

Citizen Congress takes shape

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Background

In response to rapidly growing concerns on many fronts with health care among Wisconsin citizens and physicians, the Wisconsin Medical Society commissioned a Task Force on Professionalism in July 2001. The task force's report was accepted by the Society's Board of Directors in July 2002 and the House of Delegates in April 2003 with a direction to proceed with several proposed actions, and specifically, the proposed "Citizen Congress."

The strength of the report grew out of the diverse medical and surgical practice expertise of the task force members. Very early, the task force affirmed the fundamental moral principle of professionalism, i.e., the primacy of patient welfare, but it also became clear that the concerted voices of citizens/patients were virtually missing in the developing conversations on health care reform. The task force anticipated many benefits from clear citizen voices on health care and citizen-physician dialogue: Physicians would benefit from a thorough understanding of how their behavior affects the quality of health care and what qualities in health services citizens find most effective and satisfying. Citizens would benefit from a thorough understanding of how

their behavior affects the quality of health care, and what qualities in health services physicians find most effective and satisfying. We anticipated that in dialogue, citizens and physicians would 1) deepen a critical empathy for each other's experience in contemporary health care; 2) discover strongly overlapping interests, i.e., that they appreciated virtually the same characteristics in health services; and 3) that in sharing an agenda for health care reform in Wisconsin, their political effectiveness would become much greater.

The Congress

With these desired outcomes in mind, the Congress has taken shape. Scheduled for November 14-16 in the Wisconsin Dells, it will bring together 24 physicians and 24 citizens from across the state. Selection of participants is underway, and the planning committee is currently seeking nominations for both physicians and citizens to serve as delegates. Our goal is to invite as representative a group of Wisconsin citizens and physicians as possible, and we believe that our Society's regional staff, county medical society leaders, and local civic leaders must play a strong role in this process so as to utilize local knowledge of delegate candidates and to promote wide-as-possible

ownership of the Congress. Society and community leaders are not specifically being sought as delegates (they are also not disqualified), rather we ask the leaders to nominate community physicians and citizens who have important experience, but who have not had much opportunity to share that experience with their hopes and dreams for better health care.

Demography experts at the University of Wisconsin advise us that such a small group (50) cannot depend on random sampling for adequacy, and therefore, we must be selective, aiming to have adequate representation of all interested regions and population subgroups. This will require "oversampling" of ethnic minority citizen and physician groups so as to offer them an adequate "voice." Consideration will also be given to adequate representation from the smaller clinical specialty groups of physicians.

Effective Congress participants must be assertive but not aggressive, neither dominating nor timid, and articulate enough to be understood without major group effort. Education seems irrelevant. They must be able to report on a sufficient experience with health care, either as a patient, or patient advocate (e.g., close family member), or both. Most will have significant experience with chronic

Citizen Congress At-A-Glance

When: Friday, November 14, at 6 p.m. dinner to Sunday, November 16, noon lunch

Where: Chula Vista Resort in Wisconsin Dells

Cost: Delegates will be asked to contribute only their time, energy, and ideas. An unrestricted educational grant from PIC Wisconsin with additional support from the Wisconsin Medical Society and County Medical Societies will cover delegate travel, hotel, and meal expenses.

Note: Delegates may bring family members. However, delegates will be in sessions throughout the weekend.

To nominate a physician or citizen delegate, please contact your county medical society or Wisconsin Medical Society staff person Susan Wiegmann, PhD, at 866.442.3800 extension 3754.

illness, acute illness or injury, medical care, surgical care, and rehabilitation. There should be parents with dependent children and children with dependent parents.

We believe delegate selection is one of the critical aspects of the Congress and considerable expertise, care, time and effort are going into this activity. All physician and citizen nominees must submit an application to the planning committee.

A congress depends on effective and efficient conversation among all delegates. This Congress will employ a “dialogue” model in which topical expertise is located in the experience of the participants with the goal of thorough understanding and appreciation of reported experience—one’s own and that of others. Consensus is not an explicit goal, yet it often results.

The Congress dialogue will incorporate several conversational groupings including one-to-one interviews, small groups, fishbowls, and large groups. Citizens and physicians will share experi-

ence within and between groups. An overarching discipline will be “appreciative inquiry,” a continual seeking of deep understanding of the best in human experience and ways to turn the best into the usual experience. Specific sessions of the Congress will focus on “discovering the best in health care,” “dreaming for the future of health care,” and “together, what changes might we achieve.”

Society staff and leaders will be present to observe and to create an accurate record of the results. This record will be made into a report, validated by the delegates, and published in *WMJ*.

As the time for the Congress nears, the Task Force is very excited at the prospect of initiating this most innovative and unique opportunity and strongly encourages and needs the active input of county medical societies to provide names of potential participants—both physicians and citizens—from which a final group will be selected. Every effort is being made to assure balance and that a multitude of voices will enter the dialogue with the hope

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that at the conclusion, the Wisconsin Medical Society and its physician members, the patients, and the state of Wisconsin, will have a platform from which to build improved medical care.

In closing, on behalf of the Task Force on Professionalism, a special thanks and acknowledgment of Society staff is in order. Their continued and outstanding support of the Task Force from its inception through the present Congress has been key to the success to date. They include Merry Earll, Cindy Helstad, PhD, RN, Kendi Parvin, Linda Syth, and Susan Wiegmann, PhD.

Reference

1. Wisconsin Medical Society Task Force on Professionalism. Task Force on Professionalism Report to the Wisconsin Medical Society Board of Directors. July, 2002.



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