



# LEAGUE OF WOMEN VOTERS® OF CENTRAL NEW MEXICO

2315 San Pedro Drive NE, Suite F-6 ♦ Albuquerque, NM 87110-4158 ♦ 505.884.8441 ♦ www.lwvcnm.org ♦ https://www.facebook.com/LWVCNM

March 2016

## The VOTER

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### **Gwyneth Doland to address LWVCNM in March**

Gwyneth Doland will present results of 2012 and 2015 Investigations of Corruption in NM Government to the League of Women Voters of Central New Mexico during the March Luncheon Unit Meeting on Thursday, March 10<sup>th</sup>, 11:45 am, at the MCM Elegante (2020 Menaul Blvd NE).

March includes Sunshine Week and LWVCNM has devoted March Unit Meetings to Transparency and Ethics issues. Gwyneth Doland’s research on “New Mexico’s Systemic Risk for Corruption” for the Center for Public Integrity serves as data for the People, Power and Democracy project. LWVNM Positions covering Transparency in State and Local Governments include:

- LWVNM expects all state and local governments, Executive and Legislative, to follow the requirements of the NM Open Meetings Act and Inspection of Public Records Act, ...,
- Government resolutions, ordinances, and policies should cover Ethics and Conflict of Interest, providing sanctions for violations
- Responding to Constituents, ..., encouraging input and listening to their constituents
- Providing timely and complete information to their constituents

Gwyneth Doland is a multimedia journalist whose work appears on New Mexico PBS, KUNM and New Mexico in Depth. She covers state government for the grant-funded People, Power and Democracy project, a collaboration between those outlets and UNM’s NM News Port. She is also an adjunct lecturer in the Communication and Journalism Department at UNM. Gwyneth produced investigations of corruption in state government in 2012 and 2015 for the Center for Public Integrity in Washington, D.C. The 2012 report was a finalist for the



Goldsmith Prize from Harvard’s Kennedy School of Government. Gwyneth was previously the executive director for the New Mexico Foundation for Open Government, the editor of The New Mexico Independent and a staff writer for the Santa Fe Reporter and Weekly Alibi. She is a former director of the Journalism and Women Symposium and the Society of Professional Journalists, Rio Grande Chapter.

Please make reservations for the March 10th Luncheon Unit Meeting by calling the LWVCNM office (884-8441) by 10:00 am Monday, March 7<sup>th</sup>. Please specify if you would like a vegetarian meal.

### **March 8 LWVCNM Evening Unit Janet Blair “Transparency in Government Organizations”**

Janet Blair, LWVCNM Member, will address transparency approaches in four Government organizations where she served as Public Information Officer:



City of Albuquerque (Martin Chavez administration), the Conservancy District, The Metropolitan Court, and Albuquerque Police Department. Tuesday, March 8<sup>th</sup>, 6:00 pm, Erna Ferguson Library, 3700 San Mateo Blvd NE

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## **March 28<sup>th</sup> NE Heights Unit Meeting**

### **Shannon Kunkel, NMFOG**

Shannon Kunkel, Membership Director, New Mexico Foundation for Open Government (NM FOG)

Shannon will provide an Update on 2016 NM Legislature to include successes and failures in Open Government, Ethics, and Capital Outlay

Monday, March 28<sup>th</sup>, 10:00 am, La Vida Llena, 10501 Lagrima de Oro NE

LWVCNM conducted 2016 Program Planning February 20th. Although only a small group assembled, current and former LWVCNM Board members, 2 past Presidents, and 3 members of former LWVCNM Natural Resources Committee participated. The small group setting encouraged discussion and free exchange of opinions.

Karen Douglas presented information proposing deletion of 2002 LWVUS Natural Resources/Waste Management Position opposing Yucca Mountain Permanent High Level Waste Repository with substitution of recommendation endorsing final disposal of waste. Members attending agreed that 2015 NRC actions and concerns regarding current public safety of High Level Nuclear Spent Fuel storage at 34 sites across US should be sufficient for LWVUS Posi-

### **March 2016**

**Wednesday, March 2<sup>nd</sup> 5:30 pm Board Meeting**  
Sutin Thayer & Browne

**Monday, March 7<sup>th</sup> 10:00am Luncheon Reservation Deadline**

**Tuesday, March 8<sup>th</sup> 6:00 pm, Evening Unit**  
Erna Ferguson Library  
3700 San Mateo Blvd NE

**Thursday, March 10<sup>th</sup> 11:45 am Luncheon Meeting**  
MCM Elegante Hotel Albuquerque  
2020 Menaul NE

**Monday, March 28<sup>th</sup> 10:00 am NE Heights Unit**  
Taina Colon, ACLU Criminal Justice Advocate/APD Forward  
APD Progress with DOJ Consent Decree  
La Vida Llena, 10501 Lagrima de Oro NE

### **Book Review**

*The Digital Doctor: Hope, Hype, and Harm at the Dawn of Medicine's Computer Age* by Robert Wachter, 2015, McGraw Hill Education, hardcover, 330 pages.

Compared to other developed countries, the US health care system has significant cost and quality problems with outcomes. Although medicine and health care is one of the most information intensive sectors of the economy, it is one of the least computerized. Parts of Obamacare and the economic stimulus package both included major economic incentives for greater and faster computerization of health care. The electronic health record (EHR) is a major part of that process. While the EHR may not directly improve health care, it provides the information and access to data that can drive many other improvements.

This book, by a leading physician, talks about the promises and problems with implementing and using EHRs, some of which you may have seen in recent doctor or hospital visits. Like in many information systems areas health care is having problems in starting up, converting to, and implementing the EHR and other information systems. Some, perhaps most, of the problems, are design problems that can make using the systems awkward and that lead to unanticipated consequences, such as breaking some of the informal networks and systems. In some cases, straightforward procedures require too much data entry and going through too many screens, which can be inefficient and disruptive. In some cases, the problem was eased as doctors became more proficient at data entry, while in other cases practices and ERs added scribes to do the data entry while the doctor was dealing with the patient. The author also describes what happened to radiology when x-rays and other types of images were digitized and put on the computer. In the past, doctors and residents had to go to the radiology department to see the images and get the radiologists' analysis and suggestions. This provided lot of contact, information exchange, and learning (doctors got more information than in a written report and the radiologists got feedback about cases they had previously interpreted). Once the images were digitized, they were immediately available to everyone so people quit going to Radiology and the informal networking was lost. Also in many cases the doctors would do their own interpretation so the expertise of the radiologist was no longer used.

The key to effective information systems is not to continue the old processes and just substitute the computer for paper records. You need to rethink and reorganize the processes for how they can be done most effectively

given the new capabilities the computer can provide. Unfortunately, many vendors (and users) have trouble doing this. A basic problem the author points out is that today the medical record, whether paper or electronic, is being used by more people for more things. That often means that more data needs to be included and used appropriately. The medical record is obviously needed to describe the patient's conditions, diagnoses, care plan, and orders for the various providers. However, it is also used for billing and reimbursement. Usage review people use it to determine if the services were appropriate to reduce inappropriate and/or unneeded or ineffective procedures. Quality control people need it to address outcomes and effectiveness of care and for research to determine the most effective care. For example, Medicare is looking at hospital readmissions to determine if patients were discharged too soon or if necessary follow up was not planned or done. Unfortunately, in many cases good outcomes measures are not now included in the medical records and need to be added. Finally, outcome data needs to be normalized for severity and complexity. Otherwise the data would be misinterpreted with teaching hospitals appearing to have bad results not because they were providing poor care but because they were dealing with the most complicated, high risk patients. Good outcome measures are important because one way many experts suggest addressing the health care cost problem is to pay more for desired health outcomes rather than just procedures, which is the way our current fee for service system works.

This book is a good overview of how information systems are driving the health care system change. Although he focused on problem during the transition, the author believes in the long term potentials and benefits of digital medicine. He points out that while many complain about the transition few are willing to go back to paper records.

*Olin*



Helen Wright, APS Superintendent Raquel Reedy and Carlyne Devore Parks at the February Luncheon Meeting