



2017 LOWN CONFERENCE REPORT

May 5-7, 2017
Boston Marriott Quincy

SUMMARY

On May 5-7, 2017, more than 270 clinicians, patients, health professionals, and others gathered in Boston, MA for the 5th Annual Lown Institute Conference. Attendees spent three days absorbing research, learning new skills, and engaging in strategic organizing around right care.

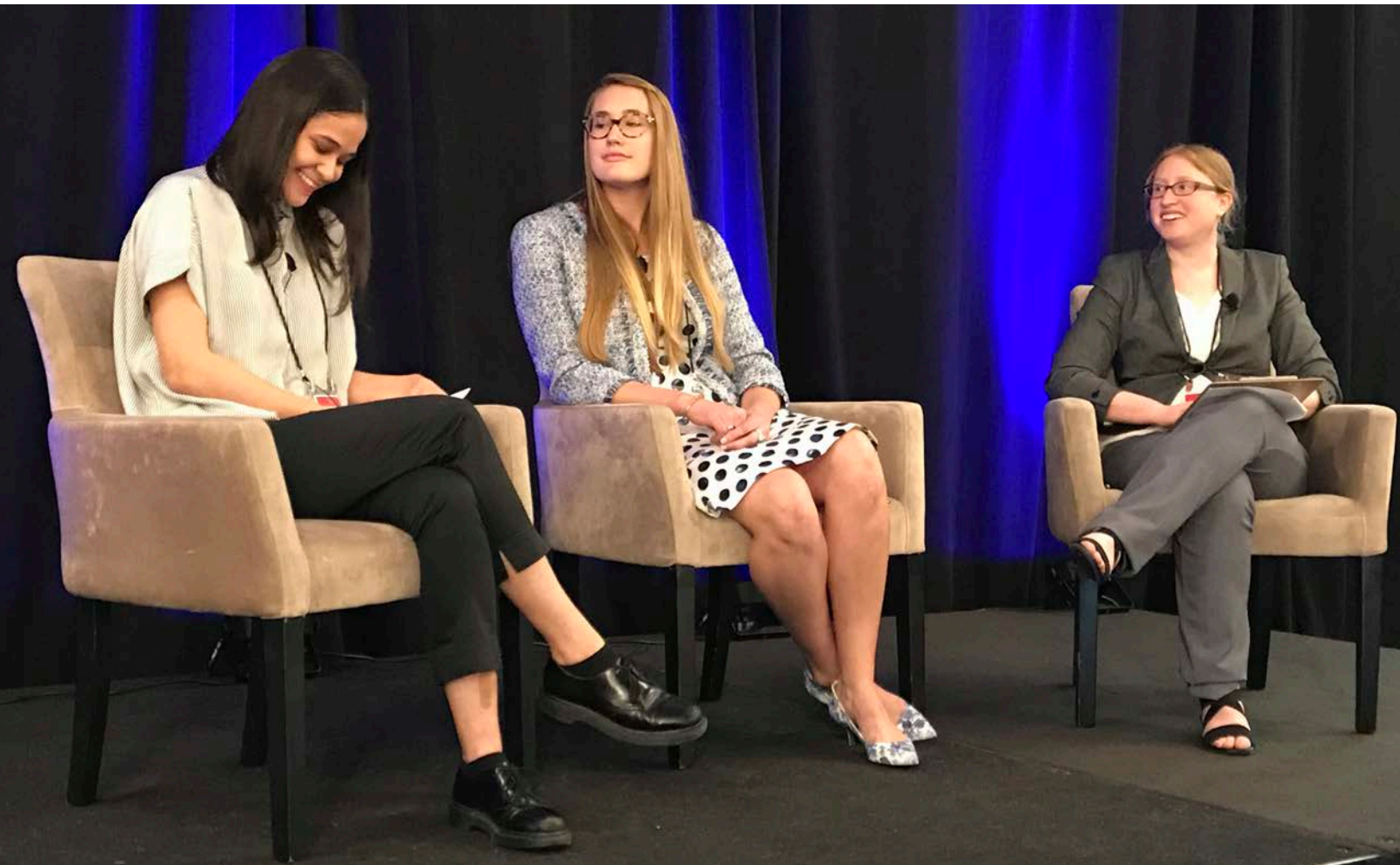
They heard keynotes from former Denver Health CEO **Patty Gabow**, world-renown economist **Jeffrey Sachs**, physician and activist **Charles van der Horst**, and author **Elisabeth Rosenthal**.

They attended workshops on health care activism, evaluating medical evidence, and design thinking in medicine. They engaged with panels of researchers, students, and experts on corruption in health care. And even more importantly, they engaged with each other, making connections across professional and regional boundaries.

This year's conference featured several landmarks for the **Right Care Alliance (RCA)** – the first all-day Congress of the RCA, inauguration of the RCA Steering Committee, discussion of the RCA Councils' Right Care lists of do's and don'ts, and the first RCA Awards.

For many attendees, the conference also provided a welcome opportunity to meet and network with like-minded clinicians, patients and activists. About half of the respondents to the post-conference questionnaire said that the **opportunity to meet new people** who are engaged in transforming health care was one of top two favorite things about the conference.

Overall, we had very positive feedback on the conference; the vast majority of participants **(81%) were “very satisfied” or “satisfied”** with the meeting, according to the post-conference survey.





275
attendees

10+
sponsors

23
skills
workshops

5
media
features

3.5
MILLION
hashtag
impressions

41
scholarship
recipients

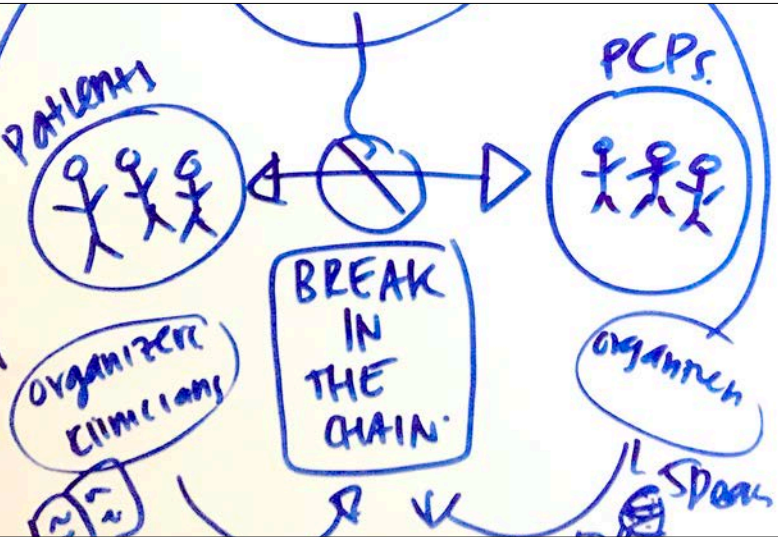
FUNDERS & PARTNERS

We are grateful for the continued support of our conference sponsors, including the **Robert Wood Johnson Foundation**, the **Gordon and Betty Moore Foundation**, **Kaiser Permanente**, the **Jewish Healthcare Foundation**, the **Grimshaw-Gudewicz Charitable Foundation**, the **California Health Care Foundation**, the **Gold Foundation**, and individual scholarship sponsors. In addition to financial sponsors, we partnered with **AcademyHealth** to promote the Research Symposium and **STAT News** as a media partner.

The conference **scholarships program** is an essential part of making the Lown Conference inclusive and diverse. This year for the first time, we conducted a scholarships campaign and raised over \$12,300. These funds enabled us to provide scholarships to more than 12 individuals, increasing our number of scholarships from 30 last year to 41 this year.

The conference earned **five media features**, and for the first time, we had Stat News as a media partner. Conference attendees tweeted up a storm: The #Lown2017 hashtag had **3.5 million impressions, reaching 650,000** people on Twitter.

RIGHT CARE DC STRATEGIZES INCLUSIVE SOLUTIONS



On Sunday of the Lown Conference, regional chapters came together to create possible campaigns for their chapter to implement. With step-by-step guidance from organizer **Stephanie Aines**, each group came up with new campaigns, some of which have since been implemented.

DOCTOR-PATIENT PARTNERSHIP BOOSTS HEALTH NETWORK

Michael Mascia, a Maine doctor and Right Care Alliance member, manages a nonprofit called **Veritas Health**, a group of doctors and patients who are working to improve health care through mutual education and support. Together, they develop new tools for better communication between patients and providers, help patients and doctors create local co-ops, and brainstorm solutions for increasing transparency in health care.

At the Lown Conference, Mascia met **John James**, a patient advocate from Texas, and realized they could be a great asset to each other. James has

For **Right Care DC**, their strategy session began with the idea of making sure hospitalists notified primary care providers when their patients ended up in the hospital. This simple step could go far in improving care coordination and patient safety – for example, if the PCP knows more information about the patient, they might know if a certain treatment is unnecessary or potentially harmful for them. The RC DC group called their campaign “Sick in, Safe out.”

However, after more discussion, Right Care DC decided to reevaluate their strategy to better address community issues and social determinants of health. One campaign they are considering is working with hospitals to pool their resources allocated for “community benefits” so these (usually nominal) benefits can actually have an impact. A possible use for these funds could be food for children at public schools, a program shown to improve health and educational outcomes that is endangered in the current political climate.



since been active in Veritas Health discussions of patient engagement, transparency, and alternative insurance models. Currently, James and Mascia are working on a letter expressing patient rights in the face of elective surgery. Their goal is to make sure patients are fully engaged and informed, for truly shared decision making.



PATTY GABOW

"Our health care system can't deliver health."



FRIDAY: RESEARCH DAY

On Friday May 5, researchers from across the country presented **45 abstracts and eight oral presentations** on causes of and interventions for medical overuse. Attendance at the research symposium grew by 31% from last year. The research spanned a wide variety of topics on overuse, from polypharmacy, to unnecessary quality measures, to communication barriers, to clinician burnout. Awards were presented for Best Abstract, Best Student Abstract, and Audience Choice Best Abstracts.

The first conference day also featured a keynote address from world-renown economist **Jeffrey Sachs** and a panel discussion on *The Lancet* Right Care Series. Sachs framed the dysfunctional health care system in economic terms, as inappropriate privatization. "The market is not the right way to think of public health," he said, "When health is commodified, people are excluded from life-saving care." In the afternoon, authors of *The Lancet* Right Care series discussed the interplay between overuse and underuse on the individual, institutional, and regional level.

COMMUNITY CAFÉ PROJECT REACHES NEW HEIGHTS AFTER LOWN CONFERENCE

Attending the Lown Conference enabled a group of health providers and day care workers in Camden, NJ to scale their community engagement project beyond what they thought possible.

“The conference was transformational for our Camden City group,” wrote Cogan.

Last fall, Camden, NJ school nurse Robin Cogan and two workers from Mi Casita day care center, Candida Rodriguez and Laura Jimenez, developed the Community Café initiative – a series of meetings with community members to discuss health care. These Cafes brought to light important barriers to health and empowered community members to take action on these issues. However, the project remained small, and Cogan was struggling with what to do next.

The Lown Conference provided new connections and ideas for Community Café to expand. Cogan, Rodriguez, and Jimenez were able to attend the conference with scholarships and presented their findings from the Cafes in a Research Day poster session and through a hands-on workshop. Cogan also connected with potential funders and collaborators, who are helping their team scale the Community Café project. One such contact, Beenish Chaudry, is a health technology researcher interested in community engagement, with whom Cogan is now working on a manuscript describing their findings from the Cafes, to be published in a nursing journal. Chaudry and Cogan are also working on a project to use technology to track day care attendance for parents of preschool children as an outcome measure for future Community Cafes.



However, the conference was not a one-way street - having the Camden City team there was extremely valuable to other attendees. Their workshop was one of few community-based approaches to right care, and attendees appreciated being able to look at right care on a local level. One attendee wrote, “Listening to the women speak so passionately about their community, the inhabitants and the work they have done, reminded me so much of the communities where I live. There is so much resilience despite so many of the “shortcomings” others see when they come to those areas.”

And they were not afraid to get involved right away and speak up on behalf of community members. In a follow-up meeting, Rodriguez expressed disappointment that the Right Care top lists of do’s and don’ts did not adequately include the community engagement perspective. She joined the next call for the Community Engagement council and has since expressed interest in taking a larger leadership role on the council.



SATURDAY: KEYNOTES, PLENARY, & WORKSHOPS

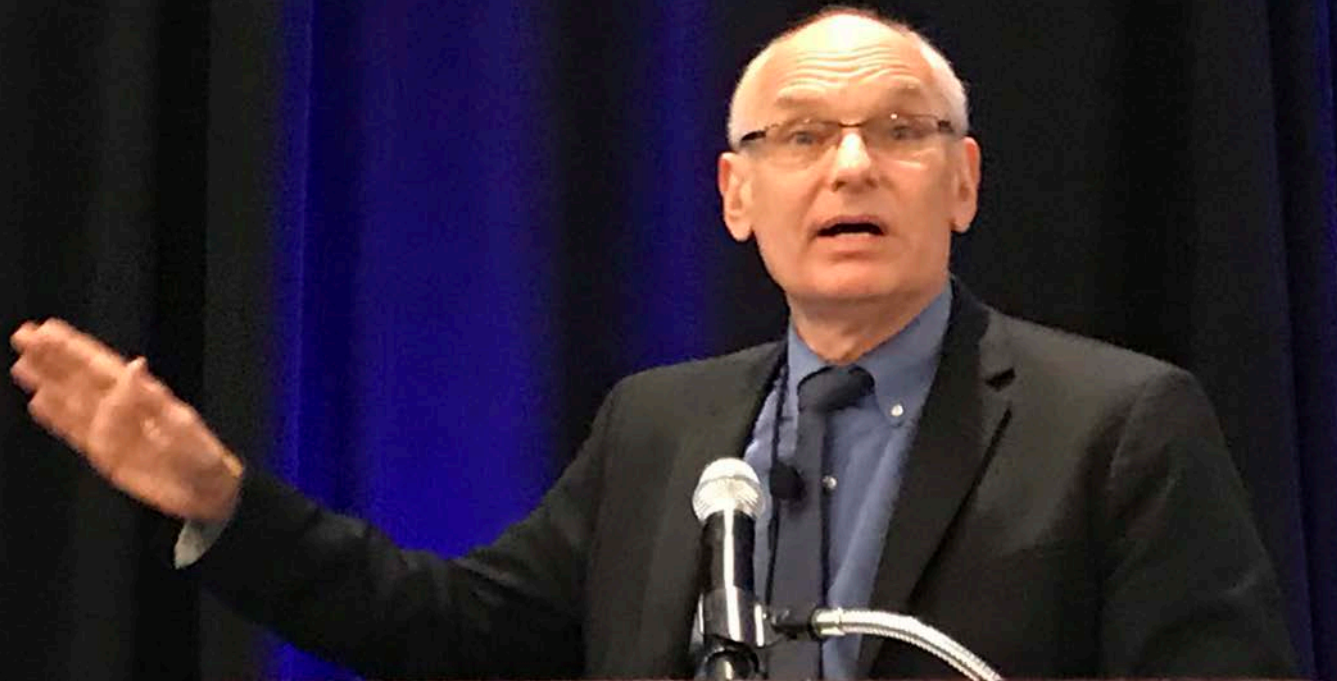
The second day of the conference was packed with keynotes, workshops, and panels. Former Denver Health CEO **Patty Gabow** started the day with the surprising question, “Can our health care system deliver health?” She answered this question in the negative, explaining that for real improvement in health outcomes we need to fix larger social problems such as income inequality and food insecurity. Her talk was well received by attendees; a majority of survey respondents listed it as a highlight of the conference. Following Gabow, there was a Q&A with **Ralph Weiss**, a patient who suffered harm from his surgeon’s conflicts of interest, and a panel of journalists and academics who discussed systemic corruption in health care.



SATURDAY: (CONTINUED)

Attendees spent the rest of the morning and early afternoon in over **23 workshops**, with topics ranging from creating a culture of advocacy in medical education, and tools for evaluating clinical evidence and trials, to patient engagement to health journalism. **Gary Schwitzer** and **Susan Molchan**'s workshop on Slow Journalism was a hit among attendees. The "What Worries You Most" workshop led by **Maia Dorsett** was another highlight. Several attendees indicated that they wanted to bring this activity to their institution, one writing, "This would be an excellent means to establish the patient's concern as the primary focus of the visit at one of my practice sites."

Former *New York Times* journalist and author **Elisabeth Rosenthal** discussed the problems she uncovered in the health care system doing research for her book, and why patients should take a stand on fair and transparent pricing. "If Memorial Sloan Kettering had to write on the walls that they charged \$11,000 for a screening colonoscopy they wouldn't do it!" she said. Next, two student leaders for right care talked about how they became passionate about activism and what keeps them going on tough days. To close out the day, HIV researcher and health care activist **Charles van der Horst** gave an informative and impassioned speech on why clinicians should also be advocates. "It's not enough just to click the 'Like' button!" he said.



CHARLES VAN DER HORST

"It's not enough to just click the 'Like' button!"



SUNDAY: THE CONGRESS OF THE RIGHT CARE ALLIANCE

For the first time, an entire day of the conference was devoted to the Right Care Alliance. This gave RCA members the opportunity to convene in **council breakouts**, share the progress the councils and emerging chapters have made over the year, strategize with their **regional chapters**, and get to know one another all together. It was also a perfect place for people new to the Right Care Alliance to learn about the movement and start to get involved.

A highlight of the day was the **strategizing session**, in which attendees brainstormed potential campaigns for their region or chapter. The 20 campaigns included education programs for patients, an initiative to coordinate care between hospitalists and primary care providers, and using civil disobedience to push for more resources for mental health care. One attendee wrote about this session in the post-conference survey, "People are amazingly creative and diverse in their thinking when asked to come up with community action supporting right care." Not only were the resulting campaigns impactful and imaginative, they were also feasible. Several RCA members indicated in their post-conference survey that they were currently implementing or planning for these campaigns.