



# cahaba

MEDICAL CARE

2015 ANNUAL REPORT

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# Rising To meet the needs of our our community

## WHO WE ARE

Cahaba Medical Care is a Community Health Center (FQHC) and a National Committee for Quality Assurance (NCQA) and Joint Commission (JCAHO) Patient-centered Medical Home (PCMH) with our sites in central Alabama, serving Bibb, Perry, Chilton, Dallas, Autauga, and Jefferson Counties. Our health centers provide comprehensive primary care services including treatment and management of chronic diseases, pediatric care, women's health services, dermatological services, sports medicine services, mental healthcare and more.

Additionally, we have the technology and staff to perform on-site procedures including x-ray, laboratory tests, ultrasound, echocardiograms, women's health procedures, prenatal care with local delivery and so much more. We currently have 25 primary healthcare providers, three social workers, and a team of nurses and medical assistants whose job is to assist our patients in becoming healthier individuals.

## SERVING THE UNDERINSURED & UNINSURED

Cahaba Medical Care provides high-quality health services regardless of a patient's ability to pay. We offer a discounted, sliding fee schedule based on income and family size. While this has been the mission of the clinic since its founding, these services have only grown through our designation as a non-profit, Federally Qualified Health Center (FQHC). This designation carries with it grant funding (and accountability) that allows us to enhance our services to those without insurance and to those facing hardship - whether medical, social, financial, or emotional.

## WHAT IS A FEDERALLY-QUALIFIED HEALTH CENTER?

The purpose of an FQHC is to enhance the primary care services in underserved communities, in particular for the underinsured and uninsured. FQHCs operate under the supervision of the Health Resources and Services Administration (HRSA) and play a crucial role in the health of our entire country. In 2014, in the state of Alabama there were 15 FQHCs that served 339,389 patients.

To qualify as an FQHC, an organization must meet and maintain certain criteria as mandated by the federal government including but not limited to:

- Serve an underserved area or population as defined by HRSA.
- Provide services to everyone regardless of ability to pay.
- Offer a discounted sliding fee schedule for charges based on income and family size.
- Provide comprehensive services including primary care and have onsite or an arrangement with another provider for dental, mental health and substance abuse services.
- Be a non-profit organization, and operate under the governance of a community led board of directors, 51% of whom are patients of the clinic.



*“Don’t ask yourself what the world needs. Ask yourself what makes you come alive, and go do that, because what the world needs is people who have come alive.”*  
**- Howard Thurman**



## CHIEF EXECUTIVE OFFICER //// DR. JOHN WAITS

What the world needs is people who have come alive.

I remember the first time I read this quote. I was in residency in Tulsa, OK. And this idea changed the way I perceived my life and my profession.

Not that things are always perfect or that everyday is happy and joyful. Notice, that is not what this says. But that there is a dramatic change in a life that is lived doing what you were created to do. It is when you find your calling and live within that, despite adversity, despite failures, despite setbacks, that you “come alive.” And it is people that come alive that can create change.

I am blessed to work everyday with people who have come alive. Providers who don’t just talk about rural medicine but who live it - the good, the sad, and the messy - everyday. Who are actually doing what we talk about in our medical school interviews - helping those that are truly in need. Providers who have chosen a career that serves “the least of these.” I am blessed to work with support staff - nurses, medical assistants, receptionists, billers, and others - that work diligently and faithfully and creatively to help us take care of the vast needs of our patients. No, not every day is perfect. Far from it. But it has been life-changing for me to work in an environment where I feel like I have come alive, and am doing work to make life for my neighbors a little bit better each day.

Our past year has seen enormous growth and the realization of many dreams.

And not just Cahaba Medical Care’s dreams but also the dreams of so many community partners. For instance, when Bibb Medical Center set out to build their new outpatient clinic in 1950s, Dr. William Owings, a rural physician who spent a career caring for Bibb County residents, helped draw up the plans envisioning one day that it would house its own Family Medicine residency. This came to fruition in 2013 when Cahaba Family Medicine Residency was founded utilizing Teaching Health Center funding and its coalition of community partners from Bibb Medical Center to Dr. John Meigs and Dr. Lata Patil, two other physicians who have lived a career dedicated to rural medicine.

In November, Bibb Medical Center and Cahaba Medical Care in a joint partnership, reopened Labor and Delivery after its closure over 20 years ago. This was the first rural Labor and Delivery to reopen in the state of Alabama in over 40 years and was the realization of the dream of this community to once again offer full-spectrum care to the women and children who live and work here.

The thing is, as you see dreams coming true, you become emboldened to dream new dreams, because you never know what you can accomplish when you have “come alive” and work amongst a community of people who have “come alive.”

From the mouth of one of my adult heroes, Steve Jobs, “The people who are crazy enough to think they can change the world are the ones who do.”

As we get ready this year to graduate our first full class of residents... and as we set out on a new year to see what other dreams we can reach and what other obstacles we can topple, I hope our graduating residents - along with having learned a lot of medicine - have learned the importance of perseverance and the importance of finding a place to serve that makes you feel like you have come alive. Because when you find that place... when you find your calling... things may not always be easy, but you will stay the course because you truly can't imagine doing anything else. And though failures might come, you will keep working to meet that next goal and realize that next dream. My childhood hero was Michael Jordan, the sports icon and epitome of someone who persevered and reaped the benefits of his hard work. But for all of his success, he spoke a lot about failure, including this quote. "I can accept failure, everyone fails at something. But I can't accept not trying."

The year of 2016 will show us trying. Trying to change our world of Bibb County. And trying to change the lives of our neighbors for the better. And trying to inspire our residents and medical students to do the same. We might face failures. But the collective we of Cahaba Medical Care will continue to try. Try to be a better clinic. Try to dream new dreams and accomplish old dreams. Try to love and serve our neighbors.

Let us be found courageous. Let us be found trying. And let us all go do what makes us come alive.



*"Whatever course you decide upon, there is always someone to tell you that you are wrong. There are always difficulties arising which tempt you to believe that your critics are right. To map out a course of action and follow it to an end requires courage."*

**- Ralph Waldo Emerson**



# CAHABA FACTS



**Cahaba**  
Medical Care

## RESIDENCY PROGRAM

**1st**

*Alabama's First & Only  
Teaching Health Center*

**11**

*Family Medicine  
Residents*

## STAFF GROWTH

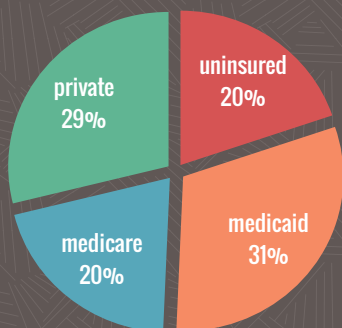


## ECONOMIC IMPACT

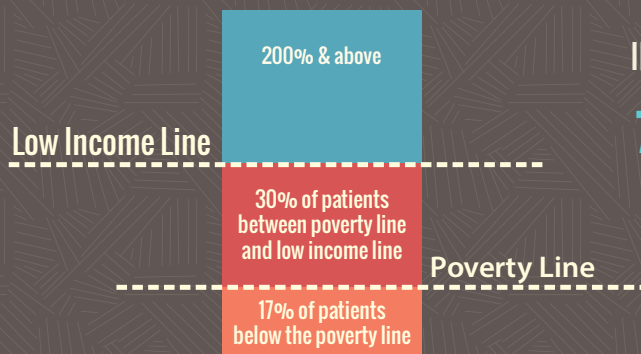
IN EXCESS OF  
**\$4,000,000**  
IN PAYROLL & BENEFITS

**78 JOBS ADDED**  
IN A TOWN OF 5000

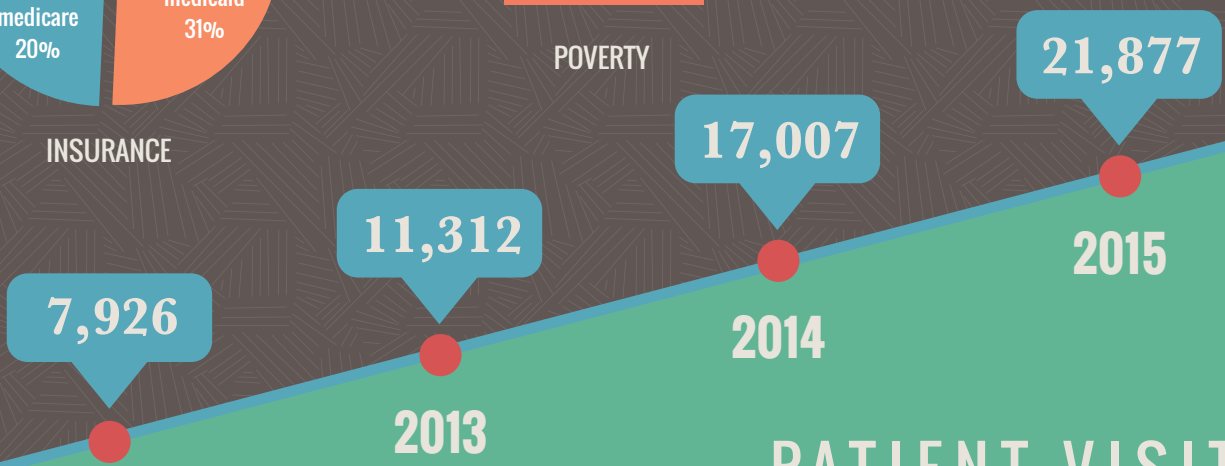
## PATIENTS



INSURANCE



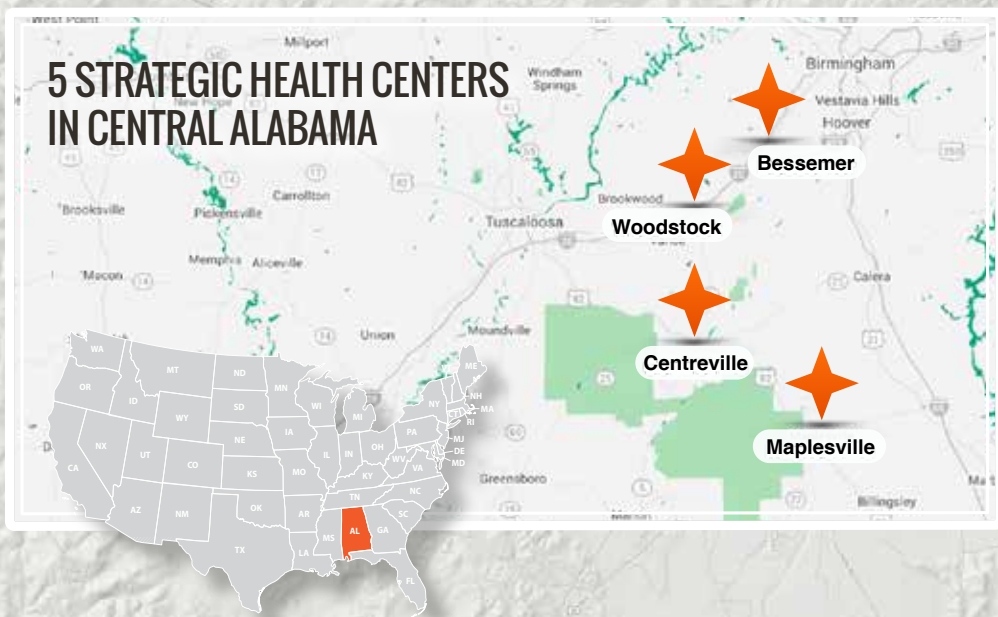
POVERTY



## PATIENT VISITS

2015 UDS REPORT

# SERVICES



## Preventative Health Services

- Pap Smears
- DEXA Scans
- Mammograms
- Colonoscopy
- Adult Immunizations

## Chronic Disease Management

- Diabetes
- High Blood Pressure
- High Cholesterol
- Heart Disease

## Pediatric Care

- Well Child Checkups
- Immunizations
- Sick Visits
- Circumcision

## Women's Health Services

- Obstetrics
- Prenatal Care and Ultrasound
- Birth Control
- Management of Abnormal Pap Smears
- Delivery at BMC and UAB medical West

## On-site Procedures

- X-ray
- Ultrasound
- Lab
- Fracture Care (casting and splinting)
- Joint Injections
- Pulmonary function tests
- 24 cardiac monitoring
- Cardiac Treadmill Testing

## Dermatology/Skin Care

Sports Physicals and Department of Transportation Physicals

## Mental Health Care

Nursing Home Care at Bibb Medical Center Nursing Home

Hospital Care at Bibb Medical Center and UAB Medical West

Serving the Bibb and Perry County communities since 2004, and added Chilton, Dallas, Autauga, and Jefferson Counties in 2015. Our mission is to provide high quality and compassionate primary and preventative healthcare for families in our area

- all ages, all conditions
- regardless of ability to pay
- regardless of insurance

## A MEDICALLY UNDERSERVED AREA IS A COMMUNITY WITH:

- Low Primary Care Physician to Population Ratio
- High Infant Mortality Rate
- High Percentage of Population Living Below Poverty Level
- High Percentage of Population over Age 65

# Clinical Update

*(Meet our new sites)*



The theme of 2015 for Cahaba Medical Care was growth. Growth not only in the number of new patients and number of employees but also in the number of clinical sites. First to join our organization was an existing Family Medicine practice: Woodstock Family Medicine, in north Bibb County, operated by Dr. Karen Ballard-Montgomery.

Karen Ballard-Montgomery completed her Family Medicine residency at the University of Alabama at Birmingham in 2000 and then completed a six month fellowship in obstetrics also at UAB. Following her residency graduation, Dr. Ballard-Montgomery worked for Bibb Medical Center at their Woodstock office until 2009. After a short stint at a clinic in Vance working for UAB Medical West, Dr. Ballard returned to Woodstock as owner of her own private practice from 2011-2014. During 2014, Dr. Ballard-Montgomery entered into conversations with Cahaba Medical Care to merge practices in order to allow for the growth as well as to allow for more time for her to practice medicine.

“Merging with Cahaba Medical Care has been one exciting change after another. It has given the Woodstock team the opportunity to upgrade a lot of our services and to offer several services such as the sliding fee scale that we had been hoping for but had not been able to offer in the past few years,” said Dr. Ballard.

Dr. Ballard continues to admit patients to Bibb Medical Center where she holds active medical staff privileges and assists with precepting residents and medical students on hospital rounds.

Since the merger of Woodstock Family Medicine (now, Cahaba Medical Care – Woodstock) with Cahaba Medical Care in January 2015, the clinic has grown from one provider and three employees to now two providers - Dr. Ballard and Suzanne Thompson, PA and six employees. And the clinic routinely sees around thirty new patients each month. In 2016, the Woodstock clinic is looking to renovate and expand, adding on additional exam room space as well as hire another advance practice provider to join Dr. Ballard in her care of the Woodstock / north Bibb County community.

“We are a work in progress and we have great patients that inspire us to do great things, so we keep trying. Our affiliation with Cahaba has allowed us to do all of this and more and though the growing pains continue – we realize that in many ways, we are stronger and better able to serve our patients to the best of our ability,” said Dr. Ballard.

*Patients are glad to know there's a new provider in Bessemer. Patients say that they're relieved to know there's a doctor near them who takes Medicaid. -- Stephanie Redick, Bessemer Receptionist*



In September 2015, Cahaba Medical Care opened its first urban clinic in Bessemer, Alabama (Jefferson County) with Dr. Lauren Linken serving as physician and Site Coordinator.

Dr. Linken graduated from UAB School of Medicine and then did her residency at Worcester Family Medicine Residency in Massachusetts. She then returned to Alabama following residency to complete her obstetrics fellowship at DCH Regional Medical Center in Tuscaloosa, Alabama. Following graduation, Dr. Linken joined Cahaba Medical Care in its efforts to expand its ministry to the urban underserved of Jefferson County. Since opening the clinic in Bessemer, Dr. Linken has successfully started a full-spectrum family medicine practice that includes women's health care and prenatal care. She then obtained obstetrics privileges at UAB Medical West where she performs caesarean sections and vaginal deliveries of her patients. She also has obstetrical privileges at Bibb Medical Center, for occasional cross-coverage with our doctors in Centreville. Dr. Linken is also actively involved in medical student and resident education leading the PGY-2 obstetric and women's health curriculum.

"I have really enjoyed joining the community of Bessemer over these past few months. I have definitely seen a need for compassionate, full-spectrum primary care for people of all ages and patients are very appreciative of the work we are doing. Our practice has continued to grow and we hope to be a blessing to everyone who walks through our door," said Dr. Linken.

In 2016, Bessemer is expected to grow exponentially in patient volume as it is currently one of only 3 Medicaid providers for Western Jefferson County accepting new patients. There are plans to add a full-time advanced practice provider as well as another full-time physician to the Bessemer office by the end of 2016.

Finally, in November 2015, Cahaba Medical Care opened another new clinic in Maplesville, Alabama (Chilton County), utilizing New Access Point funding from the Health Resources and Services Administration (HRSA). This endeavor was in partnership with Christy Hunter, CRNP, who currently lives in Maplesville and, noticing the need for primary care providers in the town, had been researching ways to start a new clinic of her own. Once her path crossed with CMC's, there was no looking back.

Christy is originally from Texas but moved to Alabama and studied nursing at Samford University and then worked for eleven years in the Emergency Department at Baptist Princeton in Birmingham, AL. Then in 1999, she returned to school at UAB to obtain her nurse practitioner certification. Since graduating she has worked in a variety of settings including primary care, hospitalist medicine, and in cardiology.

"I have a love and passion for the people in and around the community of Maplesville. They are hard working individuals who live far from some of the resources that are available in the bigger cities. My goal is to serve them by providing the best care possible that I am able to give, with the hope that we can improve their health in a holistic manner. Cahaba Medical Care has similar goals and resources available to allow for us to meet the needs of this community together," said Hunter.

The Maplesville clinical site is currently undergoing expanded construction with an expected final completion date of April 2016 but was operational to patient care in November 2015. Looking towards the upcoming year, it is expected to add a full-time physician as well as to begin providing prenatal care.

## NEW CLINICAL SITES



2015

**January**  
Woodstock  
Office



**September**  
Bessemer  
Office



**November**  
Maplesville  
Office



## MEET OUR FRONT OFFICE COORDINATOR Amanda Wiggins

In the eyes of many in Bibb County, Amanda Wiggins is Cahaba Medical Care.

Amanda began with the clinic only three months after it opened, in October 2004, and, except for a short stint in home health care in 2010, has been with the company every since.

And does she have stories to tell from 11 years of working for CMC.

“My 10 years here with Cahaba Medical Care has been a huge blessing in many ways. CMC is more than just a job to me, it is a part of who I am as a person and everyone here is just like family. Dr. Waits shared his dream of growing CMC from the beginning and I have always been on board. I am so proud to be part of the huge growth,” said Wiggins.

Throughout the last 11 years, Amanda has done almost every job in a primary care clinic including triage, nursing, reception, inventory and purchasing, phone calls, scheduling, vaccines, OSHA / HIPAA compliance, new staff orientation and training, the internal “party planning committee” for employee birthdays and other celebrations, and many other things.

Through it all, Amanda has worked hard to do her part in ensuring CMC provides excellent care to its patients. This has sometimes meant coming in on Saturday to do an X-ray on an injured high school athlete, staying late to make sure all patients and their phone calls were dealt with, and coming in early in order to give needed flu vaccines and TB tests to all the local home health nurses.

In 2015, acknowledging her leadership skills and

## About Our CLINICAL OPERATIONS

*I couldn't imagine Cahaba Medical Care without Amanda. She has been here with me from the beginning and has been such an asset in so many ways. And to now have her coordinating our front office allows her to combine her nursing knowledge with her institutional knowledge of our clinic with her great common sense and be on the front lines making sure our patients get seen in a timely manner and get well cared for. Like she has been doing for over a decade," said Dr. Waits.*

detailed knowledge of the organization, Amanda has transitioned into front office coordinator. This means that she manages and coordinates the activities of CMC's eight receptionists as well as handling the complex clinical scheduling of all twenty-four providers at four clinical sites. This is while she also manages the clinic's Vaccine For Children program at each of the four clinical sites which allows CMC to offer important early childhood vaccinations to Medicaid and uninsured children. Finally, she is also in charge of all inventory and purchasing at all four clinical sites as well. This is while assisting with other nursing duties as they arise including Medical Assistant training and phone calls.

"I couldn't imagine Cahaba Medical Care without Amanda. She has been here with me from the beginning and has been such an asset in so many ways. And to now have her coordinating our front office allows her to combine her nursing knowledge with her institutional knowledge of our clinic with her great common sense and be on the front lines making sure our patients get seen in a timely manner and get well cared for. Like she has been doing for over a decade," said Dr. Waits.

"I really have enjoyed carrying out one of our



mottos, "caring for the generations" because I have been part of doing just that for many families here in my home town. We have several families that have been coming here as patients since we opened in 2004 and I enjoy watching the families grow right along with our growth here as a company. I have so many great memories here. However, some of my fondest are the celebrations of milestones for CMC. When we celebrated CMC's first year anniversary, it was a small supper with all our employees and their families present which back then only consisted of 8 employees. We gathered in the front lobby of our old building reflecting on the past year. Dr. Waits shared his continued hopes and dreams for growth along with providing multiple health care options under one roof which seemed like huge dreams back then however being part of those hopes and dreams coming true with Dr. Waits and Dr. Smith has made me very proud to be part of this wonderful organization. Now when we celebrate milestones we gather with over 80 employees and continue to work together to provide the best care possible for our patients," said Wiggins.





## MEET OUR Medical Assistants

They are the clinical workhorses... the team that makes patient care happen at Cahaba Medical Care. They are the team of 21 medical assistants who assist CMC providers with taking care of many patient encounters that happen each day. They are the team that handles medication refills, phone calls, medical paperwork, triage, assists with procedures, gives shots, cleans exam rooms, and multiple other things each day as they arise.

“Without our team of medical assistants, we couldn’t do what we do. They truly are the engine that keeps the providers going and gets the patients seen each day. We are truly blessed to have a team of really hardworking individuals who want to do a good job and want to take good care of our patients,” said Dr. Lacy Smith, Chief Medical Officer at Cahaba Medical Care.

This team of medical assistants is managed by CMC’s nursing staff led by Jackie Palmer, RN. Jackie

has a team of other nurses assisting including Ashley Middlebrooks, LPN, who is project lead on Medical Assistant training and privileging, Angel Warren, LPN and Amanda Brown, RN who assist in MA training as well.

In order to satisfy the ongoing need for medical assistants that Cahaba Medical Care continues to have, CMC has begun an internal Medical Assistant training program that allows individuals who have interest but do not have medical experience or Medical Assistant training the ability to learn the skills needed on the job. This training program not only supplies CMC’s need for qualified medical assistants but also increases the level of trained medical personnel within Bibb County.

“With our army of medical assistants, we are better able to care for our patients holistically. They are the force behind the scenes helping to accomplish all the quality of care each patient deserves,” said Jackie

## About Our CLINICAL OPERATIONS

Palmer, RN, Nurse Manager.

CMC's Medical Assistant training program begins during orientation when newly hired medical assistants are taught how to use the Electronic Medical Record and how to take vital signs. As training progresses, medical assistants are taught how to give shots, perform x-rays, draw lab work, and how to set up for procedures such as EKGs, treadmill stress tests, women's health procedures, ultrasound, pulmonary function tests, 24 hour cardiac monitoring and dermatologic procedures. They are also taught how to assist providers with medication reconciliation and refills, referrals, imaging and laboratory orders, prior authorizations for medications and follow-up appointments.

The training typically takes about six months to complete, but at the end of that six month process, most medical assistants are able to function independently with assisting a provider in taking care of their panel of patients.

"This medical assistant training program is something that we have done quietly that we are all really proud of. Not only are we satisfying our own need for trained medical assistants but I think we are also helping to raise

the level of healthcare expertise of potential employees for other employers in our area," said Dr. Waits.

One of the many success stories of this Medical Assistant training program is Ashley Middlebrooks who started with Cahaba Medical Care in 2010 with no medical experience. Since that time, Ashley has successfully obtained her LPN license and is now helping to coordinate the Medical Assistant training program that she went through only five years ago.

"We are very proud of Ashley and what she has accomplished. And, one of our ulterior motives, beyond trying to fulfill our need for medical assistants, is to create opportunity and an avenue for people interested in being involved in the medical field to get some on the job training that would give them confidence to then pursue further training or a higher degree. Ashley is a great example of just this," said Dr. Lacy Smith, Chief Medical Officer.



*"With our army of medical assistants, we are better able to care for our patients holistically. They are the force behind the scenes helping to accomplish all the quality of care each patient deserves," said Jackie Palmer, RN, Nurse Manager.*

## THROWBACK TO “Old Cahaba”



Cahaba Medical Care didn't begin its life as a FQHC with a Family Medicine Residency, four clinical sites, and over 90 employees. And there are a few existing employees at CMC who know that intimately. If you get these ladies in a room, it takes no more than a few minutes before there is laughter as stories from “old Cahaba” days break out.

CMC was founded in 2004 by Dr. John B. Waits & Dr. Katherine Cook after finishing residency at In His Image in Tulsa, OK and deciding to come back to Alabama

“We enjoy aggravating each other a lot. One year the pop star Justin Beiber was coming to Birmingham so in the spirit of aggravating Dr. Waits, we decided to write all over his cars windows since he he was leaving early that day to go to the Birmingham airport. So he got to drive around with “I love Justin Beiber” “I love JB”, “Beiber fever” wrote all over his car windows!!!!” - Amanda Wiggins

to practice in a rural area with the dream of reopening Labor and Delivery at Bibb Medical Center.

Waits, a Tuscaloosa native, felt called to underserved medicine. After he ran into an unanticipated roadblock with his initial post residency plans, Waits decided to settle in Centreville to establish a clinic that offered comprehensive primary care services while not turning anyone away for inability to pay or because of their insurance status.

The following six years were an adventure as the clinic tried to take care of whoever walked through the door. This adventure was made possible not only by Dr. Waits who persevered through many of the difficulties of practicing rural medicine, but also, in part, because of six remaining employees who have been with CMC since “the beginning” - through the good and the hard times.

Amanda Wiggins, LPN, began at CMC only three months after it opened its doors and, besides for Dr. Waits, holds the most tenure with the company and has served more roles for the clinic than even she can remember. “All the growth that's come from becoming an FQHC has been great, as far as being able to provide more to the patients. But then, we have always found a way to provide what was needed,” said Wiggins.

Marie Hobson, receptionist, followed a long line of receptionists who had relatively short tenures at CMC and who finally gave some consistency and reliability to

this important position. Marie has been known for her calmness in the face of chaos. And her kind words and demeanour no matter the situation.

Brittany Shanks currently serves as Cahaba Family Medicine Residency's Program Coordinator but began her career at Cahaba Medical Care as a medical assistant. Upon graduation from the University of Alabama, Shanks was awaiting a position at Alabama Power but took the job at CMC to stay busy during her wait. Brittany worked her way up from medical assistant to office manager. She then became acting COO after the clinic's conversion to becoming a FQHC but handed that position over in order to become the Residency's Program Coordinator.

**“I also remember that I use to get blamed for a lot of stuff that I did not do. Like I got blamed for stealing Dr. Waits soccer coach whistle. True, that is something I would do to aggravate him, but this time I was innocent. After several minutes of interrogation against me the whistle was found... in Dr. Waits's bag in his car!!!” - Amanda Wiggins**

Renee Pence joined CMC as a biller in 2008 after leaving a local dentist office. During her tenure at CMC, Renee has learned how to do primary care billing, specialty billing, FQHC billing, procedural billing, obstetric billing, insurance enrollment, Medicare cost reporting, and many other vital and necessary functions of a billing office in order to keep the office running and employees paid.

Ashley Lowe (Middlebrooks) joined CMC as a Medical Assistant in 2011. Her energy and ability to learn was noticed immediately as Ashley came in and quickly learned not only how to triage and assist providers in their medical care but also learned how to do referrals and other necessary nursing administrative tasks. Over her time with CMC, Ashley has gone to nursing school and is now a LPN in charge of the clinic's Medical Assistant training program.

Natasha Traughber also worked as a medical assistant at CMC during its lean years where there was a shortage of clinical support staff. In fact, Tasha, for about six months, was the clinic's only medical assistant for two providers. But she survived and is now one of the clinic's most tenured medical assistants who has experience in many other areas including billing, reception, and medical records and has been a go-to person in many cases when jobs needed to get done and the clinic found itself short-handed.

CMC is only as good as its staff. And it remains proud of the individuals who have not only chosen to call CMC their place of employment but have remained committed to the organization in the midst of much change and exponential growth because of their belief in the organization and its mission to improve lives of its neighbors and the community it serves.



# SOCIAL WORK & COMMUNITY DEVELOPMENT

Many of CMC's departments demonstrated growth and expansion during 2015. This includes the Social Work office which not only saw the addition of another social worker, Leslie Jones, but also saw growth in their outreach and patient assistance projects as well as in the number of patients reached.

Some of these projects include:

## COUNSELING SERVICES

In an effort to meet the significant behavioral and mental health needs within the community, be it for depression, anxiety, or another mental health disorder, the Social Worker team offers one-on-one counseling sessions when referred by a provider.

## INSURANCE OUTREACH AND ENROLLMENT

The social work team can assist people in enrolling in Medicaid so that they do not have to drive out of the county for insurance enrollment assistance; they also can assist people in enrolling in the federal marketplace of the Affordable Care Act. For patients who can't afford insurance or do not qualify for Medicaid, they may still qualify for CMC's sliding fee program.

## PATIENT ASSISTANCE WITH MEDICATIONS

For patients unable to afford their medications, the Social Work team can often get the needed medications for reduced cost or free from the pharmaceutical companies. This program underwent a lot of growth during 2015 as the clinic saw the addition of many new patients.

## COMMUNITY CENTER

Patients will receive help in locating resources to aid them with a variety of needs such as utilities, food, and housing. CMC partners with the Bibb County Red Cross that rents space from CMC at their Community Center location. CMC also has its own food pantry and clothes closet that patients can access when they are facing difficulties meeting their own vital needs. CMC received food donations from organizations like The Foundry as well as purchases food from the West Alabama Food Bank to be able to give to those in need.



## COMMUNITY PARTNERSHIPS FOR SOCIAL SERVICES

The social work office is involved in monthly meetings with Bibb County Focus Groups, county Extension Program, Health Department, local businesses, Acts of Love Ministries (donation from car show), and other organizations trying to build a network of community partners to help meet the needs of patients and community members.

## DENTAL VOUCHER PROGRAM

Patients have access to preventative cleanings as well as urgent dental care utilizing a dental voucher partnered with local dental offices, including Cahaba Dental in Centreville and The Foundry Dental Center in Birmingham, Alabama. This program also experienced much growth in 2015 due to the immense dental needs of so many in Bibb County.

## TRANSPORTATION PROGRAM

For patients who have difficulty getting to appointments at CMC, their subspecialist's office, or for a radiology appointment, the social work team collaborates with the local hospital's van service to coordinate getting these patients to their needed appointments. Also West Alabama Public Transportation Service has been utilized as well. This service has allowed many patients not only to get to their appointments with their primary care doctors but also



to needed appointments outside the county that they otherwise might have missed.

## **CASE MANAGEMENT IN OBSTETRICS**

The social work department, in 2015, was taught how to enroll newly pregnant women in Alabama's Maternity Waiver program so that they will have insurance coverage for their pregnancy. While these women would have otherwise had to drive to Tuscaloosa County to get pregnancy insurance, this service is now provided at CMC as a joint effort between the Social Work office and nursing. This has allowed the social work department to also better connect the patient with more services, such as WIC or food stamps.

## **SLIDING FEE DISCOUNT PROGRAM**

This service allows patients whose income is under a certain range to qualify to see a doctor and to receive any in-house laboratory, x-ray, ultrasound, or procedural service at a massively discounted rate based on their income and family size. This program is managed jointly between the billing and social work office, but it is the social workers who help patients to properly enroll as well as to help identify other discounted programs at neighboring hospitals when the needed service cannot be done at Cahaba Medical Care.

## **HOME VISITS**

The social work department is involved in home visits for both our homebound population as well as for our obstetric population in order to meet the unique needs that arise during end of life as well as during pregnancy as you plan to bring a new infant home. By having social work involved in these encounters at home, they are able to identify services that the patients could benefit from that might not have been recognized with only in-office encounters with a provider.

## **THANKSGIVING MEALS**

Each year Cahaba Medical Care, its employees, and volunteers come together to sponsor Thanksgiving meals to patients and community members in need. This year due to generous donations from staff, Cahaba was able to assist 51 patients/community members. The social work staff had the privilege of coordinating the pick-up and delivery of these meals and through this process, was able to experience the thankfulness of the recipients.

One patient in particular was very grateful. While assisting her with loading the meal items into her car, the patient became tearful and hugged the SW and said "We weren't sure what we were going to do this year until you all called us and let us know that we were getting a meal".

Another patient's grandchildren were present during a delivery of meal items and began chanting "turkey, turkey, turkey" when the social worker began helping the family put the meal items away in their kitchen. The patient's husband commented to the social worker that they hadn't had a turkey for Thanksgiving in over 6 years. The family was very humbled and grateful for the generosity they had been shown.

A similar service is offered at Christmas where families in need are identified and presents are taken to them in order that their children can have presents to open on Christmas Day. This year, families were given Christmas presents.

## **WATERMELON RUN 5K**

As a fundraiser for the Community Center and its Social Work department, sponsored the 2nd annual Watermelon Run 5K in partnership with the Studio, a local fine arts, dance, and music studio in Bibb County. The run was well attended and featured food, children's activities, local vendors, and a jazz band concert at the end of the evening.

CMC also has partnered with the Studio in several other endeavors including free adult exercise classes, led by Leanna Kornegay, a local elementary school teacher with a passion for fitness and health. These classes are held each week at the Studio and offer a mix of zumba, yoga, and pilates. In order to encourage participation, the classes are free and are funded by CMC in an effort to promote health and physical activity.

## **STUDIO**

Finally, CMC was involved in the implementation of a National Endowments of the Arts grant awarded to the Studio that enabled Bibb County to sponsor a concert series including professional ballet companies, classical musicians, jazz bands, and many others. These concerts all happened within the county and were free to the public in an effort to improve fine arts exposure and quality of life in an area where there are few extracurricular activities.

Cahaba Medical Care also entered into a partnership with the Child Caring Foundation which has been sponsoring school-based health fairs for the Bibb County school system for decades. Led by Assistant Superintendent, Dr. Alesa Judd, and Barbara Terry, RN, throughout the school year, each school in the county has a school fair that screens all children for obesity, high blood pressure, high cholesterol, high blood sugar, vision and hearing difficulties, dental problems, and many other things. These fairs have

been supported by the county's HOSA students as well as local nursing students from the University of Alabama. In 2015, because CMC felt the existence of this program was vital to the health and wellness of the county's children and adolescents, CMC began funding these health fairs as well as donating the necessary clinical supplies in order to offer stability to this very important program in Bibb County that touches the health of every student that lives in the county.

"I am so excited about the growth of our Social Services department," said Dr. Lacy Smith, Chief Medical Officer and Deputy CEO. "There is so much our patients need that has nothing to do with a medicine or a laboratory

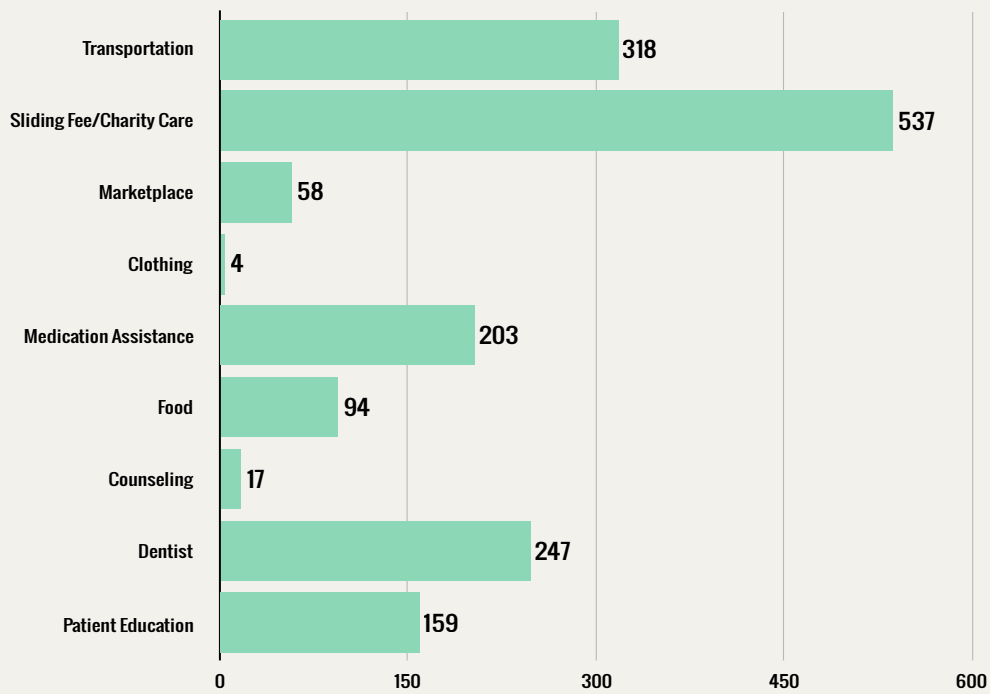
*"Our Social Work office is one of our main assets... something we are thankful for every day as we try to serve our patients and their vast needs," said Dr. Waits.*

test and having three social workers collaborating with us to take care of our patients has been an immense blessing to every provider and every clinical support staff at CMC. And we are so excited about 2016. We have so many other projects brewing that we hope to see come to fruition next year."





## People Served





## THE OPENING OF LABOR & DELIVERY

# L & D

2015 was a momentous year in Bibb County. It was the year, despite the trend of closures of rural Labor and Delivery units all throughout Alabama, that Bibb Medical Center, in collaboration with Cahaba Medical Care, reopened Labor and Delivery.

Within the state of Alabama, there has been steady decline in local access to labor and delivery services in rural areas due to multiple closures of L&D units in rural hospitals. In 1980, 59 of the 66 Alabama counties had at least one labor and delivery unit providing obstetric services. By 2005, this number had declined to only 21 of the 66 counties providing local delivery services. The loss of local obstetric services was primarily seen in rural Alabama and thought to be due to the significant increase in malpractice premiums to providers beginning in the 1980s. This increase in

the cost of providing obstetric services impacted rural Alabama more than urban centers. This was due to the lower volume of prenatal patients in rural areas and the larger proportion of Medicaid prenatal patients in rural areas translating to lower reimbursement rates for care provided. Once closed, the inertia against re-opening is often insurmountable

While Cahaba Medical Care has been offering local prenatal care and ultrasound since it opened in 2004, it has been almost two decades since there was a local

*“The first rural L&D to open in over 40 years.”*

delivery option for women in Bibb County. When it was time for them to deliver, they would have to drive to DCH Regional Medical Center in neighboring Tuscaloosa County. While this doesn't seem like a huge issue to some, almost 17 percent of individuals in CMC's service area including many of our obstetrical patients, do not own a car so driving outside the county for any service can be a huge ordeal.

Infant mortality research in the state of Alabama and elsewhere in the US, can positively impact birth outcomes, both for mom and baby. Currently Bibb County has a infant mortality rate, preterm labor rate, and low birth weight rate that is more than 1.5 times that of the state and the nation. In order to combat these statistics and to offer improved local care to the women and children of Bibb County, CMC partnered with Bibb Medical Center to make the huge step in reopening Labor and Delivery. The grand opening occurred in November and by the end of 2015 approximately 20 babies had been born in the new state-of-the-art L&D.

The L&D is equipped with four Labor and Delivery rooms as well as with all of the necessary state of the art equipment needed to monitor mom and baby and provide for a safe delivery. There is also a renovated Operating Room should a patient need to deliver their baby by caesarean section. After delivery, both mom and baby remain in their room together as a time to bond prior to being discharged home.

"Starting a new program like this is never easy. There have been a lot of kinks to work through and processes to think about that you would never have to think about if you go to work in an already established L&D. But, we are proud of the unit and the care we provide there and think that we are creating a very nice and safe place for women to have their babies," said Dr. Shelley Waits, an OB fellowship trained physician at CMC.

Currently the L&D is staffed by CMC physicians including three board certified Family Medicine doctors, all with obstetrical fellowship training and by the Cahaba Family Medicine Residency's eleven residents.

"The opening of Labor and Delivery has really been the realization of a dream for me. I am so grateful for Bibb Medical Center's partnership in this endeavor. Their willingness to build this new unit onto their hospital, in the face of the waive of L&D closures, speaks volumes to their dedication in offering necessary medical services to the community of Bibb County," said Dr. John Waits, CEO of Cahaba Medical Care and one of the delivering doctors

*"I'm not surprised about L&D opening." Dr. Waits doesn't take 'no' for an answer. - Amanda Wiggins*

at the new L&D. "I truly believe by offering this local delivery service to women... along with the local prenatal care, ultrasound, case management, insurance enrollment, and other services they can already receive, we will see an improvement in the health of the women and children we take care of in Bibb and Perry Counties."

As outreach to other counties who also do not have local Labor and Delivery services, CMC will be starting prenatal clinics in Perry County during 2016.



# TEACHING, LEARNING, HEALING



from left to right: Dr. Keri Doctor, PGY-3, Dr. Olatunde Bosu, PGY-1, Dr. Daniela Rodriguez, PGY-1, Dr. Nathan Way, PGY-2, Dr. Andrea White, PGY-1, Dr. Lenord Burwell, PGY-1, and Dr. Lena Gamble, PGY-1 (not pictured Dr. Aleksandra Murawska, PGY-2)

## CAHABA

# FAMILY MEDICINE RESIDENCY

*Alabama's only Teaching Health Center and newest Family Medicine Residency program*

Cahaba Medical Care does more than just help make the community healthier— it is also the home of Cahaba Family Medicine Residency (CFMR), Alabama's only Teaching Health Center and the newest Family Medicine residency training program. It is a dually accredited program by the Accreditation Council on Graduate Medical Education (ACGME) and American Osteopathic Association (AOA) that was created to address the state and nationwide shortage of primary care physicians and to train physicians to provide care to those in underserved areas.

CFMR is a three-year rural residency training program. It is a deeply mentored, procedurally

heavy program, featuring a three-year longitudinal curriculum that allows a resident to act as a full-spectrum rural doctor in a supervised manner for three years.

“This residency was established to help train those interested in dedicating their life to serving people in an underserved rural, urban, or international location by providing full-spectrum care in a resource-poor area. We believe this best happens if the training is also in a rural resource-poor area while being mentored and taught by family medicine doctors who provide a full spectrum of medical and procedural services to their patients,” said Dr. John B. Waits, founder and Program Director of the residency program.

Over three years, residents have the opportunity to interact and treat a full spectrum of patients from newborn to end of life, including managing chronic diseases; performing preventative care measures; caring for prenatal patients, homebound patients, and patients with mental health diseases; and learning a broad spectrum of procedures including vaginal and cesarean deliveries, circumcisions, joint injections, casting and splinting of fractures, colposcopy and LEEP, and full-spectrum ultrasound. This curriculum is supplemented with rotations at the UAB Hospital system UAB Medical West and Children’s of Alabama in the second year in areas including adult medicine, ICU care, inpatient pediatrics, obstetrics and gynecology, and orthopedics.



1st

Alabama’s First & Only  
Teaching Health Center

11

Family Medicine  
Residents

**Alabama’s Only Dually  
Accredited Family  
Medicine Residency**

## MAKING A DIFFERENCE IN THE REGION, STATE AND COUNTRY

“There is a healthcare crisis in rural areas of Alabama and the country. Geographic, demographic, and socioeconomic factors severely impact access to healthcare for many living in rural areas including the rural areas we serve in Alabama. There is a higher incidence of chronic diseases including heart disease, diabetes, and cancer in rural areas as well as a larger population of the elderly. To compound the issue, most rural areas in the U.S. suffer from a significant shortage of primary care physicians. Cahaba Family Medicine Residency is working to address these issues by training physicians to care for and work in rural areas either in this country or abroad,” said Dr. Lacy Smith, Associate Program Director.



*Physicians trained in community-based programs are more than twice as likely to work in an underserved area as those trained in university and hospital based programs.*

# CFMR'S INAUGURAL CLASS OF 2016

*Cahaba Family Medicine Residency began its first class of residents in July 2013.*



## ANDREIA WHITE, DO

From rural Alabama, Dr. White grew up in Safford, Alabama, attended college at Tuskegee University and then went to medical school at the University of Pikeville - Kentucky College of Osteopathic Medicine. Following medical school, Dr. White volunteered in a variety of medical settings until beginning residency at CFMR. Her passion lies in Alabama and she is staying with CMC following her dream to join a practice in a rural area of Alabama by working at our Maplesville Clinic.



## KERVIN DOCTOR, MD

Dr. Doctor is a native of India but moved to the United States at a young age. She attended college in New York and medical school at Windsor University School of Medicine. Dr. Doctor completed her intern year in Louisiana but transferred to CFMR for her 2nd and 3rd years of residency training. Her interests are diverse but include international health, especially in India where she hopes to be involved in medical mission work. Dr. Doctor is married with one daughter.



## ALEKSANDRA MURAWSKA, MD

Dr. Murawska is a native of Poland but moved to the United States following medical school which she completed at Poznan University of Medical Sciences. Following medical school, Dr. Murawska was involved in a variety of research fellowships before beginning residency at CFMR. Dr. Murawska's interests include procedural medicine, wound care, and surgery. She has been accepted to a hospital fellowship in Pennsylvania before starting her family medicine practice.



## NATHAN WAY, MD

Dr. Way is a native of Tennessee who attended college at the University of Tennessee, medical school at St. George's University, and then received a Masters of Public Health at Tulane University. After working in public health for several years, Dr. Way decided to return to medicine and complete a residency in family medicine. His interests lie in population health, preventive care, and public health policy. Upon graduation, Way will be joining a FQHC and hospital in rural Oregon.

*"All four of our first class of residents are true trailblazers. They were ready and willing to come to a new program and help us continue building all the curricular components while also working with us to establish a good reputation of the residency around the community. We couldn't have asked for a better first group."*

— John B. Waits, Program Director



## CFMR'S RESIDENCY CLASS OF 2017

*In July 2014, CFMR started its second class of four residents after successfully promoting it's inaugural class of residents*

### **OLATUNDE BOSU, MD**

Dr. Bosu is originally from California and trained at the University of Southern California and then Yale University School of Medicine in Connecticut. This is his first time to live in the southern United States. He is married with three children and enjoys football, family, and dancing.



### **LENORD BURWELL, MD**

Dr. Burwell is originally from Bronx, New York. His undergraduate degree was completed at Clark University in Massachusetts and his medical degree completed at Howard University College of Medicine. He has previously worked as an instructor at Fortis College in the medical assistant certification program. His interests include music, graphic design, fitness, cooking, and community health.



### **LENA GAMBLE, MD, PHD**

Dr. Gamble is originally from Washington D.C. She completed her undergraduate degree at Xavier and Cornell Universities. She then attended graduate school and began medical school at Tulane University in New Orleans. She was there when Hurricane Katrina forced her to migrate to Birmingham, AL where she enrolled at the University of Alabama at Birmingham. She was a part of the MD/PhD program which she graduated from in 2012. Following completing her PhD work, she then worked for the National Institute of Health to complete her PhD research after which she matched at Cahaba Family Medicine Residency due to her interest in rural and international underserved medicine.



### **DANIELA RODRIGUEZ, MD**

Dr. Rodriguez is originally from Venezuela where she completed her medical training at Universidad del Zulia Facultad de Medicina. Upon completion of her medical school, she came to the United States where she worked with Dr. Bill Rodney in Memphis, Tennessee as a scribe, medical assistant, interpreter, and residency prep student. Her interests include spending time with her son, Women's Health, cooking, and traveling.



# CFMR'S RESIDENCY CLASS OF 2018

*In July 2015, CFMR started its third class of four residents to reach maximum capacity for its residency at twelve residents*



## JAMIE BISHOP, DO

Dr. Bishop grew up on a farm in rural Minnesota and earned her bachelor's degree from North Dakota State University in Fargo, North Dakota; however, Alabama has been her home for the past several years. She received her medical degree from William Carey University College of Osteopathic Medicine in Hattiesburg, Mississippi. While in medical school, she rotated as a student at Cahaba Medical Care and was inspired to pursue a career in family medicine. When not working, she enjoys spending time with her three children, running, swimming, and cycling.



## ARNELYA CADE, MD

Dr. Cade is originally from the very small town of Thomaston, Alabama. She began preparing for a career in medicine by participating in the Rural Health Scholars and Minority Rural Health Pipeline Programs at the University of Alabama in Tuscaloosa in high school. She then earned a B.S. in Chemical Engineering from the University of Alabama. She received her medical degree from the University of Alabama School of Medicine in 2015. In her free time, she enjoys spending time with my family and her beloved Patrick. Her future plans include starting a family, practicing family medicine in rural Alabama, and incorporating missions work into my practice.



## ERNESTINE CLEMENTS, DO

Dr. Clements was born and raised in Birmingham, Alabama, and knew from the time she was a little girl that she wanted to be a physician. She attended Tennessee State University on full academic scholarship and majored in Biology. She then received a Master's Degree in Public Health and certificate in International Global Health Studies from UAB. She earned her medical degree from Ohio University Heritage College of Osteopathic Medicine in 2015. Dr. Clements discovered CMC when she rotated her as a fourth year medical student, and "fell in love" with the program. When not working, you can find her spending time with family, church family, singing (although I'm known to do that at work), dancing, painting, volunteering, and doing retail therapy.



## LAURA HYER, MD

Dr. Hyer is originally from Northwest Indiana; however, Alabama has been her home since 2007. She received her undergraduate degree from Judson College in Marion, Alabama and graduated from medical school at the University of South Alabama in Mobile, Alabama in 2015. Dr. Hyer is passionate about spending the rest of her life living in a rural community in Alabama and serving people with the best quality and most comprehensive medical care she can provide. When not working, she enjoys spending time with her horse and dog, fishing, camping, swimming, gardening, cooking, and spending quality time with family and friends.

# GRADUATION



CFMR held its first graduation ceremony for its inaugural resident on Tuesday, June 23, 2015 at 6pm, honoring Dr. Kervin Doctor. The ceremony was held at The Oaks in Centreville, Alabama. The event was well attended by patients, CMC staff, Bibb Medical Center staff, faculty, preceptors, board members, and community leaders and was an opportunity to celebrate the accomplishments of Dr. Doctor as she leaves residency and pursues her career in Family Medicine. Dr. John O. Waits, CMC surgeon and faculty member, delivered the commencement speech where he encouraged Dr. Doctor and all the residents to persevere during difficult times and not to forget the patients, not to forget work-life balance, and not to forget why we made the decision to go into medicine as the days get hard and long.

Dr. Doctor completed her first year of residency at a rural family medicine program in Bogalusa, Louisiana that closed due to lack of funding. She then transferred to CFMR as a part of the inaugural class in July 2013 where completed her second and third years of training. Dr. Doctor now resides in Land O' Lakes, Florida and practices outpatient medicine in nearby Tampa.

“Since graduation, my family and I have moved to Tampa where I joined Tampa General Medical Group. I am currently working with three other doctors seeing patient of all ages. I am also involved in organizing community health education projects and have joined my group’s EMR committee to help facilitate to other

providers how to effectively use the EMR,” said Dr. Doctor.

“I really enjoyed my time at CFMR. It really is what it says. A small town residency with a big heart that can teach you to do just about anything a family doctor would need to know,” said Dr. Doctor.

Dr. Andreia White, PGY-2, was honored with the Humanism in Medicine award. For this award, the CMC nursing staff was asked to vote for the resident who best demonstrated the ideals of outstanding compassion in the delivery of care; respect for patients, their families, and healthcare colleagues; and clinical excellence.

Dr. Aleksandra Murawska, PGY-2 resident, was presented with an award for achieving the highest In-Training Exam score of all residents in the program. Each year, all family medicine residents in the country take the In-Training Exam. The purpose of the examination is to provide an assessment of each resident’s progress, while also providing programs with comparative data about the program as a whole.

Dr. Murawska also received the Surgery Award, presented by CMC surgery faculty member, Dr. John O. Waits. Dr. Waits selects the resident who best demonstrated good surgical skills as well as an interest in procedural medicine.

# INTERNATIONAL ROTATIONS

*Residents Involved in global health and medical missions*

Medical residents who are preparing to serve the underserved through international rotations go through life-changing experiences as they broaden their perspective on a global scale. Each experience is unique, and yet there is an overwhelming feeling of connectedness within them.

Dr. Waits and Dr Smith thought this experience important enough to teach residents about underserved communities throughout the world and to broaden their worldview to something outside of the United States, that it provides a stipend for an international rotation one month out of each year of residency.

Each story below recounts the personal experiences of each resident, and show us that health is not just a world issue, but a worthy one.

Other locations for international rotations include Thailand and Egypt.



NALERIGU, GHANA

## ANDREIA WHITE, MD

“I have always wanted to go back to my roots and serve the people of Africa. Cahaba Family Medicine Residency afforded me the opportunity to travel to this beautiful continent. Going to Nalerigu, Ghana was one of the most rewarding journeys that I have ever had the chance to experience. While at Baptist Medical Centre, I was able to work with children and adults in the inpatient as well as the outpatient setting. It was such a joy to work alongside the Ghanaian doctors and staff. We were all from different backgrounds, but we shared the common “language” of serving others. I was able to learn so much from the physicians in regards to maximizing care with limited resources. Even though I was able to offer my medical help to the people, I gained so much from them by witnessing the peace and happiness that so many of them displayed in spite of their poor conditions.”





BEBEDOURO, BRAZIL

## ALEKSANDRA MURAWSKA, MD

“Last year I went to small town of Bebedouro in south part of Brazil where my husband is from. That was my second trip to the same place after spending one month with Dr. Tiago, a family medicine physician. Brazil is considered a third world country and the poverty is one of the biggest issues that this country is dealing with. Seeing how family medicine physicians can help the poorest from the region was really special. I’ve learned a lot. I’ve noticed that being a family medicine doctor is also being an advocate for the people. I have seen many situations when people without any income were getting the best treatment possible and that was very rewarding. Daily schedule was very similar to our schedule here in Centreville. We had a clinic in the morning, then nursing home or prenatal care clinic. I also was a part of preventive care events, where we were discussing with patients how to prevent Dengue disease. I learned a lot during this one month trip and I am looking forward to applying all this knowledge to my future practice.”



RAJAHMUNDRY, INDIA

## KERI DOCTOR, MD

It has always been one of my lifetime goals to be able to go back to my country of birth, India, and help in anyway I can. As part of my international rotation, I was able to visit as a doctor. We visited three sites, the second being where I spent most of my time. At this location I spent two days a week serving in the clinic, where we saw 200 to 600 patients a day. The need for medical care was overwhelming. The other days we would travel deeper into the jungle to reach tribal areas where people have absolutely no access to medical care. The deeper we traveled, the worse the medical conditions we witnessed in terms of malnutrition and severity of disease. Another place I visited was the Missionary of Charity, the organization started by Mother Teresa, which currently has over 600 houses in over 150 different countries. What struck me most was the sense of community amongst the volunteers from all over the world. The simplicity yet effectiveness of the Sisters who serve God and humanity is just amazing to experience.



## PATCHACAN, BELIZE

### DANIELA RODRIGUEZ, MD

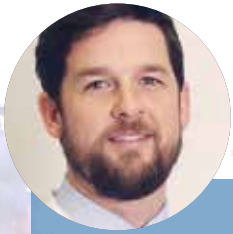
“For my international medical mission I went to the beautiful country of Belize. I had a wonderful learning experience there. I chose Belize because I wanted to go to a place where my patients speak Spanish and they can fully express their needs or concerns in their language, eliminating the language barrier that can interfere with the doctor-patient relationship. I also wanted to serve in a place with a Hispanic population because they remind me of my roots and customs. I really miss working with the Hispanic underserved population. I love to serve them as a doctor and as a friend, know about their unique histories and backgrounds and try to help them with their medical conditions and difficult life. I worked in a small town called Patchacan in a rural clinic called Presbyterian Medical Clinic where they treated me as one of them. I enjoyed relating with patients of all ages, different backgrounds and with a wide variety of medical problems in a setting where people face extreme barriers to adequate medical care. Some of the patients speak multiple languages because they have Mayan and German roots, but most of them speak Spanish because the town is just 10 minutes away from the Mexican border. I also enjoyed the beautiful landscapes and beaches of Belize. I loved their food, souls, and customs. I really would like to come back one day to this wonderful country and help this beautiful people to cope with their medical problems and challenging life.”



## HAITI

### LENA GAMBLE, MD, PHD

“Haiti is the poorest nation in the Western world. It has been in a constant state of poverty for decades due to corruption in government at the highest levels in addition to being further ravaged by natural disasters in the past 10 years. One of my life’s goals is to go to places where help is most desperately needed and offer medical assistance and the hope of the Gospel. It was an honor to serve with Nehemiah Vision Ministries and Love A Child ministries in February 2014. Both offered an opportunity to treat patients in an ambulatory setting and forward more serious cases to centers with higher levels of care. My eyes were opened to the extreme poverty so close to home (just a 2 hour flight from Florida). Not only was I able to offer help and hope to patients and support to the long-term missionary staff, but I also received so much in return. The Haitian people are very proud, generous, and loving people and were kind enough to share their culture with me and I developed a deep appreciation of the food, language, and customs there. Learning to practice medicine alongside the Haitian doctors was immensely educational. I learned to depend more heavily on physical exam skills for diagnosis and treatment because lab tests and imaging were not options in our rural clinical settings. I returned to our residency program with a renewed passion to practice medicine in such settings as much as possible in my upcoming my career.”



## THAILAND

### **NATHAN WAY, MD**

Thailand was a surge of culture, food, and religion that was so overwhelming at times I found myself hard pressed to process it until weeks later. Thai people are proud of their heritage, their monarchy, and their traditional medicine and they never missed a chance to share them with me. I stood breathless watching thousands of lanterns float into the sky during their festivals, I kept my promise to eat everything they did, and I practiced kneeling every time I entered a shrine or met an elder. In doing so I made friends who were just as hungry to learn about medical practices from the US as I was to learn about Thai medicine. These friends made me try acupuncture, cupping, herbal medicine, and laughed with me as I squirmed under the intense pressure of Thai massage. I shared practice ideas while treating elder monks with Parkinson's and rice farmers with diabetes. I learned how to treat scorpion bites. I learned how to eat scorpion. I learned a hundred new names for medicines I thought I already knew, and then I learned their alternative herbal treatments. I met a community that teetered between its reverence of tradition and desire to embrace new ideas. I left with a respect for both, and a burning desire to continue to grow as a person and physician.



## EGYPT

### **OLATUNDE BOSU, MD**

Being a self-professed Egyptophile, I was elated when, as an impressionable eleven year-old, I toured Egypt with my family. In the two decades since that trip, I often longed to return. Not surprisingly, I was even more excited to return to Egypt in 2015. I was blessed with the opportunity to combine my passion for medicine with my renewed my interest in history.

My return travel was just as memorable. During my ten days in Aswan, I stayed in a beautiful century-old missionary complex in the heart of Aswan. I arose each morning to see the sun rise and glisten over the clear blue water near the mouth of the Nile River. My days consisted of morning prayer and devotion that were followed by hospital rounds with the esteemed faculty and residents at the local residency program. It was an honor to learn from and practice medicine with Egyptian and fellow American colleagues and an even greater honor to serve the Aswan people. Despite the hectic schedule and brief visit, I had a treasured opportunity to immerse myself in the vibrant Coptic Egyptian culture and to make some lifelong friends.



## MEET OUR RESIDENCY PROGRAM ASSISTANT JANELL CLARK

Janell Clark joined the residency administrative team as program assistant, providing administrative support to Brittany Shanks (program coordinator), and to the faculty and residents as needed.

### RESPONSIBILITIES AS PROGRAM ASSISTANT?

Provide administrative support to the Residency Coordinator, Curriculum Coordinator, and Faculty (when needed) such as composing correspondence, compiling reports, coordinating activities, maintaining files, and performing other duties as required to maintain the proper functioning of the Residency Program.

### WHAT ASPECT OF YOUR JOB DO YOU ENJOY THE MOST?

I love the constant human interaction and the satisfaction that comes from helping someone.

### WHAT IS THE MOST IMPORTANT THING THE COMMUNITY SHOULD KNOW ABOUT CAHABA FAMILY MEDICINE RESIDENCY PROGRAM?

CMC is a Federally Qualified Health Center (FQHC) and Alabama's only teaching Health Center, which means it receives funding for providing care to uninsured patients while simultaneously housing a residency program.





## HOW DO PATIENTS BENEFIT FROM THE FAMILY MEDICINE RESIDENCY PROGRAM?

The labor & delivery reopened September 2015. So, expectant mothers no longer have to drive out of town to deliver.

## WHO IS JANELL CLARK?

I was born and raised in Bibb County. Before coming here I worked at the Bibb County Tax Assessor/Collector Office. When not working, I enjoy spending quality time with family and friends.



# CURRICULUM UPDATE

## FOR RESIDENTS AND STUDENTS

*Training for Residents Much Like “A Day in the Life of a Rural Doc”*

The core curriculum component of Cahaba Family Medicine Residency, is what makes this residency different than many, is the Longitudinal Integrated Curriculum that occurs during 23 of the 36 months of residency where residents are involved in all aspects of what Family Medicine can be, all while remaining in Bibb County.

“We feel by training residents in a rural area by rural doctors, who model what it would look like to do inpatient medicine, outpatient medicine, emergency medicine, obstetrics, and advanced procedures, they will graduate with the confidence to go to another rural, urban, or international setting and provide this same type of comprehensive care,” said Program Coordinator Brittany Shanks.

Most Family Medicine residencies around the country are based on a block rotation system and are located within a university or large hospital setting with easy access to subspecialists. CFMR is also different in that the program, as a free-standing family medicine residency program, is located in a town of only 5,000 people and is utilizing a primary hospital with only 35 beds. However, instead of being a hindrance, this is felt to be a strength.

“If there is a shortage of primary care physicians... and if this shortage is most dramatically felt in rural areas... how much sense does it make to train residents in large cities with any image, lab, or subspecialist at their fingertips and then send them out to rural area at the beginning of their solo practice and expect them to know how to practice when they no longer have all the resources and specialty referrals around them,” said Dr. John Waits, Program Director. “The best way to prepare residents interested in rural medicine is to train them in a rural area and rural hospital.”

Some curricular changes that happened in 2015 included:

1. The addition of a full-time general surgeon, Dr. John O. Waits to the faculty to allow for more time doing wound care, endoscopy, and in-office surgical procedures including hemorrhoid banding, anoscopy, and others.
2. The addition of a dermatologist, Dr Robert Griffith as part of the longitudinal integrated curriculum to offer diagnostic tips on difficult to diagnose rashes as well as procedural tips on common dermatologic procedures
3. The addition of a radiology component to the curriculum with Dr. Susan Griffith coming down and assisting with overreads of chest x-rays, CTs, and ultrasounds
4. The addition of 2nd month of pediatrics at Children’s Hospital of Alabama during the PGY-3 year located in the Emergency Department learning the recognition, stabilization, and diagnostic approach to an ill child.
5. The addition of advanced cardiology helping to perform nuclear stress tests and echocardiograms and then assisting with their reads on another date with one of the reading physicians.
6. The addition of the local obstetrics curriculum with the addition of the new local Labor and Delivery that allowed residents to now care for laboring mothers and new infants during their call shifts at Bibb Medical Center



Cahaba Medical Care also sponsors a 12 month Longitudinal Integrated Curriculum for medical students that is closing out its third year and will be entering its fourth year in 2016.

The LIC third-year medical school experience includes elements of adult medicine, pediatrics, emergency medicine, behavioral/mental health, surgery, women's health, and subspecialty care during each week of clinical experience – primarily at either Cahaba Medical Care or Bibb Medical Center, within Bibb County.

Medical students are incorporated into the daily clinical life of CMC including inpatient rounds, outpatient care, nursing home rounds, home visits, emergency department call, prenatal clinic, surgery rounds, wound care, time in endoscopy and ultrasound clinic, time in a mental health clinic at Indian Rivers, and in a subspecialty clinic. These Bibb County experiences are supplemented with weeks in the Operating Room at Bryan Whitfield Memorial Hospital in Demopolis, Alabama, and hospital rounds at a larger hospital facility, Medical West Hospital, in Bessemer Alabama. Medical students are not only exposed to but also given hands-on training with a variety of procedural skills including casting and splinting, laceration repair, joint injections, and other procedures.

Another addition to the LIC is a medical student continuity clinic on Friday mornings where each medical student is given the opportunity to build a small continuity panel of patients, which they see as the primary care provider but in collaboration with an attending physician. Since continuity is often one of the key factors that leads people to choose primary care as their medical career, by exposing medical students to maximal opportunities for continuity through this novel curriculum, CMC hopes to encourage more medical students to enter primary care residency training.

CMC's inaugural class of 3rd year medical students who went through the LIC all matched into Family Medicine during Match Day in March 2015. One of them, Dr. Jamie Bishop, decided to continue her training at CFMR.

“At first, I was very skeptical of the LIC. As the year progressed, I began to realize how much exposure I

was getting to everything as a whole when I wasn't trying to focus on just one subject. The LIC allowed me to see a patient in the emergency room, take care of the patient while in the hospital, and then follow up with the patient in clinic after discharge. This is where I learned the most and had the most knowledge retention. I was managing the patient's disease and saw the whole process. This experience was unlike any I have experienced so far in my fourth-year rotations and by far the best experience of my clinical rotations,” said Jamie Bishop, current PGY-1 resident at CFMR, of her experience as a third year medical student.

In January 2014, Dr. Bishop as well as her medical school counterparts, Dr. Brianna Kendrick and Dr. Erin Wagner, traveled with the directors of the medical student LIC, Dr. John Waits and Dr. Lacy Smith to the Society of Teachers of Family Medicine (STFM) Conference on Medical Student Education and presented about their work with the medical student LIC as well as the medical student continuity clinic.

In 2015, CMC graduated two William Carey University College of Osteopathic Medicine (WCUCOM) students, Steven Richardson and Brandon Allison into their 4th year rotations and welcomed two new students from the same medical school, Casey Kramer and Sonom Vashista.

In 2016, CMC is excited to begin growing this now well-founded LIC by hosting six students from the Georgia campus of the Philadelphia College of Osteopathic Medicine and two students from WCUCOM.



## GRANTS

- Maplesville New Access Point Grant
- National Endowment of the Arts
- Expanded Medical Services Grant
- Hearst Foundation Grant
- March of Dimes grant for OB Home Visits

## PRESENTATIONS & AWARDS

### STFM Medical Student Education conference presentations

- “A Third Year Medical Student Continuity Clinic based in a Rural Family Medicine Community Health Center”
- “A Family Medicine-based 12-month Longitudinal Integrated Curriculum (LIC) for 3rd-year Medical Students in a Rural Community Health Center in Alabama”
- “Student-Generated Self-Assessment Questions for fmCASES”
- **“Women’s Health Update” given at the AFP Annual Meeting by Dr. John B. Waits**
- **STFM Innovation Award to the fmCASES Project Development Group, including Dr. John B. Waits.**
- **Four Submissions to the Family Physicians Inquiries Network**
  - “Nephrologist referral and relation to progression to ESDR in patients with CKD?”
  - “What is the best intervention to prevent adolescent pregnancies?”
  - “What are the short-term benefits and harms of methotrexate for treating RA”
  - “Does stretching reduce the risk of injury during exercise?”



# CLINICAL UPDATE

## **JCAHO ACCREDITATION**

CMC underwent its Joint Commission ambulatory care site visit in early 2015 and was awarded Joint Commission Ambulatory Care and Patient Centered Medical Home (PCMH) status in February 2015. CMC is now dually-accredited as a PCMH as this recognition comes in addition to Level 3 NCQA PCMH status that was awarded in 2014.

“A lot of work went in to preparing for the Joint Commission on-site visit by so many people including our COO and Nurse Manager,” said Dr. Lacy Smith, Chief Medical Officer. “We are very proud of all of the work and preparation of our leadership and clinical staff to prepare for JCAHO and their ongoing dedication to trying to continue implementing and improving those standards in order to provide a better and safer clinic for patients to come to for care.”

## **CENTERINGPREGNANCY SITE APPROVAL**

Cahaba Medical Care has been a CenteringPregnancy site performing group prenatal visits since 2009. These groups have changed the way prenatal care is delivered at CMC and has worked to create true community between many of our pregnant ladies around the same gestational age. Because CMC is such a believer in this curriculum, they hold an annual on-site CenteringPregnancy training on how to facilitate these groups. Also, CMC achieved Centering Site Approval this year on the guidance of Dr. John Waits and facilitated by Jackie Palmer, RN / QIO after close to two years of collecting data about groups and birth outcomes and working to ensure that CenteringPregnancy groups were maintaining fidelity to the Centering Programs concepts.

CMC is now one of only three CenteringPrograms approved sites in the state of Alabama.

## **SURVIVING THE TRANSITION TO ATHENAHEALTH**

It is not a small move for a clinic to transition Electronic Medical Records, but after over ten years with SuccessEHS, CMC made the decision to transition to AthenaHealth for both their electronic medical record as well as for their practice management and quality improvement / population health software.

Go Live occurred on July 27 after over three months of

preparatory work by a team of EMR superusers led by Dr. Lacy Smith, Chief Medical Officer, who was in charge of this EMR transition. Although there were hiccups along the way, the clinic returned to its normal level of productivity and patient visits by only three months after implementation of the new EMR.

“It is never fun to have to move EMRs. However, we truly thought this was the best decision for us as AthenaHealth offered an easier way for clinical staff to document as well as better financial and quality reporting, easier methods to engage providers in quality management activities, and finally, an overall easier product to use for everyone from reception to clinical staff to billing. We really have been happy with our choice to transition to Athena,” said Dr. Smith.

## **MARCH OF DIMES GRANT FOR OB HOME VISITS**

Cahaba Medical Care was awarded a grant from March of Dimes to help implement OB home visits as part of its comprehensive obstetric program that includes local prenatal care utilizing CenteringPregnancy, local ultrasound services, and local delivery at Bibb Medical Center. The OB Home Visit grant was to see if, by utilizing providers, nurses, and social workers to perform OB home visits throughout the pregnancy, if there would be a change in the knowledge of our prenatal patients, a change in their access to needed care services, and an improvement in birth outcomes (as a long-term goal). Although this is only a one year grant, CMC is looking to continue implementation of this program even after it loses this March of Dimes funding in order to continue improving the care of women and children.

*“Sometimes when patients get upset about seeing all the new faces and changes, I tell them about some of the strides we’ve made in 2015, and their whole demeanor changes; I think a lot of people in our community don’t grasp the whole picture of what we do.”*  
- Ashley Middlebrooks, LPN]

# POLITICAL ADVOCACY (CAHABA IN THE NEWS)

## TEACHING HEALTH CENTER ADVOCACY

Dr. John B. Waits, CEO of Cahaba Medical Care and Program Director of Cahaba Family Medicine Residency, along with his day job of being a family medicine physician, delivering babies, running Cahaba Medical Care, and administrating a 12 resident Family Medicine Residency, was also very involved at the state and national level in political advocacy for various programs important for the health of the state as well as for resident and medical education in the state.

One such program for which he advocated was Teaching Health Centers. Cahaba Family Medicine Residency is Alabama's only Teaching Health Center. And it is that funding that allowed for the start of Alabama's newest Family Medicine Residency that is based in a rural area training Family Medicine residents how to have a career in rural family medicine.

However, the Teaching Health Center program, is the sole source of funding for CFMR, was at risk of ending come 2015. But, because of successful advocacy by Dr. Waits as well as by AAFP and the AATHC, in 2015, Teaching Health Centers were re-authorized for another three years after being put into the MACRA (Medicare Access and CHIP Reauthorization Act) bill that refunded Teaching Health Centers as it also permanently ended the "doc fix" problem plaguing physicians for years.

While this was a major victory for Teaching Health Centers, the advocacy continues since THC's were not funded indefinitely but only for two more years. So, in 2017, the same crisis will be upon CFMR and many other THC's around the country. To this end, Dr. Waits continues to make multiple trips to both Montgomery and to Washington D.C. each year to let people know about THC's and the work that Alabama's only THC, Cahaba Family Medicine Residency, is doing.

## GOVERNOR'S HEALTH CARE TASK FORCE

Also, in 2015, Dr. Waits was asked by the Governor of Alabama, Dr. Robert Bentley to serve on his Governor's Health Care Task Force. This Task Force was made up of 39 individuals from around the state from different areas of medicine appointed by the governor to give recommendations on programs that would improve the state of health of Alabama and its citizens. While serving on this task force, Dr. Waits also served as chair of the Medicaid Subcommittee and the Personnel Committee making recommendations to the governor both personally and his health care aide and through committee on proposals such as the expansion of Medicaid, funding of Teaching Health Centers and Rural Training Tracks and other programs that put training in rural areas, and increased funding of stipends for medical professionals who work in a rural area after graduation.

Through his advocacy efforts on the Governor's Health Care Task Force, Dr. Waits' work at Bibb County also was recognized and was highlighted at the Governor's State of the State address in early 2016. This address highlighted Dr. Waits' continued work in rural Alabama as well as his efforts and work in reopening Labor and Delivery in Bibb County in 2015.

"It really was an honor to be recognized by the governor both to serve on his task force as well as during his State of the State address," said Waits. "I hope this recognition eventually turns into legislation that improves healthcare in rural Alabama. While it is a topic right now, there is still a long way to go in getting the support we need to take good care of this population."

## LABOR AND DELIVERY IN THE NEWS

Finally, the reopening of Labor and Delivery at Bibb Medical Center grabbed the attention of many local news outlets.

Al.com's Anna Claire Vollers wrote several articles about infant mortality in the state of Alabama and highlighting the efforts of CMC and Bibb Medical Center to combat those statistics by reopening L&D. As follow-up in 2016, Vollers has shown interest in writing a series of articles that follows pregnant women who live in rural areas throughout their care and delivery to highlight the difficulties they face compared to women in more urban areas.

Finally, during the construction of L&D, ABC 33/40 did a story about the reopening of a L&D unit in rural Alabama.

"Although we do none of this for the publicity, we are always appreciative when someone notices what we are doing and does something to help us get our story out there. We want people to know the work we are doing. Not because we want to be praised or recognized but because we think it is important. And we want more people to think it is important so that they will join with us to work to change the health of Alabama," said Dr. Waits.



***A SPECIAL THANKS TO OUR  
COMMUNITY & ACEDMIC PARTNERS***

**Bibb Medical Center**

**Dr. John Meigs**

**Dr. Lata Patil**

**Dr. John Hollis**

**UAB Hospital System**

**UAB Medical West**

**West Central Alabama AHEC**

**Alabama Statewide AHEC Program**

**Alabama Family Practice Rural Health Board**

**Children's Hospital of Alabama**

**Alabama Medical Education Consortium**

**William Carey University College of Osteopathic Medicine**

**Alabama College of Osteopathic Medicine**

**Philadelphia College of Osteopathic Medicine**



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