# May 18, 2023



# **LEARNING DAYS 2023**

Best Western Kelly Inn and River's Edge Convention Center 10 4th Avenue South St. Cloud, MN 56301



## WELCOME

Welcome to Learning Days! We are so pleased to have you back with us "in person" for this annual event where Health Care Homes and Behavioral Health Homes services providers, public health and community partners come together to share best practices, learn from each other, and form collaborative relationships. In 2022, our patients, providers and communities struggled as the COVID-19 pandemic continued into its third year. While vaccines offered a line of defense, infections and new variants persisted, prolonging stress on our embattled health care system.

As we approach Learning Days 2023, the pandemic is receding, and the health care system is "resetting" to a new normal. Prepare for the future of primary care by learning new tools and skills to address whole-person care and social determinants of health to advance health equity and improve the health of all Minnesotans!

# **CONFERENCE HIGHLIGHTS**

Live and In Person! We're so excited to be with you again for the first time since 2019! You can look forward to a full day of programming, including an opening and closing speaker, nine breakout sessions, and an intensive care coordination workshop led by our own Health Care Home practice improvement and integration specialists. Make sure to stop by the exhibit hall and take advantage of lunch and break times to network with your colleagues.

**Opening General Session:** We'll kick off the conference with program updates from the Health Care Home team and get inspired by hearing about a new vision for primary care delivered by Dr. Julia Joseph-DiCaprio, founder of Leap Pediatric and Adolescent Care in St. Paul, Minnesota.

**Closing Keynote:** David Satin, MD, University of Minnesota, will close out the day with compelling evidence that quality improvement is not only the key to innovation, but calls us to be our best selves at work. We hope that you'll take this message home with you as "bread for the journey" for your continuing efforts to improve the satisfaction, outcomes and value of care while advancing health equity for all Minnesotans.

**Points of Joy!** The last few years have been challenging, but good things are happening! Share your good news on our Points of Joy wall. What are your bright spots? What makes you hopeful? What affirms the good work that you are doing every day?

**Exhibit Hall and Passport:** Take time to visit the exhibit hall and learn about products, programs and services that are making a positive difference for our patients. Complete and turn in your passport for some great SWAG!

## REGISTER

Register on the MDH Learning Center and receive conference updates through the Health Care Homes website and LEARN e-news bulletin. Visit the <u>Health Care Homes</u> website for registration information.

# **LEARNING OBJECTIVES**

Learning Days attendees will enhance knowledge and skills to:

- 1. Prepare for the future of primary care.
- 2. Advance the health care home model.
- 3. Use data to address whole person care, health equity and social determinants of health.
- 4. Develop partnerships to improve population health.

# **EVALUATION**

All registered participants will receive an online evaluation after the conference. Please take time to provide feedback so we can continually improve this learning opportunity for you.

# **CONTINUING EDUCATION CREDITS**

A certificate of attendance including credit hours will be available after the conference. Please submit the certificate to your licensing board to obtain CEU credits. CME is not available for this event.

## **PRESENTATIONS AVAILABLE ONLINE**

Access conference presentations and handouts online after the conference on the on the <u>Health Care Homes</u> website.



# AGENDA-AT-A-GLANCE

## THURSDAY, MAY 18

TIME/LOCATION	ACTIVITIES
<b>7:30 - 8:30 A.M.</b> Hallway outside Glenn Carlson	REGISTRATION
8:30 - 9:30 a.m.	OPENING - GENERAL SESSION
Glenn Carlson West	• Welcome: Health Care Homes team
	• Keynote Address: Reinventing Primary Care, Dr. Julia Joseph-DiCaprio, Leap Pediatric and Adolescent Care
9:45 - 10:30 a.m.	BREAKOUTS A1 – A3
<b>A1</b> Weidner	Starting an Independent Primary Care Practice in a Medically Underserved Area, Julia Joseph-DiCaprio and Crystal Johnson
<b>A2</b> Edelbrock Clarke	Utilization of a BHH Service Model to Impact CKD Outcomes, Julie Plante and Whitney Weyer, Vail Place
<b>A3</b> Bell Alexander	Holistically Meeting Patient Needs and Improving Outcomes Together, Nicole Krenic, Mankato Clinic
10:45 a.m. – 11:30 a.m.	BREAKOUTS B1- B3
<b>B1</b> Weidner	End Exclusion: Building Inclusive Health Systems for People with Disabilities, Lisa Gemlo, MDH Children and Youth with Special Health Needs; Jeff Prendergast and Nell Coonen-Korte, Special Olympics MN; Rachel Garaghty, MDH Center for Health Equity
<b>B2</b> Edelbrock Clarke	Building Minnesota's Dementia Infrastructure through Innovative Practice Improvement, Patty Takawira and Maiyia Kosouaher, MDH; Karen Pagliarello and Ruby Schoen, Genevive
<b>B3</b> Bell Alexander	<b>Collaboration, Engagement and Partnership Model for Care Delivery</b> <b>Innovation,</b> Tori Bahr, Tricia Brisbine, Rhonda Cady and Adenike Chon, Gillette Children's Specialty Healthcare

# AGENDA-AT-A-GLANCE

TIME/LOCATION	ACTIVITIES
<b>11:30 a.m. – 12:15 p.m.</b> Glenn Carlson East	LUNCH BREAK
12:15 – 1:30 p.m.	BREAKOUTS C1 – C3
<b>C1</b> Weidner	Co-Creating a Shared Approach to Resource Referrals in Minnesota: Forging Ahead, Senka Hadzic and Marleny Gerber, Stratis Health
<b>C2</b> Edelbrock Clarke	Social Determinants of Health Measurement: The 5 W's + How Works, David Satin, University of Minnesota
<b>C3</b> Bell Alexander	<b>Empowering Patients Through Care Coordination: Our Journey,</b> Kate Fischer, Laura Oscarson, and Christine Wiles, CentraCare
1:45 - 3:15 p.m.	CARE COORDINATION WORKSHOP
<b>1:45 – 3:15 p.m.</b> Glenn Carlson West	CARE COORDINATION WORKSHOP MNCARES Care Coordination Study Update and Networking Session, MNCARES update: Leif Solberg, Steve Dehmer, HealthPartners Research Institute, with Joan Kindt, Health Care Homes, and Melissa Winger, Consumer Advocate. Networking facilitated by Health Care Homes team: Lisa Behr, Joan Kindt, Tina Peters, Jen Strickland



## THURSDAY, MAY 18

OPENING SESSION 8:30 – 9:30 a.m.

## WELCOME

Rosemarie Rodriguez-Hager, Interim Director, Health Care Homes Program Minnesota Department of Health St. Paul, MN

## **KEYNOTE ADDRESS**

## **Reinventing Primary Care**

### **KEYNOTE SPEAKER**

Julia Joseph-DiCaprio, MD, MPH President and Founder Leap Pediatric and Adolescent Care St. Paul, MN

### Description

What do you do when the system isn't working for your patients? Build something new! Don't miss this inspiring story from one of Minnesota's health leaders.



### Learning Objectives

Participants will enhance knowledge and skills to:

- 1. Use data to identify opportunities to advance health and racial equity.
- 2. Define actions that advance health and racial equity.

3. Engage communities served in unique ways.

### **BREAKOUT SESSIONS**

A1 - A3 9:45 - 10:30 a.m.

### A1 Starting an Independent Primary Care Practice in a Medically Under-served Area

#### Presenters

**Crystal Johnson,** *RMA* Medical Assistant and Lab Supervisor Leap Pediatric and Adolescent Care St. Paul, MN

#### Julia Joseph-DiCaprio, MD, MPH President and Founder

Leap Pediatric and Adolescent Care St. Paul, MN

## Description

Following the keynote address, Dr. Julia and her colleagues will take a deeper dive into the genesis of Leap Pediatric and Adolescent Care, explaining why and how the practice was founded, the work they're doing, and what they've learned so far. Tools will be offered to support those who face barriers to health and wellness.

### Learning Objectives

- 1. Use data to identify opportunities to advance health and racial equity.
- 2. Define actions that advance health and racial equity.
- 3. Engage communities served in unique ways.



### A2 Utilization of a BHH Service Model to Impact CKD Outcomes

#### Presenters

Julie Plante, RN, BA Director of Medical Services Vail Place Hopkins, MN

#### Whitney Weyer, CHW

Team Lead, Lead CHW Vail Place Hopkins, MN

### Description

Chronic Kidney Disease (CKD)impacts 1 in 7 adults in the U.S, and those with comorbidities of Serious Mental Illness (SMI) and/or Substance Abuse Disorder (SUD) are prone to poor outcomes when Social Determinants of Health and other factors intersect to create barriers to care. In this session, you will learn more about these complex interactions, and how Behavioral Health services can be integrated with primary and specialty care to ensure better clinical outcomes and a better quality of life.

## Learning Objectives

Participants will enhance knowledge and skills to:

- 1. Identify and address risk factors for CKD within the communities you serve.
- 2. Recognize CKD as a health equity and social justice issue.
- 3. Recognize the role of health education and coaching to support better client engagement in CKD treatment plans.
- 4. Describe how the Behavioral Health service model is uniquely poised to help at-risk clients delay onset and/or slow disease progression.

## A3 Holistically Meeting Patient Needs and Improving Outcomes Together

#### Presenter

Nicole Krenic, RN, BSN, PHN RN Clinical Manager Mankato Clinic Mankato, MN

## Description

Mankato Clinic will explore the importance of community collaboration in Health Care Home programming and walk you through their partnerships with WellShare International (CHWs), Adara Home Care, Genoa Pharmacy, and local county public health and human services programming.

This will be an interactive session where we can gain insight from each other on community partnerships and who in our patient communities can be good partners to improve patient needs and outcomes.

A community partnership toolkit will be provided to get you thinking about implementing or expanding collaborations hat may improve workflows and outcomes.

## Learning Objectives

- 1. Describe several successful community partnerships and the impacts the collaborations have had on outcomes.
- 2. Evaluate current collaboration efforts within your organization(s).
- 3. Explore how community partnerships may fit into your current roles and programming to improve role satisfaction, patient needs and outcomes, and dollars.



## **BREAKOUT SESSIONS**

B1 - B3 10:45 - 11:30 a.m.

### B1 End Exclusion: Building Inclusive Health Systems for People with Disabilities

#### Presenters

Lisa Gemlo, MPH, RD, LD Program Coordinator MDH Children and Youth with Special Health Needs and Disabilities St. Paul, MN

Jeff Prendergast, CSCS, ACSM-EP Health Programs Coordinator Special Olympics Minnesota Minneapolis, MN

#### Nell Coonen-Korte

Special Olympics Athlete and Health Messenger Special Olympics Minnesota Minneapolis, MN

#### Rachel Garaghty, MPP

Disability COVID-19 Community Coordinator Lead, Site Accessibility Lead MDH Center for Health Equity St. Paul, MN

#### Description

It's a matter of quality! This panel of presenters each touch the health care system from a different vantage point of disability. They will share data, experiences and barriers that are overlooked to good health for persons with disabilities. They will provide tools and ideas to improve access, including an accessibility and basic disability etiquette guide. Hands on activities to raise awareness of disability justice principles will be provide throughout the training.

## Learning Objectives

Participants will enhance knowledge and skills to:

- 1. Recognize multidimensionality of disability including physical, sensory, and cognitive needs.
- Identify at least three barriers to good health for persons with disabilities.
- 3. Identify changes that can be made within their health care system to improve access to health care for persons with disabilities.
- 4. Share basic disability etiquette to all members of the health care team.

#### B2 Building Minnesota's Dementia Infrastructure through Innovative Practice Improvement

#### Presenters

**Patty Takawira,** *MPH* Center for Health Promotion Minnesota Department of Health St. Paul, MN

Maiyia Kasouaher, PhD Center for Health Promotion Minnesota Department of Health St. Paul, MN

**Karen Pagliarello,** *RN, BSN* Genevive Minneapolis, MN

**Ruby Schoen,** A-GNP-C Genevive Minneapolis, MN

### Description

Participants will increase capacity for dementia practice improvement in primary care by:

 Examining current evidence on dementia risk reduction and tools to communicate dementia risk reduction to patients.



- Exploring statewide data regarding the need to focus on early detection and caregiver wellbeing in primary care.
- Introducing tools and resources to support dementia practice improvement.

In addition, we will share how Genevive, a certified Health Care Home, with support from the MDH Healthy Brain Initiative and Stratis Health, worked together to implement systems changes to improve screening and support caregivers.

## Learning Objectives

Participants will enhance knowledge and skills to:

- Assess dementia practice improvement opportunities within their organization and access tools and resources to better support patients and caregivers.
- 2. Identify and systematically incorporate a dementia screening tool into encounters in a way that is convenient for providers.
- 3. Incorporate caregiver support resources into patient education materials.

## **B3** Collaboration, Engagement and Partnership Model for Care Delivery Innovation

#### Presenters

#### Tori Bahr, MD

Medical Director, Pediatrics Gillette Children's Specialty Healthcare St. Paul, MN

#### Tricia Brisbine, MA

Lived Experience Parent Partner Self-employed Brooklyn Park, MN

#### Adenike Chon, MA

Lived Experience Parent Partner Self-employed Minneapolis, MN

#### Rhonda Cady, PhD, RN

Clinical Scientist, Co-Director Health Services Research Program Gillette Children's Specialty Healthcare St. Paul, MN

### Description

Successful improvement requires interdisciplinary collaboration, partnership, and innovation. Our Health Care Home applied thee concepts during a five-year nationwide project of ten interdisciplinary complex care programs. Our team included Health Care Home clinical, lived experience (parent) and research partners. All were equal members of the team and compensated for participation. We evaluated team member engagement using Family Engagement in Systems Assessment Tool and implemented plans to address deficiencies in parent partner engagement. The partnership model generated innovative initiatives grounded in patient- and family-centered values and demonstrated model value. Gillette's commitment to continuing this model ensures equitable patient and family -centered Health Care Home improvements and initiatives.

## Learning Objectives

- 1. Differentiate between patient- and familycentered care and patient- and family-centered engagement.
- 2. Discuss integration and impact of paid parent partners in designing, implementing, and evaluating care delivery innovations within a Health Care Home.
- 3. Examine use of the Family Engagement in Systems Assessment Tool to evaluate clinician and patient/parent partner engagement within your Health Care Home Team.
- 4. Apply lessons learned to current Health Care Home initiatives and future partnerships.

## **LUNCH BREAK**

11:30 a.m. – 12:15 p.m.

## AFTERNOON BREAKOUT SESSIONS

C1 - C3 12:15 - 1:30 p.m.

#### C1 Co-Creating a Shared Approach to Resource Referrals in Minnesota: Forging Ahead

#### Presenters

#### Senka Hadzic

Program Manager Stratis Health Bloomington, MN

#### Marleny Gerber

Project Specialist Stratis Health Bloomington, MN

### Description

This session will focus on collaborative design approaches and tools that connect people and their care providers in Minnesota with needed and culturally responsive resources to address social determinants of health, reduce health disparities and promote population health.

We will overview Minnesota efforts to build a sustainable social needs referral exchange between all stakeholders involved in patient or client health (community organizations, health care and payers) and how those sectors can exchange data to understand what interventions are needed to support improved health outcomes.

This presentation is intended for those that support and facilitate resource referrals for patients or clients.

## Learning Objectives

Participants will enhance knowledge and skills to:

- 1. Recognize the current journey of a patient or client in accessing needed and culturally responsive resources.
- 2. Describe what a participant can do to facilitate successful social needs referral exchanges between care provider and community organization.

### C2 Social Determinants of Health Measurement: The 5 W's + How Workshop

#### Presenters

David Satin, MD Associate Professor, Department of Family Medicine and Community Health University of Minnesota, Smiley's Clinic Minneapolis, MN

## Description

This workshop is designed for anyone collecting, measuring, or using social determinants of health (SDoH) data. WHO should collect WHAT SDoH data? WHEN and WHERE? Pre-appointment surveys? Patient interviews during the appointment? Or both? Perhaps data should be collected in aggregate by geocoding addresses or using zip code deprivation indexes? Exploring WHY we are engaging with SDoH data (what we plan to do with it!) will help participants crowdsource answers to the questions above. HOW to do all this? Tools for data collection, small group breakouts, and a framework from Washington State's FQHCs will aid us in workshopping best practices.



## Learning Objectives

Participants will enhance knowledge and skills to:

- 1. Describe the 5 W's (and how) of social determinant of health (SDoH) collection, measurement, and clinical use.
- 2. Cite tools and framework for determining best practices in collection, measurement, and clinical use of SDoh data.
- 3. Determine approach to SDoH that best fits your organization's mission and vision or serving your patient population.

## C3 Empowering Patients Through Care Coordination: Our Journey

### Presenters

**Christine Wiles, LSW** Director, Ambulatory Care Management CentraCare St. Cloud, MN

Laura Oscarson, RN Lead Care Coordinator CentraCare

CentraCare St. Cloud, MN

#### Kate Fischer, RN

Lead Care Coordinator CentraCare St. Cloud, MN

## Description

CentraCare has developed a new model of Care Coordination to help improve the overall health of our patients by proactively engaging patients to achieve optimal health. Our goals are to improve patient health outcomes, reduce the cost of care, enhance patient independence and selfmanagement skills along with developing health literacy.

## Learning Objectives

- 1. Describe health coaching, motivational interviewing and patient-centered care as the basis of Care Coordination.
- 2. Discuss how to integrate chronic conditions, literacy, training, and support to help improve the overall outcomes of the patient.
- 3. Explain how care coordination can help decrease utilization and overall cost of care.
- 4. Use population health data and reports to target the patient population that fit out model of care.





## CARE COORDINATION WORKSHOP

A 2-Part Workshop MNCARES Update and Meaningful Conversations: Peer to Peer Networking 1:45 – 3:15 p.m.

#### Presenters

#### Lisa Behr, MSN, RNC, PHN

Practice Improvement Specialist MDH Health Care Homes St. Paul, MN

#### Joan Kindt, RN, PHN, MHP

Practice Improvement Specialist MDH Health Care Homes St. Paul, MN

#### Tina Peters, MPH, RN, PHN

Practice Improvement Specialist MDH Health Care Homes St. Paul, MN

#### Jennifer Strickland, RN, BAN

Practice Improvement Specialist MDH Health Care Homes St. Paul, MN

#### Steve Dehmer, PhD

Senior Research Investigator HealthPartners Institute Minneapolis, MN

#### Leif Solberg, MD

Senior Research Investigator HealthPartners Institute Minneapolis, MN

#### Melissa Winger, CPXP, CPHQ

Health Care Homes Consumer Site Surveyor and Advisory Committee Member MDH Health Care Homes

St. Paul, MN

## Description - Part 1:

This presentation will share findings from the Minnesota Care Coordination Effectiveness Study (MNCARES). Attendees will learn about 1) which types of patients are commonly receiving care coordination in more than 300 Health Care Homes clinics across the state, 2) how approaches to care coordination vary among participating clinics, and 3) which approaches to care coordination are most strongly associated with patient outcomes.

## Learning Objectives - Part 1

Participants will enhance knowledge and skills to:

- 1. Describe the characteristics of patients receiving care coordination in 317 participating clinics across Minnesota.
- 2. Explain how approaches to care coordination vary among participating clinics.
- 3. Identify which approaches to care coordination are most strongly associated with patient outcomes health and health care of care coordination patients.

## Description - Part 2:

This second part of the workshop will include an interactive networking session on select topics. Conversations will occur through small group discussion, providing an opportunity to meet new people, actively contribute, exchange perspectives, and obtain new insights. We encourage you to send topic ideas to the HCH team at <u>Health.HealthCareHomes@state.mn.us</u>

## Learning Objectives - Part 2:

- Address challenges related to implementing, maintaining, and advancing the Health Care Homes patient and family- centered care model.
- 2. Identify effective processes and workflows being utilized in different Health Care Homes programs and populations.
- 3. Apply strategies to enhance the delivery of patient and family centered care within their organization.

## **CLOSING KEYNOTE**

3:30 – 4:00 p.m.

Top Ten Moral Imperatives for Clinical Quality Post-COVID

## Presenter

David Satin, MD Associate Professor, Department of Family Medicine and Community Health University of Minnesota, Smiley's Clinic Minneapolis, MN

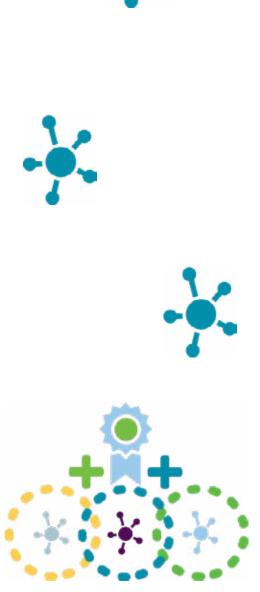


## Description

This keynote will address ten major developments in quality improvement that have taken on special moral significance since the COVID-19 pandemic. From taking care of healthcare workers, to television shows like "House, M.D.," to the electronic medical record – this session will cover a wide variety of influences that shape the past, present, and future of clinical quality improvement. Participants will learn how the pandemic has changed the moral character of thee forces and consider their effect on y our daily activities and career trajectory.

## Learning Objectives

- 1. Describe historically significant developments within the field of clinical quality improvement since the year 2000.
- 2. Compare and contrast their moral significance before and after the COVID-19 pandemic.
- 3. Explain their effect in your daily activities and career trajectory.



# THANK YOU LEARNING DAYS PLANNING TEAM

Sadie Anderson, Minnesota Department of Health, Health Care Homes Carol Bauer, Minnesota Department of Health, Health Care Homes Wendy Berghorst, Minnesota Department of Health, Children and Youth with Special Health Needs Alex Dahlquist, Minnesota Department of Health, Office of Statewide Health Improvement Initiatives Dorothy Hull, Minnesota Department of Health, Health Care Homes David Kurtzon, Minnesota Department of Health, Health Care Homes Tina Peters, Minnesota Department of Health, Health Care Homes Rosemarie Rodriguez-Hager, Minnesota Department of Health, Health Care Homes Cherylee Sherry, Minnesota Department of Health, Office of Statewide Health Improvement Initiatives Anne Schloegel, Minnesota Department of Health, Center for Health Information Policy and Transformation Jen Strickland, Minnesota Department of Health, Health Care Homes

# LEARNING AND INNOVATION WORK GROUP

Savannah Aultman, Alomere Health Carol Bauer, Minnesota Department of Health, Health Care Homes Angela Booher, HealthPartners Sophie Burnevik, Department of Human Services Miranda Cantine, Ortonville Area Health Services Brittney Dahlin, Minnesota Association of Community Health Centers Alex Dahlquist, Minnesota Department of Health, Office of Statewide Health Improvement Initiatives Rachel Finley, Richfield Medical Group, Affiliate of Fairview Health Services Kristin Godfrey-Walters, Hennepin Healthcare Dorothy Hull, Minnesota Department of Health, Health Care Homes Lindsy Johnson, Fairview Health Services Nicole Kapinos, North Memorial Health Arjun Kataria, Optum Health, University of Minnesota Joan Kindt, Minnesota Department of Health, Health Care Homes Nicole, Kapinos, North Memorial Health Jenny Kolb, M Health Fairview David Kurtzon, Minnesota Department of Health, Health Care Homes Charlie Mandile, Health Finders Collaborative Joy May, Hutchinson Health Antoinette Melancon, HealthPartners Kris Monson, Lac Qi Parle Clinic Rosemarie Rodriguez-Hager, Minnesota Department of Health, Health Care Homes Sue Severson, Stratis Health Kristi Van Riper, University of Minnesota Physicians Eileen Weber, University of Minnesota School of Nursing Melissa Winger, Patient and Family Representative

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## Exhibitors

Great Plains Resource & Assistance Center, University of Minnesota-Institute for Health Informatics Minnesota Department of Health, Children and Youth with Special Health Needs



**LEARNING DAYS 2023** 



The Minnesota Department of Health – Health Care Homes would like to thank members of the Learning and Innovation Work Group, Learning Days planning team, and presenters, who contributed time and expertise to make this event possible. Together, we are working together to improve health and advance health equity for all Minnesotans!