I think you are correct that a team approach to medicine makes sense. I absolutely agree that the system in which a doctor works must support this approach, or it won't work. As a social worker, I would like to recommend a counselor (hopefully a licensed social worker) as part of each medical team. This person can offer a different perspective and follow up with the more in-depth counseling and support that is known and proven by research to be crucial to recovery from many illnesses.

I also think that the insurance reimbursement system and dependence on it is limiting a more appropriate approach to medical care. We are wearing out our doctors and not serving our clients if care is done in segments. It needs to be coordinated and holistic. People are not the sum of their parts (organ systems); they need to be treated as a whole, and one person, the physician, cannot do all that. Doctors need to feel like the work is doable and won't burn them out within a few years.

Good luck with the work you are doing to integrate a team approach in medical education at TJU. Please check the social work literature as there have been journal articles for several years, at least, supporting this approach.

Stephanie Costello, MSW, ACSW, LCSW

Philadelphia, PA

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Dear Dr. Nash,

I enjoy the *Health Policy Newsletter*, especially in my role as Chairman of the Board of Directors of Hanover Advantage Health Providers Association, the Physician Hospital Organization in Hanover, PA.

Your editorial, "From Chaos to Care," crystallized in my mind why those of us still working as independent private practitioners are having such a difficult time meeting the challenges of modern medical practice, such as the shift to a paperless office. The small-businessman mentality has persisted in the face of demands to perform like large health care organizations; however, small practices are limited by financial constraints.

Government regulators seem oblivious to the fact that so many of the intended targets will suffer in efforts to comply in a timely and legal fashion. Yet, we still try to do it all, from managing the office, to paying bills, to supervising personnel -- all this

in addition to meeting our on-call responsibilities and clinical demands and keeping professionally updated in our daily work. This is something that our fathers could have managed, but we are slow to admit that those days are gone.

The loss of physicians in our state, as well as the attitudes that many younger doctors have towards more controlled work week hours, will probably accelerate the growth of larger practices, with managers and layers of supervisors and decision makers. But, all of those physicians currently locked in by financial responsibilities are slowing the transition to electronic medical records and other trends of the new century.

Jon Schmeyer, MD Hanover, PA

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