



**The Center for Health
Services Research**

Health Care Notes

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In this issue ...

*Conference on "Health as
an Economic Engine"*

*Public health care concerns
and priorities*

*Center faculty present
papers at national meeting*

*Public health workforce
development*

Short Notes

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CENTER RECEIVES GRANT FOR "HEALTH AS AN ECONOMIC ENGINE" CONFERENCE

The Center for Health Services Research received a grant from the Agency for Health Care Research and Quality (AHRQ) to convene a regional conference entitled "Health as An Economic Engine in the Mississippi Delta." The project was developed in collaboration with the University of Arkansas College of Public Health, the Social Science Research Center of Mississippi State University and the Memphis Regional Chamber of Commerce. The conference is scheduled for Thursday, November 20, 2003, in Memphis.

The underlying theme of the conference is the relationship between the health of a community and its economic development. Sustained economic development is dependent upon a healthy community and a healthy workforce, and direct investment in promoting health in the Delta is a necessary precursor to enhancing economic growth in the region. That is, health is an economic engine. This relationship has been demonstrated in European, Asian and African nations and formed the basis of the recent World Health Organization report, "Macroeconomics and Health: Investing in Health for Economic Development."

The conference has two goals. The first is to raise the general awareness of the importance of health as an economic engine in both the business and the academic communities. The second is to expand collaboration among businesses, universities and research groups in the Delta to build an integrated practice and research agenda aimed at enhancing the health of the region.

Guest speakers will include Dr. David Bloom of the Harvard University School of Public Health and Dr. Claude Earle Fox, former Administrator of the Health Resources and Services Administration. In addition, local and regional experts in health and the social sciences will participate as members of panels.

For additional information, please contact The Center for Health Services Research at (901) 448-5826 or by e-mail at centerhs@utmem.edu.

NATIONAL POLLS IDENTIFY PUBLIC'S HEALTH CARE CONCERNS AND PRIORITIES

A series of national polls conducted during 2003 by the Kaiser Family Foundation have documented the health care priorities and concerns

(continued)

Health Care Notes

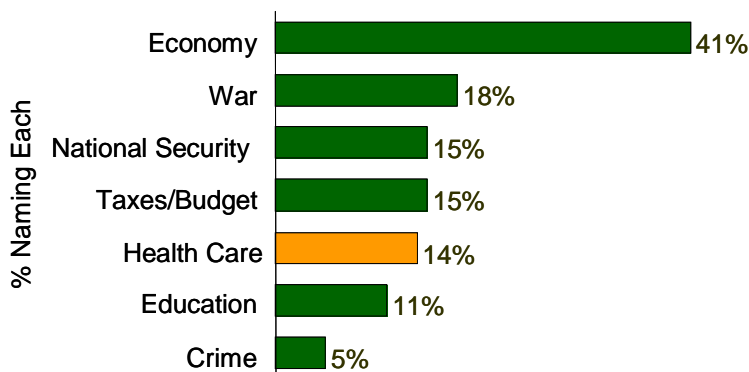


Page 2

of the public. Over 1200 persons were contacted by telephone during the month of June, 2003.

Only 14% of those polled identified health as the most important government problem (Figure 1). Among health care issues, cost was identified as the most critical issue by 38%, whereas “access to care and insurance” was listed as most important by only 23%.

Figure 1: Responses to the question “What do you think is the most important problem for the government to address?”



Source: Kaiser Family Foundation *HealthPoll Report*.

“While experts cite advances in medical technology, including prescription drugs, as the biggest reason health care costs are rising, the public is less likely to recognize this as an important reason....”

- Kaiser HealthPoll Report,
May/June 2003

Other notable findings included:

- ◆ The public was equally divided on the question of whether government (46%) or the marketplace (44%) would do a better job of controlling health care costs.
- ◆ When asked which factors contributed to rising health care costs, 68% identified high profits by drug companies as being “very important; 60% included malpractice claims and 59% included waste and greed as being “very important”.

Full results of the survey can be found on the internet at www.kff.org or from The Center at centerhs@utmem.edu.

CENTER FACULTY PRESENT PAPERS AT ANNUAL MEETING OF HEALTH SERVICES RESEARCH ACADEMY

Drs. Michal Tamuz and Teresa Waters, faculty in The Center and the Department of Preventive Medicine, University of Tennessee Health Science Center, presented papers at the Annual Scientific Meeting of AcademyHealth, the national professional organization for health services and policy research. The meeting was held in Nashville, in June 2003.

Dr. Tamuz’s paper was entitled “Event Classification in Patient Safety Reporting Systems.” The study demonstrated how the definition of a medication error varies from site to site. Because of this variation, some potential medication errors were “defined away”. That is, because the event did not meet a pharmacy’s

working definition of “error”, it was not reported, so that the true incidence of errors may be substantially underestimated.

Dr. Waters presented a paper entitled “Impact of System/Network Membership on Hospital Costs.” The project examined the relationship between hospital membership in a network or system on changes in a hospital’s costs between 1994 and 1998. The unified ownership structure of a system helped member hospitals reduce costs. However, the diversified ownership structure of hospital networks did not result in lower costs and may even increase costs.

For additional information, please contact Dr. Tamuz or Dr. Waters at (901) 448-5826 or by e-mail (mtamuz@utmem.edu or twaters@utmem.edu).

CENTER TO COORDINATE STATEWIDE PUBLIC HEALTH WORKFORCE DEVELOPMENT PROJECT

The Center for Health Services Research has been designated as the coordinating center for the Tennessee Consortium for Public Health Workforce Development. The project, funded by the Tennessee Department of Health, is designed to provide graduate-level education programs for the state’s public health workforce. It is part of Tennessee’s efforts to enhance its public health infrastructure in response to the threats of bioterrorism and new emerging infectious diseases.

The Consortium includes the College of Public and Allied Health of East Tennessee State University, the Knoxville and Health Science Center campuses of the University of Tennessee, and the Tennessee Department of Health. The three academic centers will develop and implement courses in basic public health disciplines that will be taught using distance learning methods. Certificates will be awarded after completion of the required curriculum. Students may enroll at any of the three campuses and register for courses developed and taught from any of the Consortium members. Initial programs will be in applied epidemiology and public health leadership.

For additional information, please contact The Center at (901) 448-5826 or by e-mail at centerhs@utmem.edu.

“In a world where health threats range from AIDS and bioterrorism to an epidemic of obesity, the need for an effective public health system is as urgent as it has ever been.”

- “Who Will Keep the Public Healthy?”,
Institute of Medicine, 2003

Health Care Quote

“... a critical challenge facing the field of health services research ... is to make sure that we don’t lose sight of the next step: to go beyond simply identifying a problem to doing what needs to be done to make a difference. In other words, health services research must go beyond galvanizing attention to galvanizing action.”

-- Carolyn M. Clancy,
Administrator, Agency for Health Care Research and Quality

Health Care Notes



“The findings of this study suggest that 29% of all homicides and 71% of all suicides are attributable to guns kept in U.S. homes.”

- Leonard Davis Institute of Health Economics

Page 4

Short Notes

- Women living in a home where a gun is present are 2.7 times as likely to be a homicide victim than persons with no gun in a home. Men with guns in the home were 1.2 times more likely to homicide victims. These findings are from a national study reported in the Annals of Emergency Medicine by investigators from the Leonard Davis Institute, the University of Pennsylvania.
- The U.S. General Accounting Office reported that 20% of nursing homes in the nation have been cited for “actual harm or immediate jeopardy” to residents in 2001. This number, while lower than the 29% figure reported in an earlier study from 1999-2000, remains, according to the report, “unacceptably high.” In Tennessee, 16.7% of the 377 nursing homes surveyed were cited.
- Over half of state legislators say their state has lost ground over the past two years in areas related to health and health care, according to a survey by the Pew Center on the States. Only 19% reported their state to be making progress. Over 70% said that spending cuts in health care were “very or somewhat” likely.
- The Pew Center study also reported that voters in legislator’s home districts had more influence over policymaking decisions than did any other group. Almost all (99%) of state legislators said that voters were very or somewhat important in decision making, compared to 79% for party leaders and 77% for lobbyists.
- According to a report from the National Conference of State Legislators, in 2002, states allocated 30% of the total funding from Tobacco Settlement Revenue to health services, 5% to tobacco prevention and 6% to research.

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