Improving Patient Care ⚆ IPC3 Collaborative
Learning Session Two

April 26-28, 2011 ⚆ Denver, Colorado
Hyatt Regency Denver @ Colorado Convention Center

Agenda

Monday, April 25, 2011

4:00 pm – 6:00 pm  Registration  Centennial Foyer
5:00 pm – 7:30 pm  Story Board Set-up  Centennial Foyer

Tuesday, April 26, 2011

Strengthening the Foundation

7:00 am – 5:00 pm  Registration
7:00 am – 7:45 am  Continental Breakfast
8:00 am – 5:00 pm  Story Board Open
8:00 am – 8:30 am  Invocation  Centennial DE
Denver Singers

Overview of Learning Session Two
CDR Lisa Palucci, MSN, RN
Collaborative Director, Improving Patient Care Program

8:30 am – 8:45 am  Welcome Remarks  Centennial DE
Susan V. Karol, MD, FACS, Chief Medical Officer, Indian Health Service

8:45 am – 9:45 am  Director’s Update  Centennial DE
Yvette Roubideaux, MD, MPH, Director, Indian Health Service

9:45 am – 10:00 am  BREAK

10:00 am – 10:45 am  “Improving the Quality of and Access to Care”
Lyle Ignace, MD, MPH; Director, Improving Patient Care Program
Cass Lake Indian Hospital, IPC 3 Site
Kodiak Area Native Associative, IPC3 Site

If not now, when? The Director’s priorities are to renew and strengthen partnerships with tribes, reform the IHS, improve the quality of and access to care, and make our work more accountable, transparent, fair, and inclusive. All of these require collaboration while continuing to adopt new approaches to meet the needs of our communities. We expect that the examples provided by your peers will inspire you to accelerate your improvements and make a lasting commitment to sustain the quality and access to care within the Indian Health system.

Learning Objectives:
1. Identify key leverage strategies to overcoming the status quo within the Indian Health system while positively impacting patient outcomes.
2. Illustrate examples of accelerating healthcare improvement and outcomes within the IPC3 Collaborative.

10:45 am – 11:00 am  
**Foundation for Improvement**  
**CDR Lisa Palucci, MSN, RN**  
**Collaborative Director, Improving Patient Care Program**  
This session will cover three questions associated with the Model for Improvement and identify elements that have been integral in accelerating improvement.

11:00 am – 12:00 pm  
**Commit to Excellence! – Team Meeting 1**  
**CDR Lisa Palucci, MSN, RN**  
**Collaborative Director, Improving Patient Care Program**  
Teams will huddle to brainstorm about how they are doing with key elements that contribute to success; identifying strengths to augment and weaknesses to address. It is a time for introspection and commitment.

12:00 pm – 1:00 pm  
**LUNCH**  
Centennial Foyer

1:00 pm – 1:15 pm  
**Transition to Breakout Sessions**

1:15 pm – 2:30 pm  
**CONCURRENT BREAKOUT SESSIONS**

**A1 – Building a Strong Relationship with Tribal Leadership**  
Centennial AB  
(Leadership Track)  
**Susan V. Karol, MD, FACS, Chief Medical Officer, Indian Health Service**  
**Charlene Avery, MD; Director, Office of Clinical & Preventive Services, Indian Health Service**  
This session will provide an opportunity to hear from and communicate with organizational and leadership representatives about successful approaches and content needed to create a successful partnership as we work together to improve the health and wellness of the community.

**Learning Objectives**

1. List at least two strategies that IPC teams have utilized to effectively engage their Tribal Leaders in the transformational work of IPC occurring at their facility.
2. Identify successes and challenges of communication efforts with Tribal Leadership and discuss potential mitigation efforts for dealing with those challenges.
3. Develop an effective communication approach or build upon existing approaches towards sharing meaningful information and progress updates about IPC, between the facility and Tribal Leaders, so they remain actively engaged.

**A2 – Respecting Patient Decisions using Health Literacy Interventions**  
Centennial C  
Jennifer Casey, RD, CD, Gerald L. Ignace Indian Health Center, QILN Site  
Chelsea Kleinmeyer, RN, BSN, Southeast Alaska Regional Health Consortium, IPC 3 Site  
Candice Donald, Program Manager, IPC National Team  
Connie Davis, MN, RN, ARNP, Institute for Healthcare Improvement  
Mary Wachacha, BS, Lead Consultant, IHS Health Education Program
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A foundation to providing successful self-management support (SMS) and respecting patient autonomy is understanding health literacy. Learn about methods to improve interpersonal communications that will support patients, families and providers with the patient’s medical encounter.

**Learning Objectives:**
1. Describe a stepped care approach to SMS.
2. Describe the relationship between health literacy and improving quality of care, managing chronic disease and patient autonomy.
3. Learn and practice plain language techniques such as the Teach Back method to confirm that you have explained to the patient what they need to know in a manner that the patient understands.

**A3 – Building Improvement Skills: Process Mapping**

Tracy Jacobs, BSN, RN, Director, Institute for Healthcare Improvement
CAPT Gary Shelton, Facility Planning Consultant, Indian Health Service

Do you want your patients not to have to repeat their stories many times in a single visit? Do you want to decrease the time they have to wait for an appointment? What about duplicate documentation, or having to retrace steps to perform a simple task? Wouldn’t it be nice to have what you need and want when the patient also needs and wants it? The majority of problems in our systems are the result of wasteful processes. This session will review the basics of process mapping and how to use this simple (and fun!) tool to identify waste and target your improvement activities. Change ideas to get rid of waste will be shared and participants will have the opportunity to review their own patient-visit process maps to stimulate ideas for change.

**Learning Objectives:**
1. Summarize the concepts of efficiency, value, continuous flow, and types of waste.
2. Describe how to use these concepts and the tool of process mapping to find more time and more resources in your system.
3. Review your patient visit process map as a means to achieve your Collaborative Aims.
4. Explain the relationship of process mapping to improvement.
5. Produce an Action Plan to reduce one or more areas of waste identified in your patient visit process map.

**A4 – Advanced Access Basics: Demand & Supply**

Catherine Tantau, BSN, MPA, IPC3 Faculty

The basics of managing appointment Demand and Supply will be the focus of this breakout. Teams will learn how to use tested ‘forecasting’ tools, which will enable them to predict daily demand for appointments and arrange appointment supply to match that daily demand.

**Learning Objectives:**
1. Implement the ability to ‘forecast’ appointment demand for each Primary Care Provider (PCP) each day of the week.
2. Illustrate how to calculate appointment Supply and appointment Activity.
3. Recognize the value of comparing Demand, Supply and Activity to reach your Access goals and leave with the knowledge to complete these calculations.

**A5 – Optimize the Clinical Information Systems (CIS) & Use it for Reminders, Prompts, & Queries**

Colleen A. Hayes, MHS, RN, Contractor, Indian Health Service

Review the effective strategies and approaches applicable to optimizing the use of CIS for Reminders, Prompts, and Queries.

**Learning Objectives:**
1. Assess one clinical indicator or clinical bundle measure based on the model.
2. Identify a work plan for improving at least one clinical indicator based on this model.

2:30 pm – 2:45 pm  **BREAK**

2:45 pm – 4:00 pm  **CONCURRENT BREAKOUT SESSIONS**

**B1 – The Art & Science of Managing Change**  
(Leadership Track)

Ann Lewis, CEO, CareSouth Carolina; IPC3 Faculty
Roger Chaufournier, CEO, CSI Solutions, LLC.; IPC3 Faculty

The breakout will focus on the evidence base behind change management and the art of putting the science to work managing health care organizations.

**Learning Objectives:**
1. Illustrate the human and social factors of change within a health care organization.
2. Examine change models and tools to manage change which drive successful patient outcomes.
3. Link the change and care models used in the Collaborative as resources to facilitate organizational change and create a patient centered medical home environment.

**B2 – Respecting Patient Decisions using Health Literacy Interventions**  
(Repeat of A2)

**B3 – Building Improvement Skills: Process Mapping**  
(Repeat of A3)

**B4 – Advanced Access Basics: Demand & Supply Calculations**  
(Repeat of A4)

**B5 - Optimize the CIS, Using it for Reminders, Prompts, & Queries**  
(Repeat of A5)

4:00 pm – 4:15 pm  **BREAK**
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4:15 pm – 5:15 pm

“Stealing Shamelessly” – Team Meeting 2
Centennial DE
CDR Lisa Palucci, MSN, RN
Collaborative Director, Improving Patient Care Program

A time to reconnect about what team members have identified as interesting and important to the progress of their organization.

5:15 pm – 5:30 pm

Reconnecting as a Learning Community & Closing Remarks
Centennial DE
CDR Lisa Palucci, MSN, RN, Collaborative Director, IPC Program
Charlene Avery, MD, Director, Office of Clinical & Preventive Services, IHS

Adjourn for the Evening

Wednesday, April 27, 2011

Learning Great Ideas from Others

8:00 am – 8:15 am

Welcome Back Day 2- Learning Session Two
Centennial DE
CDR Lisa Palucci, MSN, RN, Collaborative Director, IPC Program

8:15 am – 9:45 am

Share Seamlessly! Story Board Rounds
Centennial DE
IPC National Team, IHI Faculty, and IPC Improvement Support Team Members

9:45 am – 10:00 am

BREAK

10:00 am – 11:30 am

Accelerating Improvement: Testing vs. Implementation
Centennial DE
Jerry Langley, MS, Improvement Advisor, IHI/API
Lyle Ignace, MD, MPH, Director, Improving Patient Care Program

Testing changes is a process: the completion of each Plan-Do-Study-Act (PDSA) cycle leads directly into the start of the next cycle. As we learn, we use that new knowledge to plan the next test. Teams must continue to link tests in this way, refining the change until it is ready for broader implementation.

Learning Objectives:

1. Identify innovative methods to accelerate your improvement efforts.
2. Summarize the importance of testing changes on a small scale and under a wide range of conditions.
3. Identify the importance of learning (even from failed tests) and knowledge play in improvement.

11:30 am – 12:45 pm

LUNCH
Centennial Foyer
‘Brown Bag’ Interest Tables & Discussion Groups (as desired)

12:45 pm – 1:00 pm

Transition to Plenary Session
1:00pm – 2:00 pm  
**Clinica Campesina Family Health**  
Virtual Site Visit  
*Lyle Ignace, MD, MPH, Director, Improving Patient Care Program*

**Introduction & Overview**  
*Pete Leibig, CEO, Clinica Family Health*  
This virtual site visit session will highlight best practices in Patient Centered Medical Home care and how improvement can be accomplished. Clinical Campesina will take Learning Session 2 participants through their journey to excellence.

**Learning Objectives:**
1. Illustrate how Clinica Campesina provides patients with a Patient Centered Medical Home and how it has impacted successful patient, family and community health outcomes.
2. Examine the benefits and disadvantages of providing health care in a group visit format.
3. Describe five office efficiency ideas utilized in Clinica Campesina’s facilities and review why these innovative ideas and methodologies were implemented.

2:00 pm – 3:30 pm  
**Clinica Campesina – Virtual Site Visit**  
Office Efficiency  
*Carolyn Shepherd, MD, Vice President of Clinical Services  
Pete Leibig, CEO, Clinica Family Health*  

**Patient Centered Medical Home**  
*Carolyn Shepherd, MD, Vice President of Clinical Services*

3:30 pm – 3:45 pm  
**BREAK**

3:45 pm – 5:00 pm  
**Clinical Campesina – Virtual Site Visit**  
Behavioral Health Integration  
*Clare Scott, LCSW, Manager Integrated Services*  

**Group Visits**  
*Pete Leibig, CEO, Clinica Family Health  
Carolyn Shepherd, MD, Vice President of Clinical Services*

**Questions & Answers**

5:00 pm – 5:45 pm  
**Team Meeting 3**  
*CDR Lisa Palucci, MSN, RN, Collaborative Director, IPC Program*  
This session will include a debrief of the Virtual Site Visit with Clinica Campesina and begin Action Plans for Action Period 2.

5:45 pm – 6:00 pm  
**Report Out**

**Closing Remarks:**  
*Susan V. Karol, MD, FACS, Chief Medical Officer; Indian Health Service*
Thursday, April 28, 2011

Sharing Ideas and Reporting Progress

8:00 am – 8:15 am
Welcome Back Day 3 – Learning Session Two
Centennial DE
CDR Lisa Palucci, MSN, RN, Collaborative Director, IPC Program
Charlene Avery, MD, Director, Office of Clinical & Preventive Services, IHS

8:15 am – 9:15 am
Traditional Healing: Opening the Door
Centennial AB
Ted Mala, MD, MPH, Director, Traditional Healing & Tribal Relations,
SouthCentral Foundation
Ursula Knoki-Wilson, CNM, MPH, MSN, Chinle Service Unit
Johnson Dennison; Office of Native Medicine Coordinator, Chinle Service Unit
American Indian and Alaska Native healing goes well beyond treating disease.
It offers a rich resource for people who want to connect, both collectively and
individually, with their spiritual selves. This interactive session will provide an
opportunity to hear about successful integrative approaches at Chinle Service
Unit & SouthCentral Foundation.
Learning Objectives:
1. Discuss the importance of integrating traditional healing into practice.
2. Illustrate the effectiveness traditional healing has on patients, families and
   communities.
3. Recognize the value of traditional healing and how these practices go beyond
treating disease for American Indian & Alaska Native people.

9:15 am – 9:30 am
Transition to Concurrent Breakout Sessions

9:30 am – 10:45 am
CONCURRENT BREAKOUT SESSIONS

C1 – Analyzing Information: Using the IPC Measures to
Drive Performance (Leadership)
Jerry Langley, MS, Improvement Advisor, IHI/API
Using data for improvement requires different methods and approaches as compared to using data for
compliance or for research. This session will focus on methods for using data to support the improvement
of quality. An exercise at the end of the session will provide the participants the opportunity to apply these
methods.
Learning Objectives:
1. Illustrate the methods for the effective use of data in an improvement project.
2. Interpret and provide feedback on IPC data displays to further support improvement in patient
centered care.

C2 – Coaching Staff for Successful Self-Management:
Making the Most of Your Brief Action Plans
Centennial C
Kristin Yeoman, MD, MPH, Chinle Comprehensive Health Care Facility, QILN Site
Gwenivere Rose, MS, RD, Chinle Diabetes Program, QILN Site
Candice Donald, Program Manager, IPC National Team
Connie Davis, MN, RN, ARNP, IPC3 Faculty
In this session you will hear from a team that is making changes and addressing barriers to provide successful self management support services into routine patient care.

**Learning Objectives:**
1. Review the use of Brief Action Planning and the importance in planning care for patients.
2. Illustrate methods for incorporating Menu of Options and brief action planning into routine care practices.
3. Describe a model of care team sequencing and plan for on-going staff coaching.

**C3 – Advanced Access: How to Make it Work (Part A)**
*Centennial F*

*Catherine Tantau, BSN, MP, IPC3 Faculty*

In this session participants will learn how to apply the first three High Leverage Changes for Access improvement:
- Balancing Demand and Supply
- Reducing Appointment Backlog
- Simplifying Appointment Types and Times

This session will also complement Session D5 which will cover the last three High Leverage Changes for Access improvement.

**Learning Objectives:**
1. Implement how to balance Demand and Supply using practical, tested approaches.
2. Illustrate the basic elements of an effective Backlog Reduction Plan to close the gap between current delays and your access goals.
3. Recognize the value of, and strategies for, simplifying appointment types and times.

**C4 – Organization of Community Healthcare: Community Assessment**
*Centennial G*

*Lynn Lowry, DPHN, Winnebago Comprehensive Health Care Facility*

**Peggy Johnson, DPHN, Sisseton Service Unit**

**Dione Harjo, MPH, Assistant Director, Community Health Representative, IHS**

**Learning Objectives:**
1. Describe a methodology to assess community health needs based on community health disparities.
2. Discuss methods to engage community members, i.e. focus groups, so as to identify community health services wanted by the community.
3. Illustrate program planning and implementation to meet the community health needs and the wants of the community.
4. Discuss a program that was implemented to meet a community needs and has shown evidence of success in reducing a disparity.

**C5 – Talking Circle: Traditional Healing in the Round**
*Centennial H*

*Ted Mala, MD, MPH, Director, Traditional Healing & Tribal Relations, SouthCentral Foundation*

This session will discuss best practice experiences of how Traditional Healing has been integrated into the Nuka System of Care.

**Learning Objectives:**
1. Illustrate patient, family and community access to Traditional Healing.
2. Discuss how community has supported the structure of Traditional Healing.
3. Examine how SCF assures that community is involved in Traditional Healing and how it works with Western Medicine (referrals to Traditional Healing, rounds, working with the Primary Care Providers, BHC’s, Pharmacists, etc.).

10:45 am – 11:00 am     BREAK

11:00 am – 12:15 pm     CONCURRENT BREAKOUT SESSIONS

D1 – 6 Elements of Great Management: Follow Up to Staff Surveys (Leadership Track)
Ann Lewis, CEO, CareSouth Carolina; IPC3 Faculty
Come to the session with the results of your staff survey and the start of your Action Plan to identify and address changes to improve. Learn how to get started, how to communicate results and proposed changes, who to involve and what to expect during the process.

Learning Objectives:
1. Using data from the staff satisfaction survey, teams will identify one to two areas for workforce development improvement.
2. Based on outcome data from the staff satisfaction survey, teams will identify their areas of strength, and share their successful workforce strategies and ideas.
3. A resource handbook will be compiled with ideas and successful strategies to be available to all teams.

D2 – Coaching Staff for Successful Self-Management: Making the Most of Your Brief Action Plans (Repeat of C2)

D3 – Advanced Access: How to Make it Work (Part B) (Continuation of C3)

D4 – Organization of Community Healthcare: Community Assessment (Repeat of C4)

D5 – The Science of Improvement: Understanding the Theories that Underlie the Improvement of Quality
Jerry Langley, MS, Improvement Advisor, IHI/API
Transformation of your system of care requires a view from the outside...a view through a lens that some refer to as “profound knowledge.” This view provides a map by which we can understand more than otherwise possible about the organizations that we work in. This session will provide an overview of the Science of Improvement, which will lay a foundation necessary for you to understand how the interrelated components of your system must work together and to optimize the performance of your system.

Learning Objectives
1. Describe the four components of the system of profound knowledge
2. Give examples of the impact of various components on the optimization of the entire system.
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<tr>
<td>12:15 pm – 1:15 pm</td>
<td>LUNCH</td>
<td>Centennial Foyer</td>
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<td>1:15 pm – 3:30 pm</td>
<td>WORKSHOPS</td>
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### WORKSHOPS

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<th>Workshop A</th>
<th>Workshop B</th>
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<td>Centennial AB</td>
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<td>Knowledge Portal</td>
<td>Date Portal</td>
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<td>Cindy Hupke, BSN, MBA, Director, IHI</td>
<td>Patrick Anderson, CSI Solutions CDR Lisa Palucci, MSN, RN</td>
<td>Anne Lewis, CEO CareSouth Carolina; IPC3 Faculty</td>
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<td>Candice Donald, IPC Program Manager</td>
<td>Jerry Langley, MS, Improvement Advisor, IHI/API</td>
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<td>Stephanie Smith, IPC Program Assistant</td>
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<td>Session 1: Review of team progress and strategies for success.</td>
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<td>This session is designed to troubleshoot and assist with data reporting within the IPC Data Portal. A laptop will be needed.</td>
<td>Session 2: Discuss effect strategies for communicating progress in the IPC3 Collaborative.</td>
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<td>3:30 pm – 4:45 pm</td>
<td>Team Meeting 4</td>
<td>Centennial DE</td>
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<td>4:45 pm – 5:00 pm</td>
<td>Next Steps and Adjourn</td>
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Team Meeting 4
CDR Lisa Palucci, MSN, RN, Collaborative Director, IPC Program

This session will allow the IPC3 Collaborative teams a chance to debrief and create action plans and timelines for improvement changes as we move into Action Period 2.

Next Steps and Adjourn
CDR Lisa Palucci, MSN, RN, Collaborative Director, IPC Program

Closing Remarks
Susan V. Karol, MD, FACS, Chief Medical Officer, Indian Health Service

Continuing Education Accreditation:
The Indian Health Service (IHS) Clinical Support Center is accredited by the Accreditation Council for Continuing Medical Education to sponsor continuing medical education for physicians.

The Indian Health Service Clinical Support Center is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center’s Commission on Accreditation.