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# DISCUSSION NOTES

**What The U.S. Healthcare System Doesn't Want You To Know,  
Why, And How You Can Do Something About It**



Book clubs and discussion groups are a gathering of people who meet to discuss and have a dialogue about a book that they have read and express their opinions, likes, and dislikes. This form of small group dialogue builds personal cognitive health and is also community building.

## **Dialog**

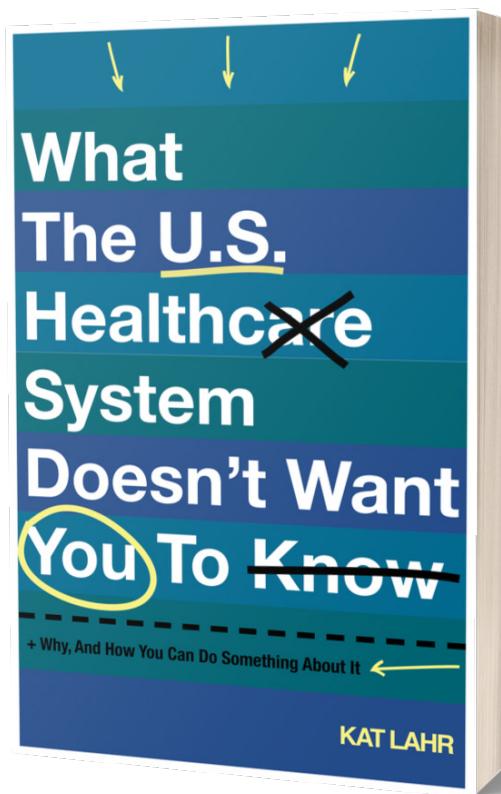
**noun**

**Greek: "dia-logos" -- to see through to meaning.**

Dialogue is not merely people talking, it is what they talk about and how they talk. It is a conversation that takes place in a facilitated, structured circle about a meaningful topic, question, or shared experience. Dialogue builds trust and enables people to be open to listening to perspectives that are very different from their own.

## GUIDING PRINCIPLES

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1. Be comfortable listening
  2. Be kind
  3. Be honest
  4. Be open to new ideas



## IMPORTANT

People often have strong responses to legal, ethical, and policy issues in healthcare. Disagreements are common. An important skill is the ability to discuss various viewpoints in a suitable manner. Book club and reading group comments and discussions must be relevant and respectful of others, even if you don't necessarily agree with one another.





## Recommended Discussion Guidelines For Participants

**Starting** — Use an “icebreaker” activity to loosen the group up and get your discussion off to an enthusiastic start. Keep it simple. For example, ask each reader to choose one word that describes the book.

**Moderation** — There should be one person in charge of going through the questions and keeping the group on track.

**Questions** — Pick which questions to discuss ahead of time. You can always add questions if the group goes through the initial list and still has time left over for more discussion. Having to go through all of the questions is not a requirement. Choose which ones fit best for your group.

**Order** — Choose one question at a time and toss it out to the group.

**Interruptions** — There will always be interruptions while another person is speaking. Most interrupting during discussion is due to enthusiasm and interest rather than disrespect. Control the interruptions by saying, “Hold that thought until he/she has finished.”

**Monopolizing Conversation** — Cut in on a longwinded group members with “That’s an interesting point you just made. Did anyone else get the same impression or a different one?” Or say “You’ve made some interesting points.”

**Keeping the group on the topic** — Try not to let readers wander and bring them back if they do to the next question.

**Listen carefully to what is said** — When responding to a thought, members should rephrase a reader’s comments to be sure the group understands what was meant.

**Verbose** — When a participant gets mad or upset and cannot be calmed down, acknowledge and respect their thoughts, then agree to disagree after attempting to find shared values. Often conflict can be used as an ally guiding us to what really matters to us.

**Encourage everyone to contribute** — Engage silent readers by posing open-ended questions directly, but don’t heckle the participants who really don’t want to participate. That should be respected.

## DISCUSSION NOTES



# GENERAL QUESTIONS

How did the book make you feel?

What did you like best about this book? What did you like least about this book?

If you got the chance to ask the author of this book one question, what would it be?

Do the issues affect your life? How so—directly, on a daily basis, or more generally? Now, or sometime in the future?

What do you think about the author's research? Is the evidence convincing? Were the sources credible?

What did you already know about this book's subject before you read this book? What new things did you learn? What questions do you still have?

Does the author make a call to action to readers—individually or collectively? Is that call realistic? Idealistic? Achievable?

Can you point to specific passages that struck you personally—as interesting, profound, silly or shallow, incomprehensible, illuminating?

What do you think the author wanted the reader to get out of the book?

## DISCUSSION NOTES



# PART ONE

**What should be the mission of our healthcare system?**

**What kind of characteristics does the U.S. healthcare system have?**

**What goes into the cost of delivering health care?**

**What influences life expectancy?**

**What does obesity lead to? What impacts to the health system does obesity have?**

**Why is it that regulations, rules, and standards exist, yet quality is still so bad in our healthcare system (ranked the worst amongst comparable countries)?**

**Unemployment and lower income is associated with an increased risk for many diseases, including cardiovascular disease, arthritis, diabetes, chronic respiratory diseases, and cervical cancer as well as for frequent mental distress. Why do you think this is so?**

**Case study from Chapter 4 titled Waiting To Die - What would you want for yourself? For your loved ones?**

**What are your immediate overall reactions to the data presented? What questions do you have about the data? Is there something else you would like to see?**

## DISCUSSION NOTES



## PART TWO

These are the guiding principles of healthcare ethics. Which are most important to you?

- Preserve life
- Do good
- Respect autonomy
- Uphold justice
- Be honest
- Be discreet
- Keep promises
- Do no harm

What threatens your autonomy? (Freedom from other's control and the capability to make choices.)

Should leaders in healthcare require higher ethical maturity?

What does this Spanish proverb mean? "A rule isn't unfair if it applies to everyone."

What type of injustice exists in our healthcare system?

What does this quote mean by Martin Luther King Jr? "Injustice anywhere is a threat to justice everywhere. We are caught in an inescapable network of mutuality, tied in a single garment of destiny. Whatever affects one directly, affects all indirectly."

Can specialty physicians prioritize preventative health, physicals, and early screenings if they are doctors for people who are sick?

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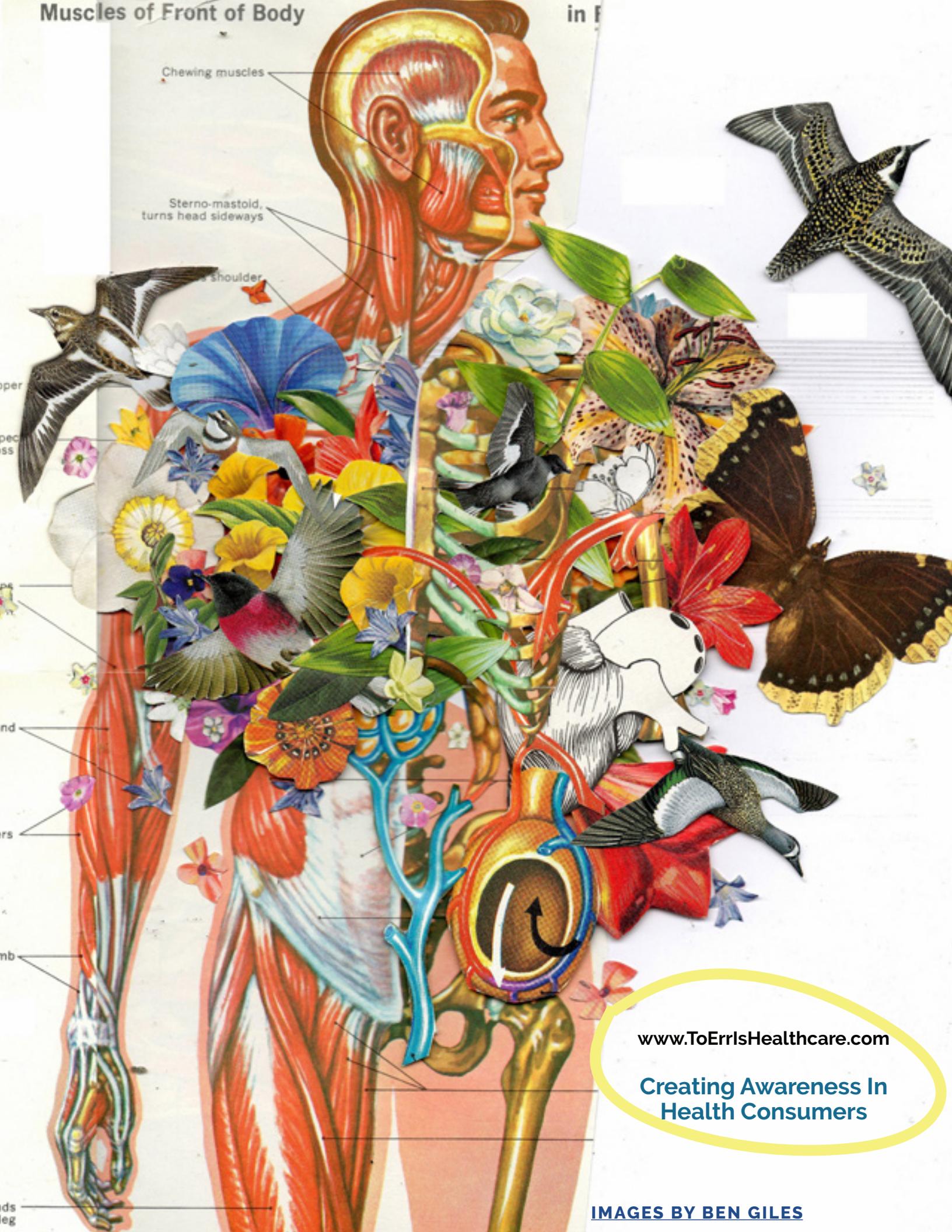


### PART THREE

- What are the effects of a person not seeking healthcare when they should?
- What are the implications of cutting physician reimbursements?
- Why is measuring patient experience important from a business perspective?
- Are you ok with an increase of your taxes (and subsequent reduction of premiums) so that the uninsured can be covered and eventually reduce overall costs long-term?
- Where you aware of any of the websites presented as tools to help you become informed?
- Did you know that your hospital had a quality scorecard? Did you look it up?
- What type of activities can hospitals engage in to lower readmission rates?
- About a half-trillion dollars wasted annually through inefficiency. Have you experienced inefficiency when utilizing healthcare?
- Can you draw implications for the future? Are there long or short-term consequences to the issues raised in the book? If so, are they positive or negative? Affirming or frightening?
- The Principle of Priority states (a) you must know the difference between what is urgent and what is important, and (b) you must do what's important first. What is important in our healthcare system and should get first priority for reform?

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Creating Awareness In  
Health Consumers

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