



## ***AGENDA***

### **Sunday, March 8, 2015**

<b>Time</b>	<b>Session Name</b>	<b>Session Description</b>	<b>Speakers</b>	<b>Location</b>
3pm	Registration Opens			Grand Ballroom Foyer
6:30 - 8:30 pm	Cocktail Reception	Meet the speakers and fellow conference attendees.	N/A	Grand Ballroom Foyer

### **Monday, March 9, Morning Session**

<b>Time</b>	<b>Session Name</b>	<b>Session Description</b>	<b>Speakers</b>	<b>Location</b>
8-9 am	Breakfast			Grand Ballroom, Salon D-E
9-9:30 am	Welcome and Introductions		Vikas Saini, MD, President, Lown Institute Shannon Brownlee, MSc, Senior Vice President, Lown Institute	Grand Ballroom, Salon A-C
9:30-10am	Keynote: Going from Outrage to Action		Diane Meier, MD, FACP, <i>Director, Center to Advance Palliative Care</i>	Grand Ballroom, Salon A-C

10 am– 10:30 am	Break			Grand Ballroom Foyer
10:30- 11:45 am	Panel Discussion: The Bumpy Road to RightCare. What are the barriers to addressing misuse?	Why is reform so difficult? This panel discussion and extended Q&A with the audience will explore a few of the key barriers to the right care, such as the lack of time for primary care providers, poor communication between primary care and specialists, and between clinician and patients and lack of valid scientific evidence.	<p><b>Moderator:</b></p> <p>Susie Dade, MPA, <i>Deputy Director, Washington Health Alliance</i></p> <p><b>Confirmed panelists:</b></p> <p>James Rickert, MD, President, <i>The Society for Patient Centered Orthopedics</i></p> <p>David H. Newman, MD, Editor-in-Chief, <i>TheNNT.com</i></p> <p>Randi Redmond Oster, MBA, President, <i>Well Path Press</i></p> <p>Suzanne Gordon, <i>Journalist, Author, and Patient Safety Advocate</i></p>	Grand Ballroom, Salon A-C
11:45- 12:15 pm	Panel Discussion	Overtreatment isn't just a matter of cost; it alters patients' and families' lives. Diane Pinakiewicz will explore her personal experience with Jeff Kane, MD.	<p><i>Diane Pinakiewicz, MBA, CPPS, Principal DCP Consulting LLC; Distinguished Advisor and Past President, National Patient Safety Foundation</i></p> <p><i>Jeff Kane, MD, Author, The Bedside Manifesto and How to Heal</i></p>	Grand Ballroom, Salon A-C

**Monday, March 9, Afternoon Session**

<b>Time</b>	<b>Session Name</b>	<b>Session Description</b>	<b>Speakers</b>	<b>Location</b>
12:15-1:15 pm	Lunch			Grand Ballroom, Salon D-E
1:15-1:45 pm	Keynote: Health Begins with Social Support	Imagine healthcare that is designed to address community needs. Mitchell Katz, MD, did it, and he shares lessons from a simple but powerful initiative that put the community first.	Mitchell H. Katz, MD, <i>Director, Los Angeles County Department of Health Services</i>	Grand Ballroom, Salon A-C
1:45-2:30 pm	Tradeoffs: what do we give up for wasteful health care spending?	This session will explore the tradeoffs communities are forced to make between paying for costly and wasteful healthcare and funding other services that would promote community health.	<p><b>Moderator:</b> Esther Dyson, <i>Founder, HiCCup</i></p> <p><b>Panelists:</b> Sally Covington, <i>Senior Health Care Advisor, SEIU L1021</i> Mitchell H. Katz, MD</p>	Grand Ballroom, Salon A-C
2:30-3:00 pm	Break			Grand Ballroom Foyer

3-4:45 pm	Panel Discussion: Bright spots in the healthcare landscape that imagines a better system	This panel offers a set of ground-breaking, on-the-ground initiatives in primary care, medical education, advanced illness care, hospital restructuring and community organizing, which are reducing overuse and underuse, and advancing the right care.	<p><b>Moderator:</b> Patricia A. Gabow, MD, MACP, <i>Former CEO of Denver Health</i></p> <p><b>Panelists:</b></p> <p>David Hirsh, MD, Director and Co-founder, Harvard Medical School-Cambridge Integrated Clerkship</p> <p>Alan Glaseroff, MD, Co-Director, Stanford Coordinated Care</p> <p>Brad Stuart, MD, <i>The Coalition to Transform Advanced Care (C-TAC)</i></p> <p>Karen Cox, PhD, RN, FAAN, <i>American Academy of Nursing</i></p> <p>Angelo Volandes, MD, Faculty, Harvard Medical School, Massachusetts General Hospital; Co-Founder and President, <i>ACP Decisions</i></p> <p>Michael Fine, MD, <i>Director, Rhode Island Department of Health</i></p>	Grand Ballroom, Salon A-C
4:45-5 pm	Closing Remarks		Rev. Burns Stanfield, President, <i>Greater Boston Interfaith</i>	Grand Ballroom, Salon A-C

			<i>Organization</i>	
5pm – 6pm	Student and Trainee Reception			Grand Ballroom Foyer

**Tuesday, March 10**

6:15 – 7:15 am	Yoga	Join us for an early morning yoga session. Mats will be provided.		Balboa 1
7:30-8:30 am	Breakfast			Grand Ballroom, Salon D-E
8:30-8:45am	Welcome			Grand Ballroom, Salon A-C
8:45– 9:15 am	Keynote: The Urgent Need for Transformation*		Harlan M Krumholz, MD. <i>Harold H. Hines, Jr. Professor of Medicine, Director of the Yale-New Haven Hospital Center for Outcomes Research and Evaluation (CORE); director of the Robert Wood Johnson Clinical Scholars Program at Yale University School of Medicine.</i>	Grand Ballroom, Salon A-C
9:15 - 10:00 am	Panel Discussion	This panel discussion will explore the financial, emotional, and medical harms that result from gaps in communication	<b>Moderator:</b> Steven Weinberger, MD, FACP, <i>executive Vice President and chief executive, American College of Physicians</i>	Grand Ballroom, Salon A-C

			<b>Patient panelist:</b> Peter Drier	
10:00 - 10:30 am	Break			Grand Ballroom Foyer
10:30 am - noon	Breakout Session 1	See sessions below.		See sessions below.
Noon – 1 pm	Lunch			Gallery 1
1- 2:30 pm	Breakout Session 2	See sessions below.		See sessions below.
2:30-3:30 pm	Break and Networking Sessions	Meet with fellow attendees who share interests in local organizing, particular medical specialties, or international aspects of right care.		Grand Ballroom Foyer
3:30-5 pm	Breakout Session 3	See sessions below.		See sessions below.
6-8 pm	San Diego Dine-Around	Enjoy the local cuisine, and get to know your colleagues. We will arrange reservations for small groups to explore area restaurants and dine together, at your own expense.		

\*This session is not eligible for CME or other continuing education credits.

### Wednesday, March 11, Morning Session

7:30-8:30 am	Breakfast			Grand Ballroom, Salon D-E
8:30-8:45am	Opening			Grand Ballroom, Salon A-C

	Announcements			
8:45-9:15 am	Keynote: Medicine Built on Compassion, Humility, and Service*	Addressing overuse will require clinicians to place compassion, humanity and service at the center of medical practice.	Steven Nissen, MD, MAAC, <i>Chair, Department of Cardiovascular Medicine, Cleveland Clinic</i>	Grand Ballroom, Salon A-C
9:15-9:45 am	Keynote: Empowering Communities to Co-Produce Health	Hear the riveting and inspiring story of using community empowerment and participatory education to improve the health of under-served communities.	America Bracho, MD, MPH, CEO, <i>Latino Health Access</i>	Grand Ballroom, Salon A-C
9:45-10 am	Break			Grand Ballroom Foyer
10-10:15 am	Musical Interlude			Grand Ballroom, Salon A-C
10:15-11:15 am	Panel Discussion: Organizing for Change	A panel discussion among representatives from three social movements that used organizing techniques to bring about significant change.	<p><b>Moderator:</b> Rev. Burns Stanfield</p> <p><b>Panelists:</b> Andrew Morris-Singer, MD, President, Primary Care Progress Judy Norsigian, Co-Founder, Our Bodies Ourselves Eliseo Medina, MD, <i>Former International Secretary-Treasurer, SEIU</i></p>	Grand Ballroom, Salon A-C

11:15-11:45 am	RightCare Action Week	Imagine if 1,000 doctors across the country took action on the same week, leading to right care.	<b>Moderator:</b> Paul Williams, Manager of Strategic Outreach, Lown Institute	Grand Ballroom, Salon A-C
11:45 am–noon	Closing Remarks		Vikas Saini, MD, MD, President, Lown Institute  Shannon Brownlee, MSc, Senior Vice President, Lown Institute	Grand Ballroom, Salon A-C
Noon – 1 pm	Boxed Lunch			Grand Ballroom, Salon A-C

\* This session is not eligible for CME or other continuing education credits

## Tuesday, March 10, Breakout Sessions

The second day of the conference is built around a series of in-depth workshops that tackle the most important challenges facing practicing clinicians, medical educators, and policymakers in government and medicine.

Tracks related to [medical education](#), [organizing](#), [improving primary care/specialty communication](#), and [end-of-life care](#) are color-coded.

Room	Session 1: 10:30 AM – 12 PM	Session 2: 1 PM – 2:30 PM	Session 3: 3:30 PM – 5 PM
Gaslamp 1	Building the RightCare movement in pediatrics	Beyond workups and rule-outs: Collaboration between primary care, specialties, and the ED to reduce fear	Nursing perspectives on right care
Gaslamp 2	Issues in orthopedics for non-orthopods	Developing and implementing RightCare Rounds	Issues in cardiology for non-cardiologists

<b>Gaslamp 3</b>	Using Videos in Your Advance Care Planning Strategy: Soup to Nuts	Meeting the triple aim of medical education: The longitudinal integrated clerkship	Right care in psychiatry and behavioral health
<b>Gaslamp 4</b>	Inventing the future of primary care	Debating healthcare trade-offs using a computer “game”	What patients want: Using the “Patient & Family Engagement Roadmap” to improve the patient experience
<b>Gaslamp 5</b>	Principles of conservative diagnosis	Re-engineering care delivery: Allowing personal choice to improve quality and reduce cost in advanced illness	Faculty development: Teaching RightCare
<b>Salon D</b>	Learning right care: creating opportunity out of obstacles	So, you thought you knew how to read the evidence...	The Do No Harm Project
<b>Salon E</b>	‘Story’ as a tool for connecting with others, building teams, and recruiting leaders	Engaging communities to co-create right care	Overmedicalizing death, underspiritualizing death, and could death be enjoyable?

## Workshop Sessions

### Breakout Session 1 10:30 AM – noon

#### Ensuring the right care for children (Gaslamp 1)

Children can be particularly vulnerable to harm from unnecessary medical treatments. At the same time, treatments for children often have less evidence available to guide their use. Discuss the unique challenges of providing the right care in pediatrics, and how pediatricians can work together to focus education, research, delivery and policy on improving care for children.

**Presenters:**

- Alan R. Schroeder, MD; *Chief, Pediatric Inpatient Services, Santa Clara Valley Medical Center*
- Shawn Ralston, MD; *Editor in Chief, Hospital Pediatrics; Associate Professor of Pediatrics, Geisel School of Medicine at Dartmouth*

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**Issues in orthopedics for non-orthopods (Gaslamp 2)**

Whether you're an orthopedic surgeon, primary care provider, or other healthcare professional, managing orthopedic conditions can be a minefield of mismatched expectations and excessive intervention. Come to this workshop to learn about:

- The real most-overused procedures and interventions in orthopedics
- How to ensure that patients, surgeons, and primary care providers understand the treatment choices, and why surgery may or may not be the best option.

**Presenters:**

- James Rickert, MD; *President, The Society for Patient Centered Orthopedics*
- Thomas J. Grogan, MD; *Orthopedic Surgeon*
- Thomas Boniface, MD; *NEOMED*
- Rob Rutherford, MD; *Clinical Instructor, University of Washington*

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**Using videos in your advance care planning strategy: Soup to nuts (Gaslamp 3)**

The American healthcare system for end-of-life care is broken. As a result, dying in America is far more difficult than it needs to be. Conversations about end-of-life care often hastily take place in the midst of medical crises in hospital hallways and patient rooms.

The IOM's *Dying in America* consensus report highlighted several ways to improve the care that patients receive at the end of life. Each improvement relates to the most important intervention in medicine today: thoughtful and informed conversations about the goals of medical care between patients and their healthcare team.

Disruptive and transformational change is required. One potential disruptive technology is the use of video as part of a larger advance care planning initiative. Join the executive director of the non-profit ACP Decisions and the director of the Everett Clinic End of Life Task Force as they provide a practical “soup to nuts” approach and share their experiences about using videos to help empower patients to make informed decisions and control their health care.

**Presenters:**

- Aretha Delight Davis, MD, JD; *Executive Director, ACP Decisions*
- Elizabeth T. Marshall, MD, MAT, FAAFP; *Director, End of Life Task Force, The Everett Clinic*

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**Inventing the future of primary care (Gaslamp 4)**

Primary care faces a number of structural challenges as the healthcare system changes, but providing good primary care is still indispensable to taking care of patients. This panel will address how successful primary care practices are designed differently to better serve their patient population, and what it takes for a redesigned primary care practice to be financially, culturally, and systemically sustainable.

**Presenters:**

- Alan Glaseroff, MD; *Co-Director, Stanford Coordinated Care*
- Lucie Richter; *Design Research and Strategy*
- Peter Knox; *Executive Vice President, Bellin Health*

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### **Principles of conservative diagnosis (Gaslamp 5)**

Dr. Schiff and a team of practitioners and researchers have formulated a widely used set of 24 principles of conservative medication prescribing (Schiff *JAMA* 2009, *Arch Int Med* 2011), and in collaboration with medical specialists and primary care practitioners, have developed a set of principles for more critical, thoughtful, rational, and conservative diagnoses. Rather than a specific “choose wisely” test or treatment, these principles and didactic concepts will teach trainees and practitioners generalizable approaches that can inform their entire practice of medicine. The principles incorporate situational awareness, personal relationships, safety nets, critical thinking, financial neutrality to avoid conflicts, and longitudinal follow-up as an alternative to current harmful and wasteful practices. Participants will be given an opportunity to help develop further these principles as co-authors for future publication and dissemination.

#### **Presenter:**

- Gordon Schiff, MD; *Associate Director, Center for Patient Safety Research and Practice, Brigham and Women’s Hospital*

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### **Learning right care: Creating opportunity out of obstacles (Salon D)**

The hidden curriculum in medical education has an important effect on how physicians learn to practice, and on practice patterns throughout their lives. How can trainees and medical faculty work together to help students practice different aspects of right care, including evidence-based medicine, high-value care, shared decision-making, etc.? How can students learn those critical skills and challenge harmful aspects of the hidden curriculum? Hear different perspectives from faculty and students in pre-clinical, clerkship, and residency training about empowering students to seek out training in right care at their institutions and overcoming the barriers presented by traditional medical education.

#### **Presenters:**

- Brian Shaw; *Medical Student, University of California, San Francisco*
- Jonathan Jimenez; *Clinical Innovation Community Fellow, Primary Care Progress*
- Aliye Runyan, MD; *Graduate Trustee, American Medical Student Association*

- Christopher Moriates, MD; *Assistant Clinical Professor, University of California, San Francisco; Director of Caring Wisely, UCSF Center for Healthcare Value; Director of Implementation Initiatives, Costs of Care, Inc.*

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### **‘Story’ as a tool for connecting with others, building teams, and recruiting leaders (Salon E)**

Public Narrative is a storytelling framework originally developed by Marshall Ganz, Senior Lecturer in Public Policy at the Harvard Kennedy School, after several decades of organizing in numerous campaigns.

Public Narrative includes three components: Story of Self, Story of Us and Story of Now. Story of Self describes what calls each of us to action. In it, we showcase why we care about what we care about. Story of Us describes the challenges and specific choices that a community of people have made. Story of Now highlights the urgency of the moment – why we must act now, as a team, to address a specific problem or take advantage of an opportunity that won’t be around for long.

#### **Presenters:**

- Andrew Morris-Singer, MD; *President, Primary Care Progress*
- Paul Williams; *Manager of Strategic Outreach, Lown Institute*

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### **Breakout Session 2**

**1:00 PM – 2:30 PM**

#### **Beyond workups and rule-outs: Collaboration between primary care, specialties, and the ED to reduce fear (Gaslamp 1)**

Whether you’re an emergency physician, primary care provider, hospitalist, learn about protecting patients from unnecessary testing and treatment in the ED, involving patients in emergency care decisions, and the role of fear in driving ED decision making.

#### **Moderator:**

- Shannon Brownlee, MS; *Senior Vice President, Lown Institute*

**Panelists:**

- Jeremiah (Jay) Schuur, MD, MHS; *Chief, Division of Health Policy Translation, Department of Emergency Medicine, Brigham and Women's Hospital*
  - Jerome Hoffman, MA, MD; *Professor of Medicine Emeritus, UCLA*
  - Joshua Kosowsky, MD; *Vice Chair, Clinical Affairs, Department of Emergency Medicine, Brigham and Women's Hospital*
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**Developing and implementing RightCare Rounds (Gaslamp 2)**

Grand rounds are a widely-used and recognized teaching tool in medicine. RightCare Rounds is a method, pioneered at Cambridge Health Alliance and other leading hospitals around the country, of using grand rounds to focus not just on diagnosing or treating a particular condition, but also to look at the healthcare system as a whole, improving ways patients interact with the system. Hear the experiences of pioneers of RCR and learn how to implement them in your own organization.

**Presenters:**

- David Bor, MD; *Chief of Medicine, Cambridge Health Alliance*
  - Brandon Combs, MD, FACP; *Assistant Professor, University of Colorado School of Medicine*
  - Hyung (Harry) Cho, MD; *Director of Quality and Patient Safety, Division of Hospital Medicine, Mount Sinai Hospital*
  - Michel Hochman, MD, MPH; *Medical Director, Innovation, AltaMed Health Services*
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**Meeting the triple aim of medical education: The longitudinal integrated clerkship (Gaslamp 3)**

What if medical education could improve the health of patients, serve communities, and actually preserve and foster students' empathy? That's the promise of the longitudinal integrated clerkship. Learn about re-designing medical training so it improves health and meets the needs of learners and communities.

**Presenters:**

- David Hirsh, MD; *Director and co-founder, Harvard Medical School-Cambridge Integrated Clerkship*
  - Lindsay Mazotti, MD; *Hospitalist, Kaiser Permanente; Associate Clinical Professor, University of California San Francisco*
  - Patrick Lee, MD; *Medical Director, Lynn Community Health Center*
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**Debating healthcare trade-offs using a computer “game” (Gaslamp 4)**

CHAT® (Choosing All Together) is a cloud-based computer process that has been used to capture the priorities and values of healthcare professionals and the public. Current versions ask participants to consider health plan coverage from the perspective of “social decision-makers,” and face the tension that exists when patients and providers make treatment choices that are ineffective or wasteful. CHAT can be customized with different types of priority-setting to engage communities or educational settings in addressing contemporary healthcare policy issues. This session will show how CHAT is used as a tool for public deliberation and input to health policy. It allows attendees to test their own reactions to low-value care through an Audience Response System; and see how CHAT can be used to educate and motivate healthcare professionals and the public.

**Presenter:**

- Marge Ginsburg; *Executive Director, Center for Healthcare Decisions*
  - Susan Perez; *Postdoctoral Scholar, University of California, Davis*
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**Re-engineering care delivery: Allowing personal choice to improve quality and reduce cost in advanced illness (Gaslamp 5)**

Too often, people with advanced illness don't have the opportunity to decide and articulate what they want from their care until it's too late. By having conversations earlier, and creating a shared care plan based on the conversation, patients can make more conscious choices and improve their care. These conversations must be collaborative, and can be had in partnership with health plans' clinical resources and provider systems. The workshop will present theoretical and practical ideas on how to better manage clinical, psychosocial and socioeconomic determinants of health for people with advanced illness.

**Presenters:**

- Brad Stuart, MD; *CEO, ACIStrategies*
- Joseph Agostini, MD; *National Medical Director, Aetna Medicare*

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**So, you thought you knew how to read the evidence... (Salon D)**

High-quality medical evidence is crucial to making good clinical decisions, but many studies are subject to a variety of biases and misrepresentations. Are you sure you know what to look for in detecting that bias? This workshop will cover the most common and most damaging problems in medical evidence, and provide strategies for dealing with conflicted evidence in practice.

**Presenters:**

- David H. Newman, MD; *Editor-in-Chief, TheNNT.com*
- David Schriger, MD MPH; *Professor of Emergency Medicine, University of California, Los Angeles*

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**Engaging communities to co-create right care (Salon E)**

Healthcare transformation has begun to identify the need to create solutions with community members, not for them. The traditional professional expert and provider/consumer models are inadequate for solving many of the problems confronting us, as patients and communities. This session will focus on the emerging role of the "citizen professional" who works alongside others to co-create new ways to address healthcare challenges. You will learn about a field-tested process called Citizen Health Care for constructing non-hierarchical working groups of professionals and other citizens. The chief example in

this session will be an initiative called Baby Boomers for Balanced Health Care ([www.boomers4balancedcare.org](http://www.boomers4balancedcare.org)), which aims at changing the cultural idea that more healthcare is better healthcare. The presenters are a healthcare professional and a citizen leader.

**Presenters:**

- William Doherty, PhD; *University of Minnesota*
  - Bill Adams; *Citizen Member, Baby Boomers for Balanced Health Care*
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**Breakout Session 3**  
**3:30 PM – 5:00 PM**

**Nursing perspectives on right care (Gaslamp 1)**

Conversations about improving healthcare often focus exclusively on physicians as drivers of care. Other clinicians, too, are essential to the functioning of the healthcare system, and nurses are responsible for many direct patient interactions and care decisions. Hear from leaders in the nursing profession about what their organizations are doing to promote right care, what kind of interprofessional conversations are necessary to improve collaboration between nurses and physicians, and how nurses can help push the healthcare system to improve.

**Presenters:**

- Susan King, MS, RN, CEN, FAAN; *Executive Director, Oregon Nurses Association*
  - Karen Cox; *Executive Vice President/Co-Chief Operating Officer, Children's Mercy Hospital – Kansas City*
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**Issues in cardiology for non-cardiologists (Gaslamp 2)**

Dealing with heart disease is an important and far-reaching challenge for the medical system. Changes in how heart disease is managed have important implications for cardiologists, primary care physicians, medical students, patients, and the rest of the system. The session will address ongoing challenges in cardiology, including:

- The role of stenting and angioplasty in managing coronary artery disease: When is PCI valuable, and when is it wasteful or harmful? What can appropriateness criteria tell us about how much stenting is wasteful?
- Radiofrequency ablation for atrial fibrillation is emerging as a major source of revenue for cardiologists, but the data on its effectiveness are sparse. Is it set to become the next stenting?
- How can improved communication between primary care physicians and cardiologists help improve cardiac care and avoid overuse?

**Presenters:**

- David L. Brown, MD; *Professor of Medicine, Washington University in St. Louis*
  - David Martin, MD, FRCP; *Chair of Medicine, Lahey Hospital and Medical Center*
  - John Mandrola, MD; *Chief Cardiology Correspondent, TheHeart.org*
  - William E. Boden, MD; *Professor of Medicine, Albany Medical College; Chief of Medicine, Albany VA Medical Center; Vice-Chairman of Medicine, Albany Medical Center, Albany, NY*
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**RightCare in psychiatry and behavioral health (Gaslamp 3)**

This workshop will begin with a clinical case vignette as a springboard to a wide-ranging discussion among panel members who will explore several dilemmas with the diagnosis and treatment of common behavioral disorders. Panelists will speak from each of their perspectives as a seasoned public advocate/family member and as experts in psychiatry, family medicine, family therapy and psychology. To stimulate audience participation, the panel will explore the consequences of under- and over- diagnosis and over- and under-treatment of ADHD, depression and bipolar disorders. How do addictive disorders complicate diagnosis and treatment of these disorders? What can a clinician and/or a patient and family member do to facilitate recovery and resilience? This is an opportunity to delve into ways to avoid common pitfalls and find new opportunities to improve care.

**Presenters:**

- Macaran A. Baird, MD, MS; *Professor and Department Head, University of Minnesota Dept. of Family Medicine and Community Health*
- Kim Witzcak; *Drug Safety Advocate, Co-Founder Woodymatters*
- Allen Frances, MD; *Professor Emeritus, Duke University*
- Wesley Boyd, MD; *Psychiatrist, Cambridge Health Alliance*
- Bruce Price, MD; *Chief, Department of Neurology, McLean Hospital/Harvard Medical School*

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### **What patients want: Using the “Patient & Family Engagement Roadmap” to improve the patient experience (Gaslamp 4)**

Good, bad or indifferent, every patient and their loved ones has an experience with your facility, your healthcare providers and the services they provide. Have you designed patient experiences from the patient’s point of view? Is the patient experience inconsistent, varying from one interaction to the next? If you were to design those experiences purposefully, with the patient in the center, where would you start?

Beginning with the Moore Foundation Patient and Family Engagement Roadmap, this workshop will introduce a revolutionary approach to getting a fast start on your patient experience initiative. Participants will learn how the Patient ‘I Wants’ ensure effective shared decision making, and how they can help achieve rapid transformation. This workshop promises to be as entertaining as it is informative with lots of real-world examples and ample opportunities to exchange ideas for easy-to-implement, low cost solutions to improve patient engagement. This session is a must-attend for senior leaders, department managers or anyone who wants to drive patient satisfaction and spur organizational change.

#### **Presenters:**

- Randi Redmond Oster, MBA; *President, Well Path Press*
- Kathleen Cattrall; *Chief Experience Officer, Help Me Health*
- Dominick L. Frosch, PhD; *Gordon and Betty Moore Foundation*

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### **Faculty development: Teaching right care (Gaslamp 5)**

Incorporating high-value care into teaching is essential to training well-rounded clinicians, but it can be challenging, even for senior medical educators. In this workshop, experienced medical faculty will share ideas for incorporating principles of high-value care into bedside teaching, overcoming barriers to teaching high-value care, and establishing ways to support fellow educators in efforts to improve clinical teaching. It will also include case-based opportunities to practice teaching high-value.

**Presenters:**

- Michael Wilkes, MD, MPH, PhD; *University of California, Davis*
  - Cynthia D. Smith, MD; *Senior Physician Educator, American College of Physicians*
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**The Do No Harm Project (Salon D)**

Want to do something about low-value care? Learn how with the Do No Harm Project. The Do No Harm Project is a nationally acclaimed initiative that harnesses the power of storytelling to bring attention to the preventable patient harms that result from medical overuse. “Too much medicine” exposes patients to avoidable harm and downstream complications, but it can be hard to recognize. Through this powerful reflective writing exercise, trainees are empowered to recognize overuse before it happens and to do “as much as possible for the patient and as little as possible to the patient.” Appropriate for trainees at all levels, this program can be the foundation for other efforts to improve the quality of patient care. Writing vignettes can also lead to publication in *JAMA Internal Medicine’s* “Teachable Moments” series. Join the co-founders of this program and the awardees from the Lown Institute’s recent Do No Harm Project National Competition and learn how to spot overuse at the point of care and start a Do No Harm Project at your home institution.

**Presenters:**

- Brandon Combs, MD, FACP; *Assistant Professor, University of Colorado School of Medicine*
  - Tanner Caverly, MD, MPH; *University of Michigan*
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## **Overmedicalizing death, underspiritualizing death, and could death be enjoyable? (Salon E)**

Since 1969, when Dr. Elisabeth Kübler-Ross first published her groundbreaking book, *On Death and Dying*, we've come a long way toward making death and dying tolerable. Hospice units and hospice care, palliative medicine, advanced life directives, and the concept of non-beneficence are all important advances. And yet, patients still face an overmedicalized and underspiritualized death.

Dying is hard. What can we do to make it easier? What are the next steps, practically, for us to take? Could we ever look forward to Death?

This session will be lead by Dr. Victoria Sweet [author of *God's Hotel*; professor of medicine and history at UCSF] and Dr. Grace Dammann, [subject of the just-released documentary on her own life-threatening car accident, *States of Grace*; long-time AIDS physician, Zen Buddhist].

### **Presenters:**

- Victoria Sweet, MD; *Associate Professor, UCSF*
  - Grace Dammann, MD; *Medical Director, Pain Clinic, Laguna Honda Hospital, San Francisco*
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# Sponsors



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Care and Choice at the End of Life



We would like to thank the following organizations for their generous support in the *2015 Lown Institute Conference Road to RightCare: Engage, Organize, Transform.*

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## **Silver**

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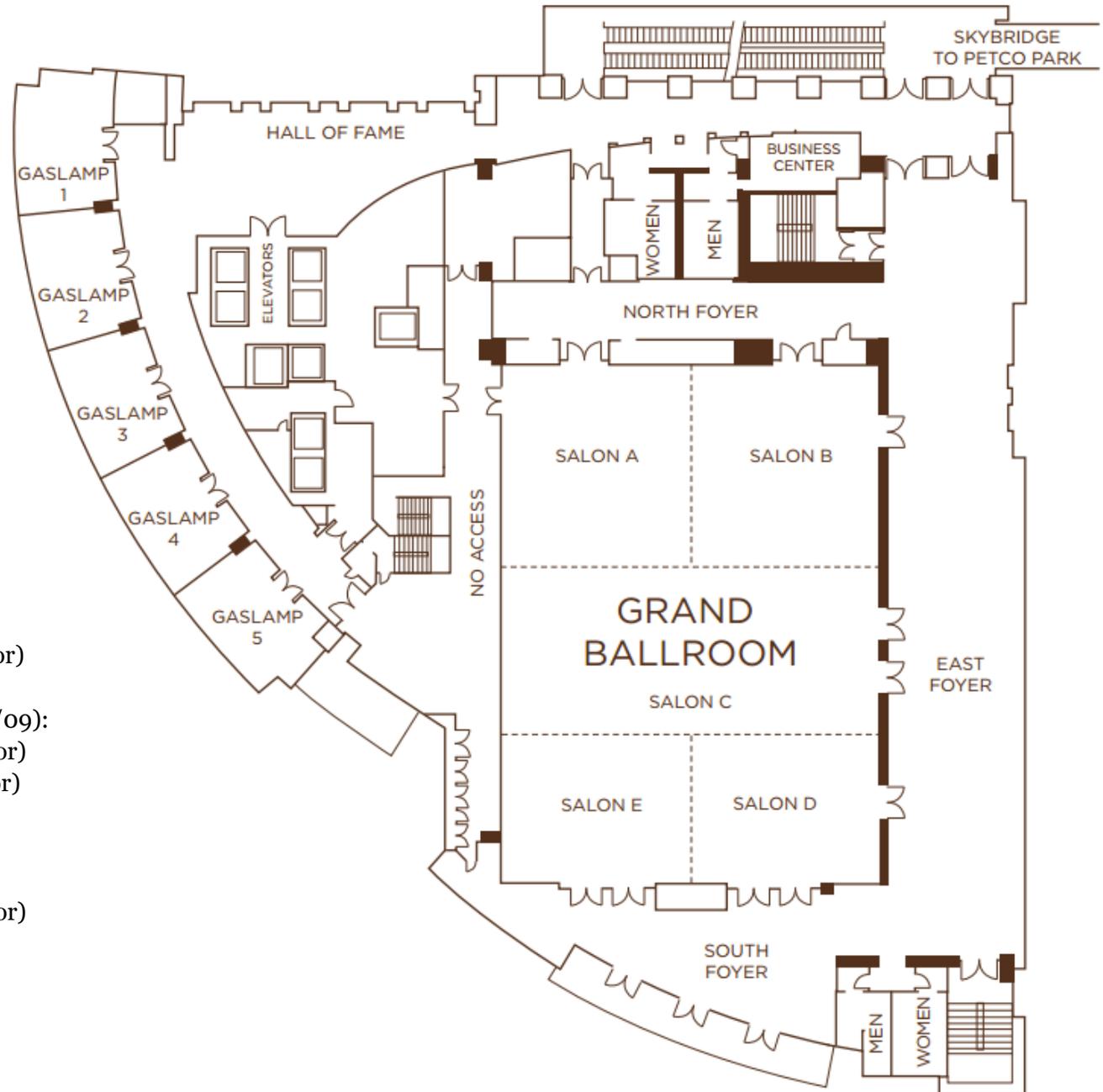
## **Bronze**

Compassion & Choices

Campaign to End Wanted Medical Treatment

# Conference Map

*San Diego 4th Floor*



## LOCATIONS

Registration, Breaks, & Receptions:  
Grand Ballroom Foyer (4<sup>th</sup> Floor)

Plenary Sessions:  
Grand Ballroom, Salon A-C (4<sup>th</sup> Floor)

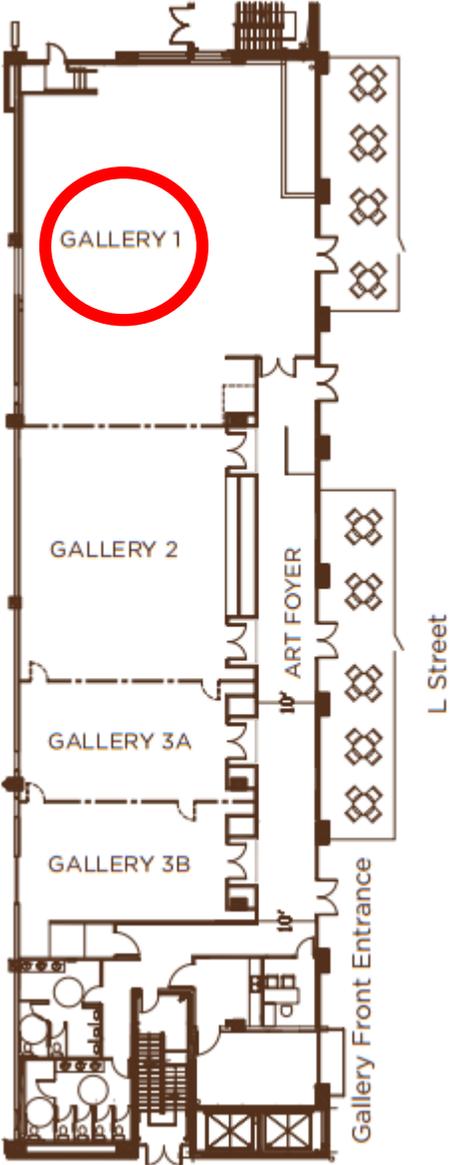
Breakfast & Lunch (except Lunch 3/09):  
Grand Ballroom, Salon D-E (4<sup>th</sup> Floor)  
Lunch 3/09: Gallery 1 (Ground Floor)

Workshops (3/10):  
Gaslamp 1-5 (4<sup>th</sup> Floor)  
Grand Ballroom, Salon D-E (4<sup>th</sup> Floor)

Yoga (3/10):  
Balboa 1 (5<sup>th</sup> Floor)

# Conference Map

San Diego Ground Floor



San Diego 5th Floor



## **Social Media**

We're building a movement to transform healthcare, and it's crucial we amplify the messages and ideas coming out of this conference. It's up to all of us to be the messengers. We encourage all of the attendees to be vocal and active on social media during the conference, and please include the hashtag #Lown2015

## **Continuing Medical Education**

This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council on Continuing Medical Education (ACCME) through the joint providership of the California Medical Association/Institute for Medical Quality and the Lown Institute. The California Medical Association/Institute for Medical Quality is accredited by the ACCME to provide continuing medical education for physicians.

The California Medical Association/Institute for Medical Quality designates this live activity for a maximum of 12 AMA PRA Category 1 Credit(s)<sup>TM</sup>. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

## **Continuing Education for Nurses**

The California Medical Association/Institute for Medical Quality is recognized as a Continuing Education Provider by the California Board of Registered Nursing (Provider #370) and approves this activity for 12.0 Continuing Education Credits.

## **CME Activity Planner Disclosures:**

Shannon Brownlee, MS, was a shareholder of United Therapeutics within the last 12 months. She has divested of all of her shares.

Vikas Saini, MD, is a shareholder of Resverlogix. He is divesting of all of his shares. We have reviewed that relationship, and found that it is not relevant to the content of this CME activity.