



MACHIS
Michigan Association of
Consumer Health Information Specialists

TENTATIVE AGENDA

April 20, 1990

Lansing General Hospital
2727 S. Pennsylvania Ave.
Lansing, MI

10:00 AM Coffee

10:15 AM Speaker
Anne Khol, ND, RN
Making the change from Women's Health Center to Nurseline

10:45 AM Speaker
Lisa Rhind, MA
The Agent Orange Clearinghouse

11:30 AM Lunch
(Provided, please R.S.V.P. to Judy Barnes (517) 377-8389 before 4/18/90)

12:30 Business Meeting

Minutes

Treasurer's Report

Old Business

Results of the survey

New Business

1990 dues

Next Meeting

Adjournment



MACHIS
Michigan Association of
Consumer Health Information Specialists

MINUTES
Lansing General Hospital, Osteopathic
Lansing, MI
April 20, 1990

The meeting was called to order by President, Glenda Evans.
Those in attendance were:

Glenda Evans
Carol Reusch
Bill Nelton
Lisa Rhind
Anne Khol
Diane O'Keefe
Judy Barnes

SECRETARY'S REPORT:

Judy Barnes moved that the minutes of the previous meeting be approved as read. The motion was seconded by Diane O'Keefe and passed.

TREASURER'S REPORT:

Jack Sewell was not present, but Glenda Evans reported that he had requested a new tax ID number but had not received a reply as yet. She also reported that the balance of the treasury was \$319.00 as of October.

Judy Barnes suggested that since dues had not been collected since the first year of the organization, that it was time again to solicit dues. It was agreed that a notice of dues should be sent with the next meeting announcement.

OLD BUSINESS:

Glenda Evans reported on the survey. She stated that the survey indicated that many members were not able to attend meetings but that many wanted a newsletter. She stated that the survey also indicated that members were interested in a book list or help with selection of consumer health materials.

Glenda said she would talk with Dave Keddle regarding the current status of the book list to be produced by CHAPIS.

Judy Barnes suggested that the demands from the survey may not be realistic for the size of the organization. In lieu of a newsletter, Judy suggested that minutes and a capsule of the speaker's report be sent out with the meeting announcement and agenda for upcoming meetings.

Notes on the Speakers
April 20, 1990

Anne Khol on Nurseline. A service of Sparrow Hospital.

Calls from the community were being directed to the nursing units for information. This presented a potential for liability since there was no documentation of how the calls were handled. It was suspected that there were some 250 calls per day.

Because of this a mechanism was needed to connect calls to services in the hospital.

It is estimated that there are some 250,000 calls are received each month. At Nurseline most calls go through a symptom based protocol on a triage unit developed software for referral.

At present some 150 to 200 calls are received each day by Nurseline. Nurseline is understaffed, but recruitment is difficult. Consequently about 20% of calls cannot be taken.

Categories of the calls received include symptom based calls such as "I'm having chest pains, what do I do?" The nurse asks questions to assess symptoms and then symptoms are put into categories of emergency,, urgent care, physician referral, manage at home, or seek medical attention.

The system now has an 800 number and calls are received over a large area including Jackson, Mt. Pleasant, Claire, Flint and Detroit.

Nurseline uses a program called Health Access which is copyrighted. Staffing includes nine nurses and three complete stations. The service is not available 24 hours per day but operates from 7:00 am to 11:00 pm.

Calls change according to time of day. During the day calls usually consist of "my friend has" such-and-such, "what does that mean?". From 7:00 am to 5:00 pm, calls usually involve referral - caller needs a physician, specialist or is changing physician. Calls received from 5:00 pm to 11:00 pm usually involve triage - or caller gives general symptoms.

Nurseline differs from HMO's who channel people away from health services and from health care institutions which usually try to channel patients to the ER.

Imbedded in the politics of a program such as Nurseline are ideas like nurses are not qualified or that they will take business away from physicians. Nurseline channels patients to physicians; educates patients; and helps patients to ask appropriate questions for more positive outcomes.

Lisa Rhind - Agent Orange Clearinghouse.

Those veterans highest at risk for complications are those who were involved in Operation Ranch Hand. These included pilots who flew through it, those who handled it in shipping and the ground troops in areas where it was sprayed.

Agent Orange was used between 1968-1970 and possible through 1972.

Chloracne was the most frequently diagnosed problem among veterans exposed to Agent Orange and until May 1989 it was the only symptom covered by the VA.

The basic complaint of veterans exposed is that the VA denies responsibility. Veterans want the VA to confess to the problems associated with Agent Orange.

In May 1989 the VA was ordered to reprocess 30,000 claims against new criteria.

The CDC selected a cancer study showed veterans were not at higher risk except for non-Hodgkin's, but this was not related to Agent Orange. Yet, benefits for non-Hodgkin's including survivor benefits were awarded.

The CDC continues to perform research. Over \$223,000,000 spent on research so far. Veterans want research monies to go to veterans with health problems.

A suit against 8 chemical companies awarded \$180,000,000. These funds were put into a trust fund. In 1987 a decision was made that this money would go to veterans but the veterans had to be long term disabled or deceased.

As of September 1989, 14 states have Agent Orange programs. Michigan is studying cancer incidence mortality, birth defects, and dioxins.

Currently a physician's resource manual is being developed at the Center for Health Promotion at the Michigan Department of Public Health.



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Meeting Notice
November 2, 1990
Michigan Department of Public Health
Host: Bill Nelton
3429 N. Logan, Baker-Olin Building, Room 2-B, Lansing, MI

AGENDA

9:00 Coffee

10:00-10:30 Speaker: Chris Kertesz, Michigan HIV/AIDS Report

10:30-12:30 Business meeting

OLD BUSINESS:

Survey Results
WMHSL Consumer Seminar
MLA CHAPIS meeting

NEW BUSINESS:

Slate of officers
Direction of MACHIS
Offer by Book Publication
CHAPIS Basic book list.



MACHIS
Michigan Association of
Consumer Health Information Specialists

November 2, 1990
Michigan Department of Public Health,
Lansing, MI

The meeting was called to order by President, Glenda Evans, at 11:15.

Minutes of the April 20, 1990 meeting were read by Secretary, Judy Barnes. Judy motioned that the minutes be accepted; Bill Nelton seconded the motion. The motion was carried.

Jack Sewell was not present to give the Treasurer's Report. Glenda Evans reported that Jack had taken a new position at Tecumseh Public Library. She said that he was still working on getting a Tax I.D. number for MACHIS. She stated that he was told that he will need a copy of the organization's "Charter" to get the number. Glenda suggested that Jack see if the Bylaws will do. Because of the non-tax-exempt status, the organization's balance is down to \$299.00. Jack will try to move the funds to his credit union once the I.D. is received so that the funds can gain interest. Bill Nelton motioned that Jack submit the Bylaws as the Charter to acquire a Tax I.D. Number. Judy Barnes seconded the motion, the motion was carried.

OLD BUSINESS:

Glenda asked if anyone had heard any additional comments from the survey. She announced that there were two new members in attendance at the meeting, Patricia Martin of Catherine McAuley and Patty Cappy of Henry Ford Hospital. Both indicated the main reason they were able to attend is the timing of the meeting.

Glenda reported that she and Jack Sewell gave a talk on consumer health information for the Western Michigan Health Sciences Libraries group.

Glenda reported that she joined in the discussion of the Newsletter Committee at the CAPHIS meeting at MLA.

Judy Barnes asked if the speaker's notes were of any value to the members. Glenda suggested that the speakers be taped and that the tapes be made available to members at a small fee. Judy Barnes agreed to look at prices for dubbing units to reproduce tapes and to meet with Glenda and Jack regarding purchase.

NEW BUSINESS:

Glenda Reported that Gale Research has approached MACHIS to edit a book on CHI. There are to be 150 different subjects. It would be up to us to get copyright approval. It was agreed that this project was more than the organization could undertake given its manpower and time availability. Judy Barnes motioned that the project be rejected. Bill Nelton seconded and the motion was passed. Judy Barnes will draft a letter to Gale Research in explanation. She will enclose a membership list in the event that Gale would like to approach individuals in the group.

Jodith Janes sent a copy of the list of books being organized by CAPHIS. Several still need abstracts, but Glenda was told not to solicit information from MACHIS members. Glenda will discuss the project with Jodith Janes and report at the April, 1991 meeting.

Nominations for officers were accepted from the floor. Nominees are as follows:

Judy Barnes, President (Nominated by Glenda Evans, Seconded by Bill Nelton)

Glenda Evans, Secretary (Nominated by Judy Barnes, Seconded by Bill Nelton)

Jack Sewell, Treasurer (Nominated by Judy Barnes, Seconded by Bill Nelton)

There will be write in spaces on the ballots.

Bill Nelton was nominated Elections Committee Chair by Judy Barnes, seconded by Patty Harper and passed.

Ballots will be mailed by November 15, 1990. Ballots must be received by December 1, 1990. Bill will count the ballots and report at the April, 1991 meeting.

At the next meeting, there will be a discussion of soliciting officers.

Judy Barnes will send a copy of the minutes along with the ballots. Judy will also send copies of the MACHIS minutes to CAPHIS.

A discussion was held concerning the direction of MACHIS. It was agreed that the organization should target more people than just the current registered members for joining the organization.

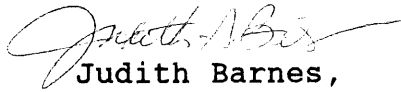
Glenda Evans suggested that MACHIS talk with MHSLA about coordinating a consumer health information workshop at the 1991 MHSLA meeting. Judy Barnes will take the idea of a MACHIS meeting on Tuesday morning with a CHI workshop in the afternoon prior to the MHSLA meeting.

Pat Martin agreed to host the April meeting at Catherine McAuley.

Patty Cappy agreed to host the June meeting at Henry Ford.

There being no further business to discuss, Judy Barnes moved that the meeting be adjourned; Bill Nelton seconded the motion and the motion was passed.

Respectfully submitted,

A handwritten signature in cursive script, appearing to read "Judith Barnes", written in dark ink.

Judith Barnes,
Secretary

SPEAKER: Chris Kertesz, Editor & Senior Reporter for
Michigan HIV/AIDS Report
Michigan Department of Public Health.

Mr. Kertesz opened the meeting with an explanation of his background and a background of Michigan HIV/AIDS Report.

The report has a circulation list of about 4,000 people and 500 newspapers and radio stations in Michigan. Its purpose is to cover information, upcoming meetings, etc. Michigan information gets precedence, followed by regional information and national news. The report also includes a summary of the monthly statistics and number of cases in Michigan as well as national statistics.

Articles vary and often include general interest and research. There is a reading page from national major medical magazines including American Journal of Public Health, JAMA, and MMWR. The slant of articles deals with AIDS or articles of interest to people concerned with AIDS, such as healthcare personnel, librarians, etc.

The report also includes a wrap-up of national, international information and sources for information. The report also has a future slant vs a historical slant. Local news (Michigan) includes previews of meetings including those within driving distance.

Mr. Kertesz was asked about a recent article which discussed the idea that there is a greater abundance of information, but a lack of change in behavior. The article also stated that education is necessary to make effective use of the information.

Mr Kertesz responded that long term habit or psychological dependence (i.e. sexual habits, drug habits) play a large part in the problem of changing behaviors. Gays because they are a well educated and well versed population are more likely to change their behaviors to save their lives than drug users or sexual partners of drug users or prostitutes. The latter population does not read the newspaper. The main source of information for this group is television or radio.

Many citizens are discouraged about reaching people and getting them to stop the drug use or unprotected sex. But we cannot stop trying to convey information. An overall effort to get into the streets is necessary to make contact with the people. We must overcome language, cultural barriers to reach these people.

Mr. Kertesz urges "universal precautions" vs. a "most of the time" practice of precautions.

Another concern is that children infected now have an added advantage of new drugs and whole health care. This will enable them to stay alive longer. Our crowded schools will face new problems of increased number of children with AIDS. This presents another concern for teachers.