



Novel Staffing for Improved Patient Disease Management

Ann Fam Med 2007;5:iii. DOI: 10.1370/afm.773.

The *Annals of Family Medicine* encourages readers to develop the learning community of those seeking to improve health care and health through enhanced primary care. You can participate by conducting a RADICAL journal club and sharing the results of your discussions in the *Annals* online discussion for the featured articles. RADICAL is an acronym for Read, Ask, Discuss, Inquire, Collaborate, Act, and Learn. The word radical also indicates the need to engage diverse participants in thinking critically about important issues affecting primary care and then acting on those discussions.¹

HOW IT WORKS

In each issue, the *Annals* selects an article or articles and provides discussion tips and questions. We encourage you to take a RADICAL approach to these materials and to post a summary of your conversation in our online discussion. (Open the article online and click on "TRACK Comments: Submit a response.") You can find discussion questions and more information online at: <http://www.AnnFamMed.org/AJC/>.



CURRENT SELECTIONS

Articles for Discussion

Bodenheimer T, Laing BY. The teamlet model of primary care. *Ann Fam Med*. 2007;5(5):457-461. <http://annfammed.org/cgi/content/full/5/5/457>.

Zweifler J. The missing link: improving quality with a chronic disease management intervention for the primary care office. *Ann Fam Med*. 2007;5(5):453-456. <http://annfammed.org/cgi/content/full/5/5/453>.

Discussion Tips

Consider these articles in the context of your own practice, of calls for practice reform, and of calls for payment reform. Because these are essays rather than research articles, it is not easy to critique the methods. It is important, however, to consider the logic of their arguments and the degree to which they are grounded in both current reality and future possibility.

Discussion Questions

- What are the questions addressed by these essays? Why do the questions matter?
- What changes do each propose?
- How might these changes be feasibly implemented in your practice?
- What would be the intended consequences of these changes in practice organization?
- What are the potential unintended consequences?
- What health care system changes would be needed to enable these changes?
- How could patients be engaged?
- What other changes do these proposals stimulate you to envision?
- How do these ideas relate to the Future of Family Medicine² proposal for a New Model practice³?
- How do they relate to the idea of the Patient-Centered Medical Home recently endorsed by 4 professional organizations?⁴
- Do such initiatives as the TransforMED National Demonstration Project and Preparing the Personal Physician for Practice (P⁴)⁵ or the Prescription for Health⁶ project make such changes seem more feasible?

References

1. Stange KC, Miller WL, McLellan LA, et al. *Annals Journal Club: it's time to get RADICAL*. *Ann Fam Med*. 2006;4(3):196-197. <http://annfammed.org/cgi/content/full/4/3/196>.
2. Martin JC, Avant RF, Bowman MA, et al. The future of family medicine: a collaborative project of the family medicine community. *Ann Fam Med*. 2004;2(Suppl 1):S3-S32.
3. Task Force 1 Writing Group, Green A, Graham R, et al. Task Force 1. Report of the Task Force on Patient Expectations, Core Values, Reintegration, and the New Model of family medicine. *Ann Fam Med*. 2004;2(Suppl 1):S33-S50.
4. American Academy of Family Physicians (AAFP), American Academy of Pediatrics (AAP), American College of Physicians (ACP), American Osteopathic Association (AOA). Joint Principles of the Patient-Centered Medical Home. March, 2007. <http://www.medicalhomeinfo.org/Joint%20Statement.pdf>. Accessed August 30, 2007.
5. TransforMED. <http://www.transformed.com/>. Accessed August 30, 2007.
6. Prescription for Health. <http://www.prescriptionforhealth.org/>. Accessed August 30, 2007.