

SAC Medical Use Working Group

Minutes of Meeting

January 15, 2003

Present at the meeting:

Dr. Peter Braun, Mary McCann, Lauren Scotti, Nancy C. Occhialini, Christina Pagonis, Joseph Carabello,
Dr. Rob Schreiber, Alan McClennen, Dr. Bob Carey, Lynn Lowenstein, Dr. Jerry Slate,
Dr. Patricia Worden, Dr. John Berkoben

- The meeting was called to order by Dr. Bob Carey at 7:05 PM. The minutes of the November 20 meeting were approved.
- A Wellness and Community Health Center were discussed for the Symmes site.
- Two representatives from New England Rehabilitation Hospital outlined the scope of their activities. First, Lauren Scotti described outpatient services throughout the Commonwealth of Massachusetts and their presence at Symmes in the older part of the hospital campus at first and more recently in 5,000 feet of the North Building. She also described Health South's wellness centers at Dartmouth and that associated with Beverly Hospital. She mentioned desirability of community-based alternative medicine – acupuncture, use of exercise, pools, etc., services for victims of osteoporosis, cardiopulmonary disorders, etc. The center at Dartmouth is not only for preventive treatment but crosses over into therapy. Most of their services are fee-for-service rather than insurance reimbursement. The guidelines are usually set by the community. Public relations devices such as newsletters are sometimes used. Second, Mary McCann, a resident of Arlington and a former ICU and emergency room nurse at Symmes is interested in promotion of wellness not just for the elderly. She has a maintenance program - fee-for-service in which some patients have been coming for more than fifteen years. She has both cardiac and pulmonary patients.
- In response to Dr. Slate's question about how criteria for these services and centers were developed it was emphasized that these criteria depend on the community being served. Also, in the North Shore an existing building was used, whereas In Dartmouth Health South built the building.
- Dr. Braun asked if the fees sustain the centers. The answer was - Yes,

because the staff involved is not exclusively dedicated to provision of the fee-for-service rehabilitation patients but have multiple responsibilities and the profitability is based on volume. Figures mentioned were 12,000 sq. feet at 10 groups per day with 6 – 10 patients per group, 6 days per week

- Dr. Braun asked if there are sources of competition in the area other than the New England Baptist facility in Waltham. The response was that some competition would exist in the Marino Center in Cambridge.
- Dr. Rob Schreiber of the Lahey Clinic Geriatric Wellness Program then made a presentation. He described the wellness concept based on the work being done at the University of Washington in Seattle. This Seattle group has already published findings from a randomized study of their geriatric wellness initiative. This initiative is tripartite involving geriatric assessment, an exercise program and a course and education about any pertinent chronic disease. Empowerment of the patient for control of progress is achieved. Volunteers are very important to the program but are easily recruited once the program gets going. Programs involving these concepts can be run at very low cost and do not have demanding building needs. They would be ideal for Arlington where there are high concentrations of elderly at various locations. Good curriculum, improved nutrition, and physical activity are keystones of the program. There is no such program on the East coast. There is one in Virginia and one in Michigan. Robert Wood Johnson, the National Council on Aging, and the Center for Medicare, Medicaid Services are interested in the program. Dr. Schreiber mentioned that this is not a complex or difficult program – it needs space and ownership but otherwise essentially sells itself.
- Dr. Slate asked how one would generate the overhead for this. Dr. Schreiber answered that the nurses are provided by the hospital and that caregivers should be included in the courses. Volunteers are important. Dr. Slate pointed out that since insurance companies would certainly be one of the major beneficiaries of such a program that they would likely be interested in supporting it. Dr. Schreiber said that this is certainly so and in fact Harvard Pilgrim did give a grant to the program.
- Dr. Braun observed that the results from the published Washington study,

together with the significance of the program for insurance costs (third party payers would benefit significantly) should be combined with facts on the need for personnel to supervise the program, need for heat, light, etc. to compose a proposal for the program. Dr. Schreiber agreed that the leadership of the Town is needed, goods and purposes need a clear statement and one or two people with infectious enthusiasm are needed. The program would fit in well with Health South services, Town infrastructure, and with localized elderly populations in Arlington

- Dr. Carey observed that the North Building and the East Wing are free of asbestos and so in their present state would provide 90,000 sq. feet of inexpensive flexible facilities for medical and geriatric programs without any need for demolition and new construction. A number of groups have expressed interest in the space including Visiting Nurses, Lahey, Alternative Medicine providers etc. However, the Town of Arlington's Planning Director, Mr. Alan McClennen informs us that he told them "...there is no space..."
- A MOTION WAS MADE, SECONDED, AND APPROVED THAT DR. BOB CAREY SHOULD APPOINT A COMMITTEE TO DEVELOP A PROPOSAL FOR A WELLNESS/MEDICAL/HEALTH CENTER IN THE EXISTING NORTH AND EAST BUILDINGS OF THE SYMMES CAMPUS. SUCH PROPOSAL TO BE PRESENTED TO THE BOARD OF SELECTMEN AND THE SYMMES ADVISORY COMMITTEE.
- Dr. Carey then appointed the committee and it was stated that an initial draft of the proposal would be prepared by Dr. Carey ASAP and emailed to committee members for further input.

A motion was made to adjourn the meeting at 9:00 PM and unanimously approved.

Respectfully submitted
Patricia Worden, Ph.D.