

## CAREER GOALS

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I have always worked toward “doing good and being happy.” And in every job or educational experience in which I have participated, I have felt happy and felt that I did some good. But in every previous job, I always felt some dissatisfaction in my performance because of skills that I lacked, that if I had owned, would have enhanced my performance. Initially I wanted to be a country doctor. I became a country doctor. When I was a country doctor, I felt I needed skills in teaching and in what I now call community health planning to better serve not just individuals and families, but the whole community. I returned to school as a Clinical Scholar and learned those skills. I then began work on the faculty at UNC-CH School of Public Health in the Department of Epidemiology with a secondary appointment in the Department of Medicine. But that job, although intellectually challenging, did not encourage me to expand my clinical skills, my medical student/resident teaching skills, or my community health planning skills; I mainly taught public health students and wrote public health grants. After one year, in 1987 my husband and I developed the opportunity to move to Asheville where I was able to blend my interest in teaching with community health at MAHEC in the Division of Family Medicine

I still consider myself a country doctor at heart, only now I also teach residents and work with communities to improve health status and access to health care. I am where I wish to be in my professional life. The passion I have always felt for clinical practice I continue to feel about my patients, and I can share that passion with the residents. My passion for universal access to health care has helped Buncombe County realize universal access to health care; I have shared this passion with the residents and with other communities nationwide, as well. And with my passion for working with communities directly to improve health status, our county and region are noting improvements in the care of patients with specific conditions such as depression and asthma.

My short-term, two-year career goals include helping to enhance our residency program in the area of continuous quality improvement (CQI), guiding the NC family practice residency program learning collaborative in the area of diabetic management, expanding the collaborative care/primary care-located treatment for depressed patients from the health department site to other primary care sites in western North Carolina, working with local physicians and communities in WNC to develop office-based systems to enhance asthma care in our region, and expanding Project Access to other communities in our state and nation.

My long-term, ten-year career goals are focused on continuing to positively impact our region’s health status through collaborative programs with communities, hospitals and medical practices. I am constantly energized by the people with whom I work and the need for continuous improvement in all aspects of medical care delivery. MAHEC and the western region have provided me with multiple opportunities to “do good and be happy.” Our region should be able to build on its many past successes, while remaining

sensitive to the needs of communities, to create innovative improvements in health care delivery and health status.

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