

# inside VIEW



A LOOK INTO THE WORLD OF HEALTH SYSTEM FACULTY AND STAFF



Lourdes Velez, M.D., (left) and medical assistant America Jimenez consult with a patient. Bilingual medical staff are trained in the specialized language skills and cultural knowledge needed to provide quality bilingual services.

Velez adds, "Latinos are from a collection of more than 20 Spanish-speaking countries, each with unique health practices. It is important to have culturally sensitive staff to assist providers in the care of Latino patients."

Simpson took the training because she remembers a time in her own life when she was faced with the language barrier. Though she spoke some English when she came to the U.S. in 1984, it was difficult for her to explain a genetic condition to her physician when she was pregnant.

Jimenez says that having family members translate can be dangerous, citing the case of a pediatric patient in Arizona who died from a burst appendix. The girl was the only English-speaker in her family and couldn't tell her parents what they needed to know about her condition.

"Spanish-speaking patients need to have preventive care instead of just coming to the hospital or clinic when they are sick," Jimenez says. "They worry about the language, about their legal status, and I simply wanted to help the Hispanic community."

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## PROFILE

# SPEAKING THEIR LANGUAGE

**Ypsilanti Health Center aims for culturally competent care for the Latino community**

Francisca Hollis, patient services assistant at the Ypsilanti Health Center, knows how challenging it can be for Spanish-speaking patients to communicate with caregivers. Growing up in a small Mexican community with many immigrant workers, she was the only person in her family who spoke English. Family and friends relied on her to interpret during medical appointments. She remembers being pulled out of school each year to accompany her grandfather to the doctor.

"Everyday language in English is different than knowing and speaking medical terminology," Hollis says.

The Ypsilanti Health Center is working to address the many

barriers between Latino patients and preventive health care. That's why Hollis, along with medical assistants America Jimenez and Jacqueline Simpson, participated in training to teach bilingual medical staff the specialized language skills and cultural knowledge needed to provide quality bilingual services. Hollis, Jimenez and Simpson recently graduated from the Spanish Bilingual Assistant training program. Taught by Maria Militzer from Interpreter Services, the training required giving up their free time on Saturdays for the 8-week class.

"This training was important to provide culturally competent care to our patients," says Lourdes Velez, M.D., who is working to establish a Latino clinic at the Ypsilanti Health Center, offering care two half-days each week. There is a growing need to serve this rapidly growing group, the largest minority in the U.S.



Francisca Hollis, Lourdes Velez, M.D., Jacqueline Simpson and America Jimenez are part of the team of specially-trained Spanish language staff who work with patients at the Ypsilanti Health Center. Their goal is to have a Spanish-speaking provider available at the Center every day of the week.

**@ ON THE WEB** Ypsilanti Health Center: [www2.med.umich.edu/healthcenters](http://www2.med.umich.edu/healthcenters) (find it by clicking "Ypsilanti" on the map). UMHS Portal En Español: [www.med.umich.edu/espanol](http://www.med.umich.edu/espanol). UMHS Interpreter Services: [www.med.umich.edu/interpreter](http://www.med.umich.edu/interpreter).

about inside VIEW

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# LETTER FROM THE EDITOR

This issue's Taking Care of Our Own article focuses on the importance of maintaining a professional appearance. Now, I am the first person to admit it: I hate clothes shopping! The mall is toxic to me. It's like there's a limited amount of air so I can't stay too long before succumbing to the symptoms of mall fatigue, including crankiness, low self-esteem, etc. I frequently watch shows like TLC's "What Not to Wear" and worry that one day

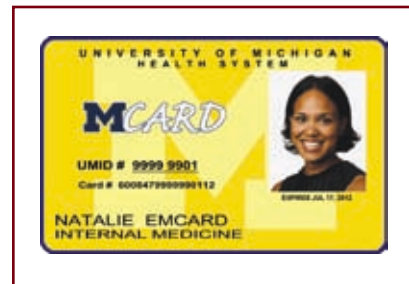
I might end up in front of the 360 degree mirror discussing my "shape." But, like it or not, how we look impacts how others perceive us both personally and professionally. This human nature response applies to the first time you meet your sibling's boyfriend or a new neighbor, as well as the first time you meet and interact with a patient, family member, colleague or other customer. I'm not saying we have to break the bank on a full closet of the latest fashions, but the article on page 8 is

a nice reminder why it's important for employees at a world-class institution to look professional. Another great reason to focus on this topic is that it was suggested by an *Inside View* reader. If you have an idea for an article on how we can better Take Care of Our Own—or on another subject that will help Health System faculty and staff work better and build community—please send it to [insideview@umich.edu](mailto:insideview@umich.edu).  
Yours in fashion,  
Allison

## SAFETY ROUNDUP



**UMHHC red phones:** Across the Hospitals and Health Centers, red emergency back-up phones are installed in key clinical locations as part of the redundant phone system in place to protect us should our primary phone system fail. Though failure is rare, all red phones must remain connected at all times. If an outage occurs, you can use red phones to make outgoing calls and provide a call back number. More safety resources: [www.med.umich.edu/i/sms](http://www.med.umich.edu/i/sms) and [www.oseh.umich.edu](http://www.oseh.umich.edu).



**Key card access to Medical School buildings:** After 5 p.m., external access doors to all Medical School buildings lock automatically and can only be accessed via key card. Hard keys no longer work as of March 3. Please make sure you have an up-to-date U-M Medical School identification card so you can enter Medical School buildings after hours when necessary.



**Register for UM Emergency Alert:** UM Emergency Alert is a mass urgent notification system available to all faculty, staff and students. By registering for this system, you can receive an alert when an active, major campus emergency exists. To register and get more details about the system and when you can expect to receive notification, visit [www.umemergencyalert.umich.edu](http://www.umemergencyalert.umich.edu).

## TEST YOUR IV IQ



You've learned so much from reading each issue of *Inside View*. Now, it's time to cash in on that knowledge by testing your *Inside View* IQ. In addition to the fun you'll have completing the short quiz, you'll be eligible to win fabulous prizes.

**You'll flip!**  
Complete the quiz for your chance to win a Flip Ultra video camera!

Get a perfect score on the quiz and you'll be entered in a drawing to win a Flip Ultra video camera. Everyone who enters will be eligible to win one of 50 *Inside View* mini basketball hoops—an office must-have for those days that seem to drag on forever.

Memory retention not what it used to be? Don't fret. You can review past issues of *Inside View* in our online archives. That's not even cheating—it's using your resources wisely. Consider this a new age version of an open book test.

## AROUND UMHS

The **Medical School Web site** has been updated and renovated. The site's new look takes advantage of the Health System's well-known visual identity and brand. Streamlined and updated content ensures visitors have easy access to all things U-M Medical School. The home page includes news and events, shortcuts, featured images and one-click links to sections that detail how we fulfill our three missions: Education, Research and Patient Care. Check out the new site:

[www.med.umich.edu/medschool](http://www.med.umich.edu/medschool)

Campy humor, stories from the heart and the opportunity to observe what happens in and around the Health System—that's what **Inside View Cam** brings to our faculty, staff and students. Each issue of Inside View Online includes at least one video guaranteed to provide a deeper look into the world of Health System employees. Videos are produced by, for and feature our own

faculty, staff and students. Watch the latest episode of Inside View Cam at:

[www.med.umich.edu/insideview](http://www.med.umich.edu/insideview)

The **U-M Department of Radiology** was the cover story in a recent issue of *rt image*, a weekly online, e-mail and print magazine for medical imaging professionals. The article covered the department's 110-year history, including the impact of radiology and nuclear medicine on patient care, education and research—and the Health System's position as one of the leading institutions for diagnostic imaging, interventional radiology and nuclear medicine. This in-depth article also describes the \$42.9 million expansion of our radiology and image-guided facilities; our research, training and continuing education programs; and our growth in pediatric and adult imaging. Read the article:

[www.rt-image.com/0324Difference](http://www.rt-image.com/0324Difference)



**The Magic Bus** is more than a fond reference to the '60s—it's also the name of the online tracking system for the Commuter Northbound, Commuter Southbound and Northwood buses. The Magic Bus Web site features service alerts and notifications, a page that displays estimated arrival times and multiple map views—the "Stop View" and "Route View" show the current bus location, with the latter tracking the bus as it moves along its route, and the "Line View" is like a subway route view that identifies all stops and how many minutes away the bus is from each. This convenient tool is one more way U-M Parking & Transportation Services is making it easier to curb your car and take advantage of public transportation. Feel the magic:

[mbus.pts.umich.edu](http://mbus.pts.umich.edu)



Staff from UH 6B use the new patient glide sheets to safely and smoothly transfer a patient. The glide sheets require fewer staff to transfer a patient.



## a smooth transition

### Go Ergo! Effective Ergonomic Solutions Awards

Michigan Healthy Community will celebrate National Ergonomics Month this October with its third Annual Ergo Grants and Awards Program.

In the March/April issue of *Inside View*, we featured an article on the Ergo Grant Incentive Program, which supports ergonomic efforts at U-M by providing financial help to purchase equipment, conduct training or redesign work processes to solve ergonomic problems and help maintain a safe, healthy, efficient work environment. In this issue, we're highlighting the Effective Ergonomic Solutions Award, which recognizes units that have independently implemented a successful ergonomic solution.

The most recent recipient of an Effective Ergonomics

Solutions Award was UH 6B Nursing for their implementation of patient lift sheets.

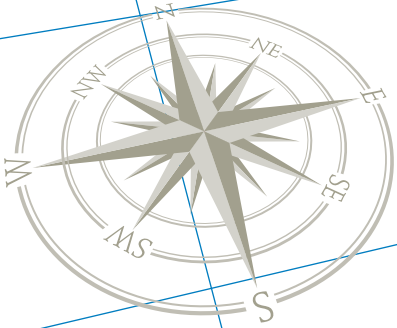
"We had been using sheets over clean plastic bags to help facilitate the transfer of patients," says Diane Schrock, R.N., who commanded the effort on her unit. "Maxitubes and Ross Ready Slide tubes have made it easier on the patient to glide them during a transfer. Now, fewer people are needed to transfer each patient."

"6B is representative of many patient care units that have instituted ways to make patient handling safer for the medical staff," says Suzanne Bade, M.P.H., O.T.R., chairperson of the Michigan Healthy Community Ergonomics Awareness Program. "They went that extra mile to do it on their own."

Both the Effective Ergonomic Solutions Award and the Ergo Grant Incentive Program will be held this October. If you've done something to improve the ergonomic safety of your unit, or if you have an idea but seek funding, be sure to apply!

Visit [www.med.umich.edu/insideview](http://www.med.umich.edu/insideview) now to test your IV IQ. Complete the quiz by Sept. 1, 2008, to be eligible for one of our amazing prizes.

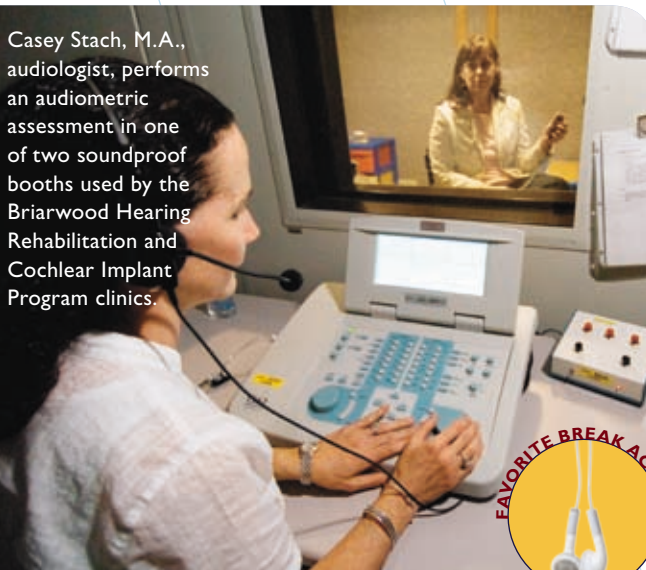
@ ON THE WEB Learn more:  
[www.hr.umich.edu/mhealthy/improve/ergoindex.html](http://www.hr.umich.edu/mhealthy/improve/ergoindex.html)



# YOUR GUIDE TO THE HEALTH SYSTEM AT BRIARWOOD

**S**ure, you can get the latest summer fashions at Briarwood Mall, but here at the Health System we're excited about Briarwood for a different reason. The Briarwood buildings surrounding the mall offer a wide range of health services and clinics, from Audiology to Integrative Medicine to Speech. Take our tour of what Briarwood has to offer ... and you don't even have to try on bathing suits.

Casey Stach, M.A., audiologist, performs an audiometric assessment in one of two soundproof booths used by the Briarwood Hearing Rehabilitation and Cochlear Implant Program clinics.



## BUILDING 1

### Hearing Rehabilitation Center

- Cochlear Implant Program
- Audiology

### Center for Reproductive Medicine

"Our program is one of the largest in the country; we've implanted more than 1,400 [cochlear implant] devices in adults and children. Being deaf isn't just a personal issue, it's a family issue. We work closely with the family to involve parents, audiologists, patients and doctors—an entire team to help educate and support the family."

— TERRY ZWOLAN, PH.D., CCC-A, DIRECTOR, COCHLEAR IMPLANT PROGRAM

Listening to tunes at Apple Computer

# there's more to BRIARWOOD



Occupational therapist Anne Chadwick works with a patient on the "Tricky Tree" to help improve his fine motor skills.

## BUILDING 4

### MedRehab

- Department of Physical Medicine and Rehabilitation
- Physical Therapy
- Occupational Therapy
- Speech
- Neurorehabilitation

"We offer innovative clinical programs designed to help individuals with disabilities become healthier, stronger and more independent."

— EDWARD A. HURVITZ, M.D., ASSOCIATE PROFESSOR AND CHAIR, DEPARTMENT OF PHYSICAL MEDICINE AND REHABILITATION



Trying on new athletic shoes at Foot Locker

## BUILDING 5

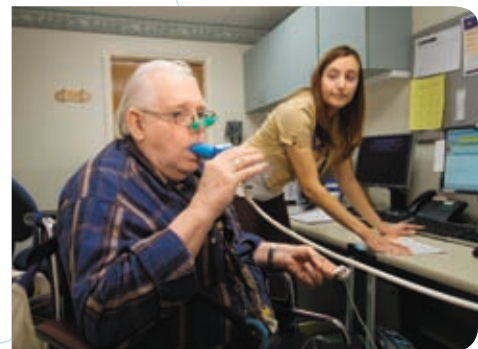
- General Pediatrics
- Internal Medicine Specialists
- Pediatric Specialists
- Ophthalmology
- Neurology

"The Comprehensive Ophthalmology Clinic at Briarwood provides refractive, medical and surgical care for all types of conditions of the eye and surrounding structures, whether routine, urgent or emergent. This service also provides the basic evaluation for patients who may require subspecialty ophthalmological care or other services of the Kellogg Eye Center."

— REBECCA WU, M.D., DEPARTMENT OF OPHTHALMOLOGY AND VISUAL SCIENCES



Trying on shades at Sunglass Hut International





Technician Deborah Horn performs an echocardiogram at the Center for Cardiology and Diabetes at Briarwood. Clinicians at the Center also perform stress tests and offer nutritional counseling to cardiac patients.

**BUILDING 2**

**Center for Cardiology & Diabetes  
Internal Medicine**



Heart healthy lunches at Sushi Café

“Health System cardiologists at Briarwood see patients with suspected acute or chronic cardiovascular disorders and work closely with other specialists within the medical group to treat diabetic patients who are at high risk or have cardiovascular disease.”

— WILLIAM F. ARMSTRONG, M.D.,  
DIRECTOR, ECHOCARDIOGRAPHY LABORATORY

**BUILDING 3**

**Briarwood Medical Group**

- General Medicine
- Obstetrics & Gynecology
- MLabs

“Our obstetricians believe in a family-centered approach to care. We specialize in women’s health care and offer general and preventive medicine, routine gynecological exams, premarital exams, pregnancy and childbirth care, and family planning, menopause and perimenopause counseling.”

— DAVID MARZANO, M.D., DEPARTMENT OF OBSTETRICS AND GYNECOLOGY



David Marzano, M.D., consults with a patient and her daughter during a routine prenatal checkup at the Briarwood Medical Group.



babyGap

# WOOD than shopping

Left: Pulmonary technologist Julie Anderson performs a lung function test for a patient at Briarwood Medical Group. Below: Ophthalmology technician Gretchen Ford conducts an eye exam.



**BUILDING 9**

**Radiology**

“Radiology at Building 9 supports outpatient services for the Health System. Imaging services at the site include general imaging, ultrasound and breast imaging.”

— GERI WILL, M.D., DIRECTOR OF RADIOLOGY CLINICAL OPERATIONS



After watching the small screen all day, head to the Dollar Movies 4 to check out the big screen.



Radiologic technologist Lyn C. Hansen reviews a patient’s chest X-ray. The clinic also offers scheduled ultrasound services and screening mammography, as well as walk-in X-rays.

**BUILDING 10**

**Briarwood Family Medicine**

- Family Medicine
- Integrative Medicine
- MLabs

“As a healing-oriented approach to medical care, Integrative Family Medicine takes into account the whole person—body, mind, spirit and emotion—including all aspects of lifestyle.”

— SARA L. WARBER, M.D.,  
CO-DIRECTOR, UNIVERSITY OF MICHIGAN INTEGRATIVE MEDICINE



Andrew H. Heyman, M.D., M.H.S.A., performs acupuncture. U-M Integrative Medicine often serves as a bridge between complementary/alternative and conventional medicines.



After a stressful trip to the mall, head downtown to RelaxStation for a healing massage

FROM BENCH TO BEDSIDE

# NEW KIDNEY ON THE BLOCK

U-M team develops bioartificial kidney



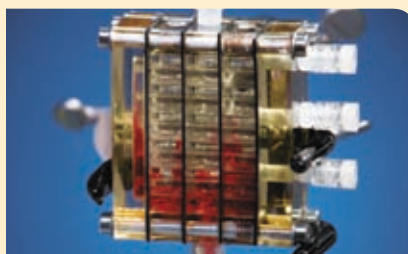
Above: H. David Humes, M.D., leads a team that developed a bioartificial kidney. Right: Humes with research assistants Deborah Buffington and Gretchen Hageman. Below: The device's cartridge filters blood and is connected to a renal tubule assist device, which is made up of hollow fibers lined with a type of kidney cell that helps the body fight infection.

## 1 Proof of Concept

Humes' latest study, published in April, reveals that short-term replacement of renal cell function using the renal tubule assist device, or RAD—the living-cell cartridge that is key to the function of the bioartificial kidney—reduces deaths by 50 percent.

"Our study results are encouraging, and they raise expectations that our new approach may yield a better treatment for life-threatening acute renal failure, for which a high mortality rate has remained unchanged despite years of advances in conventional therapies," Humes says of the Phase II trial, which included 58 patients at 12 medical centers across the country.

"Even more promising, the nature of our new approach—using living cells as therapeutic agents—argues for the feasibility of developing whole classes of new cell-based and tissue-engineered therapies."



## 1 The Concept

Despite improvements in medical care and dialysis therapy, only about half of patients with acute kidney failure caused by kidney injury survive.

The reason for their kidney failure is distinctly different from those whose kidneys have been worn out from years of diabetes or hypertension. Rather, the damage to the kidney cells is from shock, chemotherapy agents or even some antibiotics.

But promising results from a clinical trial led by H. David Humes, M.D., a professor of Internal Medicine at the U-M Medical School, show that a bioartificial kidney—one that may one day be worn as a backpack or on a belt—can reduce deaths and speed recovery of kidney function for patients with renal failure resulting from acute injury.

Humes' device replaces the work done by the kidneys, the powerful clearinghouses that, when working normally, clean the blood of toxins and help with immune regulation.

**"If you get the patients through their acute kidney failure, 90 to 95 percent of (them) can repair their kidneys. So it's really trying to get the patients to survive, because if given enough time, they'll heal."**

—H. DAVID HUMES, M.D.



## 3 Treatment Today

Dialysis has been the go-to standard for caring for patients with kidney failure, but Humes came to believe that something must be missing after years of seeing patients living, but hardly thriving.

"They're debilitated and don't feel well most of the time," he said. "That's because an artificial membrane does not replace a lot of the things that the cells do."

## 4 Treatment Tomorrow

The missing link—the key to patient survival and quality of life—is natural living cells.

The bioartificial kidney includes a cartridge that filters blood as in

traditional kidney dialysis. That cartridge is connected to a renal tubule assist device, which is made up of hollow fibers lined with a type of kidney cell.

These adult cells, retrieved from donated kidneys that cannot be transplanted, are intended to reclaim vital electrolytes, salt, glucose and water, as well as control production of immune system molecules called cytokines, which help the body fight infection.

The benefits of the device, initially tested in animals in 1999, must be confirmed in larger trials. Humes is also continuing to address the challenges of mass producing, miniaturizing and shipping the living-cell device.




Before completing their lean project, the UH Social Work staff needed an entire room to keep their supplies. With a streamlined supply ordering process, they now use the room for conference space.

## SUPPLY-SIDE. economics

UH Social Work Supply Team thinks lean

When the UH Social Work Supply Team decided to streamline their supply ordering process, they got a whole lot more than they bargained for.

Using lean thinking, the team developed a standardized supply order list, substituting less expensive products to save money where possible. For instance, they researched, accepted bids and chose a new vendor to reduce the cost of toner cartridges.

Savings also resulted from no longer stocking supplies that staff could provide themselves (such as tissues, a \$1,000 a year savings), and charging other departments for the supplies they were using regularly. They also made quick fixes such as adding copier counters.

The team consisted of Leanne Mannor and Byron Myer, administrative assistants; Stefanie Peters, A.C.S.W., M.P.A., Social Work manager; and Mary Ann Wilson, executive assistant associate. The lean team also formed a Supply Committee that meets quarterly to forecast supply costs for capital, operational and facility items.

"The ultimate goal is we're all becoming better stewards of our resources," says Peters.

Another big payoff came in freed-up staff time, achieved through collaboration with Volunteer Services that trained volunteers to deliver mail.

But the biggest surprise was more space. Because the lean team adopted a stock ordering pull system—ordering only when someone needs the product—they cut down their storage space to one cabinet and opened up a whole room to use as conference space.

"It became evident really quickly that we could eliminate the supply room," says Peters. "Management support and having all the right people at the table were two key components to our success."

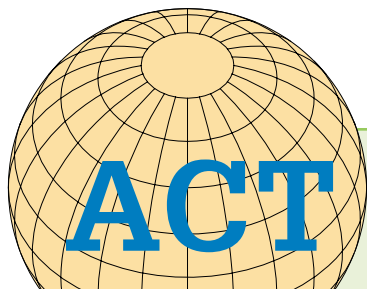
"I believe all departments should look into trying a lean project in their area," says Myer. "The size of the project doesn't matter. If you take the time and analyze any process, I promise that you will be able to cut out an extra step or an additional hand-off that wasn't needed."

"This lean project really hit home

about how seemingly small things can affect a department in a big way," adds Peters. "This is where staff at every level can participate. You can really see the impact on the bottom line. And, whenever you improve a system from the inside, the patients and the families benefit."



Stefanie Peters, Leanne Mannor, Mary Ann Wilson and Byron Myer stand in what used to be the storage room that they now use as a small conference room thanks to lean thinking.



## ACT GLOBALLY

U-M has a global impact with international relief work and medical school partnerships



Susan Klimist, a UMHS physician assistant, provides medical supplies and clothing to Burmese refugees at a clinic run by Shan Women's Action Network in northern Thailand.

When University of Michigan physician assistant Susan Klimist packs for trips to Thailand, her checklist includes antibiotics, Ace bandages, eye drops, fleece jackets and toothbrushes. Once she even took a microscope.

Klimist, a PA in the Emergency Department, has made at least five relief missions over the years to nations bordering Myanmar, also known as Burma, to assist refugees fleeing military rulers. Future missions will be crucial as the country recovers from natural disaster.

"I could feel my heart break when I heard the news," Klimist said of the cyclone that struck May 3. "My next trip is planned for November, but because of this I feel like it should be sooner."

Klimist has been a physician assistant for 23 years—seven with U-M. She's worked as long as three weeks in a small Thailand hospital where about 30 babies are born each month and a small operating room is put to use for

procedures such as hernia repair.

"The work we do is tremendously appreciated," says Klimist, who pays for the trips herself so resources go to those in need.

Klimist's visits to India and Thailand have been part of her work as a member of Burma Relief Center-USA, a non-profit humanitarian aid group. Many U-M faculty and medical students go overseas to provide care, conduct research, train and educate through various programs such as Global REACH, a U-M medical school initiative to benefit patients worldwide.

U-M is also making an impact on medical care worldwide with initiatives like the University of Michigan-Shanghai Jiao Tong University partnership to form a medical school in Shanghai. Over the years, Klimist has seen her humanitarian work make a difference.

"A library in Fang is stocked almost entirely with U-M texts. Most

are on primary care, but there are some surgery and pediatrics and obstetrics-gynecology (textbooks)," she said.

Through fund-raising, her group has paid medical expenses for a land mine victim, provided orphans with food, provided warm clothing and carried out other humanitarian projects.

**@ ON THE WEB** Get the inside scoop on Dean Woolliscraft's global vision. Watch vodcasts highlighting how the U-M is making its mark as a global medical school: [www.med.umich.edu/medschool/dean/vodcasts](http://www.med.umich.edu/medschool/dean/vodcasts). Learn more about Global REACH at [www.med.umich.edu/medschool/globalreach](http://www.med.umich.edu/medschool/globalreach).

## TAKING CARE OF OUR OWN

# KEEPING UP APPEARANCES

by Jane Pettit, M.S., Organizational Effectiveness Consultant, & Melody Vanoy, M.B.A., Program Coordinator for Diversity, both employees of UMHS Human Resources

In our personal life, our “audience” is our family and friends. At work, our audience is our Health System customers. Maintaining the balance between individuality and professionalism can be tricky. In addition, as a health system, we have the responsibility to be sensitive to our patients, families and other staff from a health standpoint. Ultimately, it’s up to all of us to ensure we maintain a professional, healthy and inclusive environment as it relates to appropriate

attire in the workplace.

### What can we do?

As you get ready for your workday, ask yourself, “What is the message I am trying to send? How do I want my audience to perceive me?” If you have a question about the appropriateness of dress, appearance, behavior or any policy for your area, please talk with your manager or supervisor for clarification. Other resources:

- View the “UMHS Image Awareness” video developed by UMH Support Services: [www.med.umich.edu/insideview/appearance.html](http://www.med.umich.edu/insideview/appearance.html). This video includes reactions from real patients and their families to improper dress, conversations,

### Does how you dress reflect who you are and the job you perform?

etiquette and other situations.

- Review the UMHS Dress & Appearance policy, which includes our Perfumes policy:

[www.med.umich.edu/i/policies/umh/04-06-008.html](http://www.med.umich.edu/i/policies/umh/04-06-008.html)

- Review UMHS Tobacco policy: [www.med.umich.edu/i/policies/umh/05-03-001.html](http://www.med.umich.edu/i/policies/umh/05-03-001.html)

It is difficult to talk about issues like dress, appearance and behavior, which are so apparent to the casual observer and yet so personal to each one of us. If you are concerned about a colleague’s appearance, aroma or manner of dress, try to talk with the individual, or talk to your supervisor. For additional assistance,

you can contact your Human Resources consultant and ask how to approach such difficult issues with a colleague in a manner that is respectful and sensitive to the individual. You can also borrow HR’s copy of “The Practical Coach” video, which includes a segment on poor personal habits.

**Remember:** It is important for each employee to know the unit’s guidelines. If you don’t know them, ask. If you do know them, share with others.

**A final word:** Policies such as the ones mentioned here have been developed for our patients and families—and for staff. Such policies are one more way in which we Take Care of Our Own.



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