

Archival & Historical Committee Saturday, March 20, 2010 Las Vegas, Nevada

Interview with Jan D. Zieren, DO, MPH, FACOFP dist.

Committee Chair: We are here today to interview our Immediate Past President, Dr. Jan Zieren. Dr.

Zieren, we are glad to welcome you here today. We would like to hear your story.

Tell us a story about your year as President.

Dr. Zieren:

It was an interesting year. I thought it was a good year. I anticipated, for probably about two years before I became the President, things that I wanted to do. So I came up with a theme of Time and then enjoyed coming up with everything that I could to use the meaning of time in many ways.

The question that I was asked is, "How was it different being a female or a woman president and how was it different than all the other presidents?" My first answer in my mind was, "I don't know, I've never been a male president. I don't know what it was like for them, so how would I know how different it was for being a female?"

Probably this difference between a female and a male president is the politics. I feel I really did well when I traveled. Many of the officers were females and every school I visited, I had a wonderful time. Then I would get to hear afterwards how grateful the students were, how much they appreciated that I would hold court. My memory most recently is in Dr. Betz's dining room. All the students gathered around, pulled up chairs, and I had all the officers of the ACOFP club chapter and the class, we all sat

around for an hour. It was a wonderful reception, a time to chat about how it was going, what was going on, and to encourage them. I also enjoyed the state visits.

Every place made me feel welcome. It was so wonderful and such a great experience, but I can't say that it was any different for me as a female than it was for any president who was a male.

Committee Member:

How did you develop your theme?

Dr. Zieren:

I took the word 'time' and everything I could through the year, I created with time as a theme. Let me give you an example. My gift to the Board when I started was a book on time management. My parting gift was an hourglass. For the destination of my summer board retreat, I chose a spot that was historic. Our discussion leader on our board retreat was a futurist. I took the Board back in time to work on the future. Even in the blogs sometimes I would use a cliché like, "The time has come," and relate the topic back to time.

Committee Member:

Very good. Thank you.

Committee Member:

Dr. Zieren, ACOFP and prior to that, ACGP, has probably been known as the Boys Club. Dr. Mary Burnett, correct me if I'm wrong, but I believe Dr. Mary Burnett was the first woman president, but she was appointed to that position.

Dr. Zieren:

Yes, she was.

Committee Member:

You are the first women to be elected to that position as president of the organization.

In the so-called Boys Club, they always received a president's ring and things like that.

Did you receive a ring for your presidency?

Dr. Zieren:

The concern I had was that the ring designed for the male presidents would not work for me. It would have to be on my right hand and that's the hand I use for a lot of OMT. I wasn't going to be wearing it when I was at work and it just wasn't going to work for me. And the female version of that ring, looked like a high school class ring. In my estimation that wasn't a viable option. We bantered about ideas such as a pin or

necklace. I had suggested a cuff bracelet, something I could clip on to my wrist and be visible with a suit on and a lot more feminine. We were able to find a jeweler, who is in my neighborhood at home who's an internationally award winning designer. The final product I would say is a very feminine design, two-toned, white and yellow gold with five stones in the green color representing the color and letters for ACOFP. It incorporated the caduceus opposite the stones. The clasp bracelet has a hidden hinge and inside the lower bracelet they engraved my name, President of ACOFP and the dates. A number of young women have come up to me - "May I see your bracelet?" I think it must have been a good choice as the president-elect of the AOA is also a female and is duplicating this for her own use instead of a ring for her presidency of AOA.

Committee Chair: What was the jeweler's name?

Dr. Zieren: GARO-DEMIRJIAN. He's in Phoenix, Arizona.

Committee Chair: And does he make them for men?

Dr. Zieren: He makes beautiful jewelry for anyone.

Committee Member: Does he do it for state organizations?

Dr. Zieren: Well I'm sure if he were contacted, he would do anything because he loves to design.

Committee Chair: Let's talk about membership.

Committee Member: One of the things that you were mentioning when you went to a group that the students gathered around you and, as a female, I see this as well with myself. We have more of a nurturing nature and future of any organization is in the youth to get them actively involved. How do you think you worked, and being a female, worked to get more people involved?

Dr. Zieren: When I spoke to the students, there were probably two things I focused in my little talks that I gave them. First, there is a variety of family practice styles. I liked to explain to them they could be good old fashioned general practitioner in rural medicine, who knew

how to set bones and do appendectomies or they could do a more urban setting. They could go into sports medicine, or they could focus on dermatology, or choose to practice OB. They could do so many things by starting with family practice, so that they knew there were many things that would give them options in the family practice primary care setting. Adolescent medicine, skip pediatrics or focus on women and children. "You've probably heard people say, - "You're too smart to be a family doctor." And I would say, "It takes the smartest to be the best doctor in a specialty with the most amazing complexities, and on the front line. It takes the smartest to be able to handle what comes in the door." "There's got to be a point in an ENT's life that it's pretty boring. Whereas in family medicine you never know. You'll never be bored in family medicine." So I challenged the students. That was the second component. Because fewer students are choosing family medicine. I challenged them to accept that this was probably the most complex, (not the deepest), but the broadest specialty that there is and we need the best and the brightest and those with the energy to help make this decline reverse. And then get involved in ACOFP to energize the organization.

Committee Member: It is important to point out that all of our organization in Pikeville are, for the most part, women leading family medicine and the club itself. In your travels throughout the colleges, did you see that, in fact as the rule instead of the exception, see women leading those programs and family medicine and are becoming family physicians throughout the country?

Dr. Zieren:

I did indeed. And what was interesting is the schools that I went to, there were a couple of males and a couple of females. The males were cordial and charming and would give me a little tour and we would have usually a meal or something together and they were good. But the women were in my face saying "We've done this, and we're doing that, and we're hoping to win this award." I experienced this for two years of travel – both as president-elect as well as president.

The other comment on the women is through the more recent years, I would say many of our resident and student representatives on the board have been female. It was a start to balancing the number of males on the Board.

Committee Member:

Boys Club.

Dr. Zieren:

The Boys Club. It's a nice change.

Committee Chair: Talk about membership this year, what happened?

Dr. Zieren:

Membership went down. We don't know why. We have wonderful ideas coming out of our Membership Committee. But financial times are down. We have a decline in people who have chosen family practice. We realized that we don't always get our residents after they are done with residency and students are choosing allopathic residencies. So when they get out and they're done, it's hard for them to get back into the ACOFP family. We're working on that. The other thing is that we are making connections and relationships with the AAFP.

Committee Chair: You said that we are working on regaining the ACGME residents.

Dr. Zieren:

It has to be through AOA, Dr. Shannon Scott did a report on this process. Problems and flaws were brought to the AOA's attention. It's a major expense to the physicians and an involved process for residents to return to ACOFP.

Committee Member:

One of the major things is when they're doing an allopathic residency and they are then joining instead of going out into solo practice, they're joining hospital staffs. They have an allotment of X amount of dollars that you can spend for your exam to get your certification and if they did an allopathic, they have to have the allopathic certification and then it would be a duplicate financial expense for the osteopathic. It's a major concern.

Dr. Zieren:

It is. We have even talked about whether we could honestly accept an allopathic certification and just slide it over. The fear is losing the osteopathic part.

Committee Member:

The one thing when I heard about all of this, I thought of my husband because he got his boards in Ohio. When he came back to Pennsylvania, they accepted his Ohio, but he had to do the osteopathic portion and maybe we can do something like that with a lower cost to the residents.

Committee Chair: Were there many challenges with the budget this year?

Dr. Zieren:

There was a significant problem. My attempt was to be extremely fiscally responsible. I limited my trips. I delegated board members in proximity so if there were two meetings at the same time for example, one was Pennsylvania and one was in Florida. Dr. Carol Henwood, being on the board, was already in Pennsylvania. She could represent me in Pennsylvania without the expense of that flight. I could go to Florida and do that one. The representation was there and it was at lower cost. The major decrease was our investments and a lot of funding from pharma for the world. ACOFP went down. We lost about \$420,000/430,000, but we were at or below budget on everything that we spent.

Committee Member:

I think it's important to point out even on tape that the historical perspective because people will think that there's a management issue, but it's a historical perspective that people lost approximately a third of their worth because of the downturn in the economy during this period of time and so it really is important to point that out on the tape. I know it's a sidebar. When you're trying to be fiscally responsible, you do as much as you can, but you have no control over a third of your wealth going down the toilet.

Committee Member:

I lost 42% of mine.

Dr. Zieren:

And we were better off than many. Our loss was a smaller percentage than many of the other boards that we compared ourselves to.

Committee Member: Do you think that

Do you think that the online credentialing for the attestations is going to limit people coming to future conventions? Because I've heard comments from people.. The attestation is how to get CME credits.

Dr. Zieren:

That's something that we're experimenting with this year. You could originally just sign up for the convention, sign a paper and turn it in and leave. We're trying to find a way to attest that one has attended the lecture by evaluating the lecture. I have not heard the comments that you must be alluding to.

Committee Member: There's some of the older members who don't have computers.

Dr. Zieren: But we have them here, they're provided.

Committee Member: They were complaining that it takes extra time to do this whole thing.

Dr. Zieren: Absolutely it is and we appreciate that concern, but we've got to think of something, and this was our first trial. However I didn't see long lines and there were several

stations.

Committee Chair: How was the communication with the membership this year?

Dr. Zieren: We have a "blog" once a week. Each time we send out a blog, we included

something from me, something from Keith Studdard, our lobbyist from Washington,

DC, something about the students. We wanted every group of our membership to feel

that they were addressed. I wanted honors in the blog. Each week before our fall

convention, I had one of our board member's photo and something that was special for

them so that by the fall convention, each board member had been highlighted. At the

end of each blog, we had an email reply to the president. The staff was able to help

me answer many of the questions we received so I felt that communication was pretty

good. We also had our state visits, school/student visits, and visibility at conventions.

Committee Member: For historical perspectives, what's a blog? I'm picturing this coming out and 50 years

from now when people are reading through this and they're trying to figure out: What's

a blog?

Dr. Zieren:

Well actually ours is not officially a blog, but about two presidents ago, Dr. Rubin attempted to become more electronic in connecting and communicating with the members. He created this newsletter, a mass email, from our headquarters that he called "The Blog." Dr. Rubin tried sending emails several times a week. Dr. Martin and I carried on the tradition as a weekly communication and we continued to call it a blog. I believe a blog officially is an ongoing conversation where the members' responses would show up. Everyone can read not only what was put out by the company, but all responses.

Committee Chair: For historical purposes, mention a little about SGR.

Dr. Zieren:

The SGR, Sustainable Growth Rate, is the rate that Medicare reimbursement uses and is a flawed system that's based on gross national product. They're having a lot of trouble creating a Medicare reimbursement that they can afford, so they keep attempting to cut it. It's creating an uproar with physicians who may no longer want to be Medicare providers. It's also unfortunate that many insurance companies base their reimbursement on the SGR Medicare-based reimbursement which then makes things worse overall for everyone. That has been one of the health care reform concerns. We're always using our lobbyists, as well as other medical groups to let Congress know, that we're not happy with that cut because we don't feel it's fair to us.

Committee Chair: And you mentioned health care reform, how did that impact your presidency?

Dr. Zieren:

It became the ever pervasive issue for about everything through the entire year. Our lobbyists were helping us. We needed help from the members through the OPAC and through AOA as well as ACOFP. We were constantly trying to get our members to contact their own Congressman and their own legislators because that's where it has to be from. And the health care package President Obama is trying, even as we speak, we call it: Obama Care legislation that would provide increased access to care for people who do not have insurance. It's at the expense of many, many other components.

Committee Chair: To bring closure to this interview, is there anything else that we have not asked you

about? Do you have any additional comments?

Dr. Zieren: Perhaps how about "What was my biggest accomplishment during the year?" I

thought it was the relationships that I tried to make. I tried to build bridges or mend

bridges by being the nurturing president as opposed to a confrontational one. I opened

communication to many groups and that has been commented on by either the other

groups or by people observing on the outside. This makes me feel it was worth my

energy.

My biggest disappointment was I had wanted to bring ACOFP to national attention

somehow, someway. I talked to the president of AAFP and I said, "Here are two

female presidents at the very same time of the two largest organizations of primary

care. Why don't we get on Oprah?" I was looking for a venue where we could talk

about primary care to a national audience. We could even bring up the medical home

concept. I thought about working with the surgeon general as she was an MD but DO

friendly. If we had a project that we could work together it would create a national

presence. Part of my disappointment was not creating or getting that national

attention.

Committee Member:

What was your fondest memory?

Dr. Zieren:

I guess it's more personal. My board retreat. I did team building in between the more serious sections. I had our board members work together with puzzles and building spaghetti/marshmallow towers and lots of little team building games. The culmination of our board retreat was a dinner at the side of the ocean on the 4th of July with the

best fireworks you ever have seen! The entire retreat was quite satisfying.

Committee Member:

Did you actually get coordination with the AAFP versus collaboration, because I

know this is what our project is on a state level?

Dr. Zieren:

When I was first inaugurated, the president-elect, Dr. Lori Heim spoke. The presidentelect the following year was unable to come so they re-sent Dr. Lori Heim. I was invited to speak at the AAFP. Lori Heim and I connected wonderfully. It was a great relationship. She and I are still hoping we can do more together when we're not so busy being presidents.

Committee Chair: Thank you so much for being here today.

Dr. Zieren:

Thank you.

Committee Chair: And more so because this is a historic time, the first elected female president of ACOFP. We appreciate your service and appreciate you sharing some time with us this morning. Thank you.

Dr. Zieren:

Thank you.