

# Champions Writing For Change Workshop

Vanessa Grubbs, MD MPH

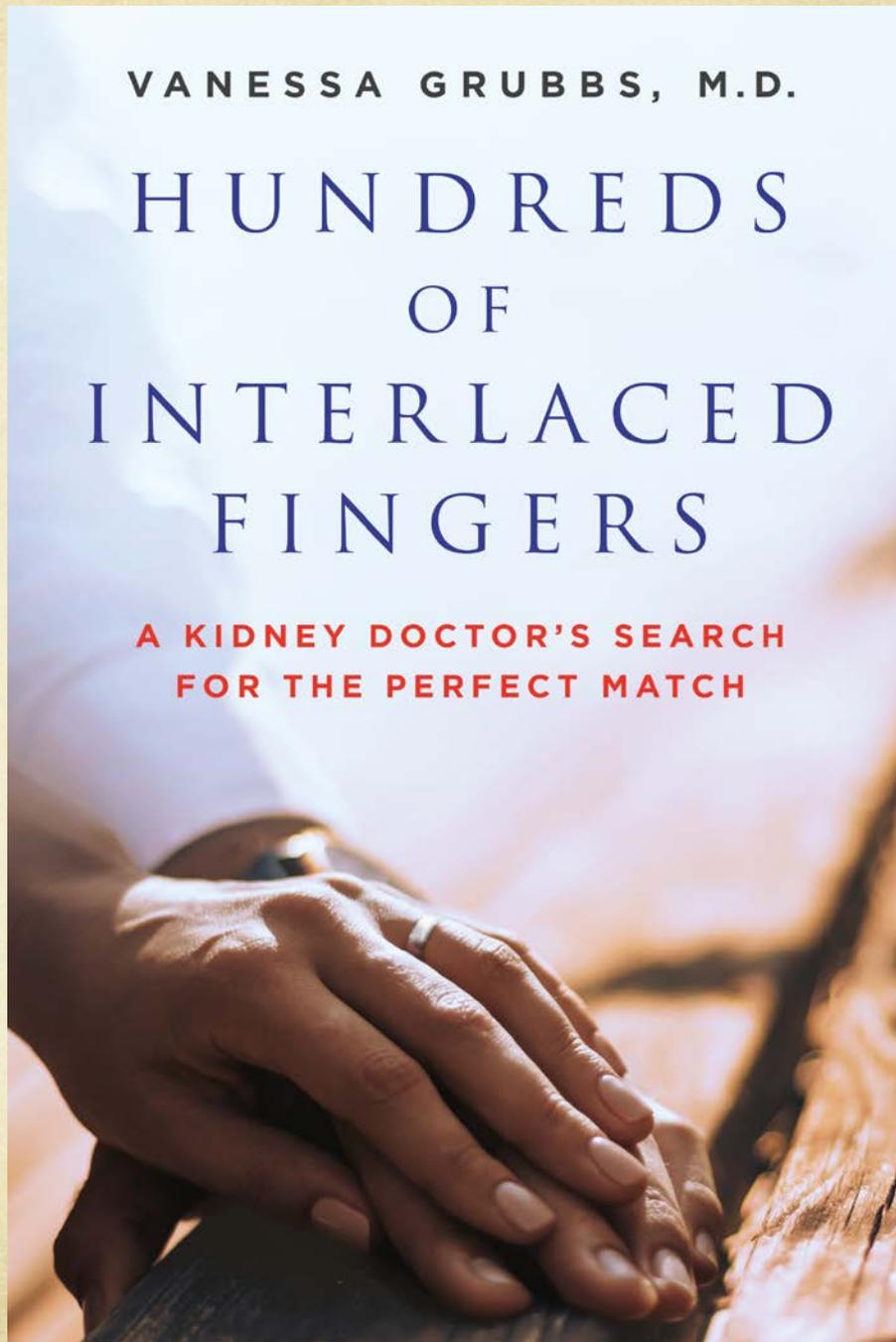
Amy Markowitz, JD

May 6, 2017

VANESSA GRUBBS, M.D.

HUNDREDS  
OF  
INTERLACED  
FINGERS

A KIDNEY DOCTOR'S SEARCH  
FOR THE PERFECT MATCH



Why You?

The byline as credibility; with a  
**twist**

Amy Markowitz, JD

# Purpose/Format

- Short, spoken statement (30 second mini-abstract)
- Establishes
  - **Who** you are
  - **Why** you are an authority
  - **What** you are looking for
- Useful for pitching

# Who are you?\*\*\*

- My name is \_\_\_\_\_ . I am a(n) \_\_\_\_\_

(Tip - This can be your actual job title or a descriptive term for your occupation. Examples include community clinician, biologist, research scientist, microbiologist, biochemist, etc.)

- Specializing in \_\_\_\_\_ .

(Tip - A short phrase that makes your title or occupation more specific)

\*\*\*This is **NOT** an existential question...

# What Do You Do Well?

- *What you do:*

(Tip - Write a single sentence that describes what you do and establishes your expertise; gives weight to your words: "I work with... and use innovative techniques to ..." Be specific so that people can really picture what you mean.)

- *Why you're the best, unique, talented; or what you do especially well (skills):*

(Tip - Write a sentence that expresses your particular strength(s): "My practice style and collaboration with other clinicians allows me to ..." Provide a concrete example of something that sets you apart from others in your field.)

# What Are You Looking For?\*

- *Contributions (value added) you are seeking to make; what is your call to action:*

(Tip – How does the paradigm shift you are writing about or the policy position you are promoting result in better public health?:  
"Congress, the Assembly, Berkeley DPH should continue research to discover new ..., make breakthroughs in ..., provide results that can lead to cures for ...; “You should vote in favor of Prop. XYZ...”  
)

\* Existentialists need not apply...

# Vanessa's Byline

My name is Dr. Vanessa Grubbs. I am an Assistant Professor of Nephrology at UCSF. For the last decade, I have cared for patients with advanced chronic kidney disease and those on dialysis. I have a special clinical and research interest in renal palliative care and have written and spoken in national forums on this topic. Doctors, patients, and families should engage in rational and shared decision making around end-stage kidney disease rather than only starting or continuing dialysis because we can.

# Now Let's Change It Up

1. Grab attention within the first 15 seconds. Don't start with a description of your role and site; instead, start with your sense of purpose, stated in a way that draws the other person in.

**NOT:** "I am a general internist, and I have worked at SFGH for 20 years."

**INSTEAD:** "Have you ever been misdiagnosed by a doctor? Well, my team has a plan to stamp out diagnostic errors."

2. Appeal to the head and the heart; to the purse strings as well as the purpose.

3. Tell a memorable story about how you decided to make this your life's work or a story that illustrates why you are so excited about this work.

4. Engage the other person in the conversation to get them excited—find a way to make your work/passion relevant to their interests.

*From the UCSF SOM Leadership Retreat 2016*

# Vanessa's Byline with a **twist**

Ever notice that everyone seems to think dialysis will only extend the lives of patients with end-stage kidney disease? My work focuses on teaching doctors, patients, and families that for some people with end-stage kidney disease, dialysis might not necessarily prolong life and could actually decrease their quality of life.