



**MANY FACES  
OF  
COMMUNITY HEALTH**

**2009 CONFERENCE**

October 22-23, 2009

**CONFERENCE PROGRAM**

DoubleTree Park Place Hotel - St. Louis Park, MN

[www.manyfacesconference.org](http://www.manyfacesconference.org)

# Agenda at a Glance

## Thursday, October 22, 2009

|                  |  |                  |
|------------------|--|------------------|
| 7:30 – 8:30 am   | Registration/ Continental Breakfast/ Exhibit Set-up  |                  |
| 8:30 – 10:00 am  | Welcome & Keynote I:<br><b><i>What Does This Wave of Health Care Reform Look Like?</i></b> | Park Ballroom    |
| 10:00 – 10:15 am | MNACHC 2009 State Legislator Award   |                  |
| 10:15 – 10:45 am | Break / Exhibits Open  | Terrace Ballroom |
| 10:45 – 12:15 pm | CONCURRENT SESSIONS I  |                  |
|                  | A. You Too Can Do Community-Based Participatory Research                                   | Courtyard 5 & 6  |
|                  | B. Cultural Aspects in the Presentation & Treatment of Depression                          | Courtyard 3 & 4  |
|                  | C. Community Health Center Dashboard   | Orchard          |
|                  | D. National Health Care Reform: The Proposals & the Politics                               | Park Ballroom    |
| 12:15 – 1:15 pm  | Lunch  | Atrium           |
| 1:30 – 3:00 pm   | Keynote II:<br><b><i>How Will This Wave of Health Care Reform Break?</i></b>               | Park Ballroom    |
| 3:00 – 3:10 pm   | Recess!  | Park Ballroom    |
| 3:10 – 3:30 pm   | Break / Exhibits Open  | Terrace Ballroom |
| 3:30 – 5:00 pm   | CONCURRENT SESSIONS II   |                  |
|                  | A. Health Care Homes Case Study: Tools & Patient Engagement                                | Courtyard 5 & 6  |
|                  | B. Adolescents & Chronic Disease Prevention  | Courtyard 3 & 4  |
|                  | C. Make the Culture Care Connection  | Orchard          |
|                  | D. State Health Care Reform: 2009 Minnesota Legislative Session                            | Park Ballroom    |
| 5:00 – 7:00 pm   | Evening Reception featuring the Ethiopian Jazz Band  | Atrium           |

## Friday, October 23, 2009

|                  |   |                  |
|------------------|---|------------------|
| 7:30 – 8:30 am   | Registration/ Continental Breakfast/ Exhibits Open                    | Terrace Ballroom |
| 8:30 – 8:45 am   | Welcome & Bruce Zimmerman Diabetes Award                              | Park Ballroom    |
| 8:45 – 10:15 am  | Keynote III:<br><b><i>How Can We Ride This Wave Successfully?</i></b> | Park Ballroom    |
| 10:15 – 10:30 am | Break / Exhibits Open   | Terrace Ballroom |
| 10:30 – 11:45 pm | CONCURRENT SESSIONS III   |                  |
|                  | A. Pandemic-Ready: Running a Tabletop Drill in a Clinic Setting       | Orchard          |
|                  | B. Physiology of Weight Control: What Works                           | Courtyard 5 & 6  |
|                  | C. HITECH: EHR Utilization and "Meaningful Use"                       | Courtyard 3 & 4  |
|                  | D. Leadership Case Study in "Riding the Wave"                         | Park Ballroom    |
| 11:45 – 12:00 pm | Box Lunch Pick Up   |                  |
| 12:00 – 1:00 pm  | Keynote IV:<br><b><i>Where Will This Wave of Reform Take Us?</i></b>  | Park Ballroom    |
| 1:00 – 3:00 pm   | WORKSHOP: Mining an EHR for Quality Data                              | Park Ballroom    |

***Rooms Subject to Change – Follow Signage***

## Continuing Education

### ***AMA PRA Category 1 Credit™***

This activity has been planned and implemented in accordance with the Essential Areas and Policies of the Minnesota Medical Association (MMA) through the joint sponsorship of Stratis Health and Many Faces of Community Health Conference partners. Stratis Health is accredited by the MMA to provide continuing medical education for physicians.

Stratis Health designates this educational activity for a maximum of **10.75** hours of *AMA PRA Category 1 Credit™*. Physicians should claim credit commensurate with the extent of their participation in the activity.

### ***Nursing Contact Hours***

This program is co-provided with the Minnesota Nurses Association which is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.



\***11.5** ANCC contact hours will be awarded to nurses attending this educational activity (5.75 Day 1; 5.75 Day 2).

\*equivalent to **13.8** Minnesota Board of Nursing contact hours (6.9 Day 1; 6.9 Day 2)

***Dietitian Continuing Education Credits*** are being provided.

### **Faculty and Planning Committee Disclosure:**

To comply with ACCME Standards for Commercial Support, Stratis Health requires faculty members to disclose the existence of any significant financial interest or other relationship with companies whose products or services are related to the subject matter of the presentation.

Each faculty member has submitted a signed disclosure form. The following faculty members have disclosed a financial association.

- Mary Deering, RN will be discussing unlabeled uses of pharmaceuticals and will indicate this in her presentation.
- Phillip Griffin, JD, Griffin Government Consulting, has disclosed an association with Preferred One, UCare, Johnson & Johnson, and Abbott Laboratories
- Patricia Moten Marshall, President, SynerChange, has disclosed an association with the Alliance of Chicago Community Health Centers.

No other faculty or planning committee member has a financial relationship to disclose that could be perceived as a real or apparent conflict of interest in the context of their presentation; nor will any speaker be discussing research or unlabeled uses of commercial products

# ACKNOWLEDGEMENTS

We wish to thank the following people for their contributions to this conference:

## **Clinical Content Planning Committee**

Donna Albers-Walking Elk  
Native American Community Clinic

Amy Christensen, RN  
UCare

Lorraine Cummings, LPN  
UCare

Mary Beth Dahl, RN, CPC, CPHQ  
Stratis Health

Penny Fredrickson, LPN  
Planned Parenthood, MN, ND, SD

Judy Fundingsland, RN  
Medica

Linda Mash, RN, MS  
Minnesota Nurses Association

Connie Norman  
Native American Community Clinic

Marcy Otypka  
HealthPartners

Roxanne Ruid, LPN  
Open Cities Health Center

Chris Schaefer  
American Diabetes Association

## **Partnering Agency Staff**

### **Minnesota Association of Community Health Centers**

Rhonda Degelau, JD

Laura Lipkin, MBA

Linda Ridlehuber, RN, BSN, MBA

Jonathan Watson, MPIA

### **Minnesota Department of Health**

Mary Jo Mehelich, RN - Heart Disease & Stroke  
Prevention Program

Laurel Reger, MBA - Diabetes Program

Jan Whitbeck - Arthritis Program

### **Neighborhood Health Care Network**

Walter Cooney, JD

### **Continuing Education Facilitators**

Margaret LeDuc - Stratis Health

Linda Mash, RN, MS - Minnesota Nurses  
Association

### **Other Support**

Sean Schuette, CMP – IntrinXec Management,  
Inc.

Ron Hine – Ron Hine Web Design

Felicia Coston - Open Cities Health Center

## Welcome to the 4<sup>th</sup> Annual Many Faces of Community Health Conference

Many Faces of Community Health focuses on improving health and reducing health disparities in underserved populations and among those living in poverty. It offers presentations on clinical, public policy and management topics that impact quality improvement and services in primary care settings with particular attention to prevention and management of chronic conditions.

This year's theme is *Riding the Wave of HealthCare Reform - Implications for the HealthCare Safety Net and the People We Serve*. Through Keynote speakers and in breakout sessions, attendees will learn the current status of various national and state health care reform efforts; how these might affect access, quality, and reimbursement; what their impact could be on safety net providers and underserved populations in Minnesota; and resources to prepare their agencies and themselves for these challenges and others.

Several breakouts explore various interplays of community, culture, and ethnicity on health care delivery. Others focus on dealing with depression and obesity in both youth and adults. One case study session examines a health system's experience implementing the Health Care Home model and the workshop looks at several clinics' experiences utilizing Electronic Health Records.

### What Current HealthCare Reforms Are Trying to Address

Health care reform has been a topic of political debate in the U.S. for well over a century with periodic attempts to expand access to insurance and care and to control costs. Structural questions about how health care should be delivered have been repeatedly debated but never resolved. After decades of innovations, policies and programs at the cost of trillions of dollars, America's health care system remains fundamentally flawed:

#### ACCESS

- 48 million Americans have no form of health insurance, up from ~ 40 million in 2000.
- Those with coverage are paying increasingly more and receiving steadily fewer benefits.

#### COST

- The United States pays roughly twice as much per capita for health care as Canada, France, or the United Kingdom, yet experiences lower life expectancy and significantly higher infant mortality than these countries.
- Half of personal bankruptcies in the United States are related to medical bills.
- Three-quarters of Americans who declare medical bankruptcy had medical insurance when they became ill.

#### QUALITY

- Far from "the best health care system in the world," the World Health Organization ranked the United States 37<sup>th</sup> overall.
- The U.S. ranked last out of 123 industrialized countries in infant mortality, 15<sup>th</sup> out of 19 countries in preventable deaths before age 75, and tied for last on healthy life expectancy at age 60 according to a 2006 report by the Commonwealth Fund.

## **What Community Health Centers Bring to the Health Care Reform Discussion**

Community Health Centers (CHCs) provide comprehensive primary and preventive health services in Minnesota and throughout the United States. Through medical, dental, and behavioral health care, chronic disease management and health support services, CHCs act as a safety net, caring for low income and culturally diverse populations regardless of ability to pay.

Minnesota's 17 Community Health Centers serve over 180,000 people each year – one out of every six uninsured Minnesotans. Roughly 40% of health center patients are uninsured and 46% have coverage through a public program such as Medicaid or MinnesotaCare; over 91% live in households with incomes under 200% of federal poverty levels (\$35,200 for a family of 3).

Health Centers provide high-quality, effective, and affordable primary care services that are typically as good or better (according to several different quality measures) as those available in other primary care settings. Community Health Centers are a model for how to provide better care to more people for lower costs:

### ACCESS

- Community Health Centers in the U.S. provided care to over 18 million Americans in 2008. All are located in Medically Underserved Areas.
- Charges for services are calculated on a sliding fee scale based on family size and income. All patients pay a portion of the cost of their care.

### COST

- The average cost per medical visit among CHCs across the U.S. was \$123 (2008).
- One state study showed CHC Medicaid patients with diabetes cost \$400 less per patient than similar Medicaid patients treated by other providers. These savings were driven by fewer emergency room and hospital visits, as well as lower costs for lab work, and other services.
- Patients in underserved areas served by CHCs had 5.8 fewer preventable hospitalizations per 1,000 people over 3 years than those in areas not served by a Health Center. If avoidable visits to emergency rooms were redirected to CHCs, an estimated \$18 billion in annual health care costs could be saved nationally.\*

### QUALITY

- Women receiving prenatal care at Minnesota CHCs have fewer low birth weight (LBW) babies across racial groups than in the state overall. In 2006, the rate of LBW in the state was 6.5% while at CHCs it was 4.8%; among African Americans the rate of LBW was 10.3% for Minnesota overall and only 5.5% at CHCs.
- CHC patients report consistently high levels of satisfaction with their care and providers.

\* National Association of Community Health Centers

## **Apply What You Learn**

One of the goals of the Many Faces conference is to share practical tools, tips and resources and offer useful information, inspiration and networking opportunities to help you put what you have learned into practice. We also provide speaker handouts plus a bibliography and resource list relating to health care reform on the conference website. Check back later this fall at [www.manyfacesconference.org](http://www.manyfacesconference.org) to download these valuable tools.

## Overall Conference OBJECTIVES

With our 2009 theme, *Riding the Wave of HealthCare Reform*, Many Faces of Community Health continues to focus on improving health and reducing health disparities in underserved populations and among those living in poverty. This year's content is designed to give attendees a broad understanding of the implications of various healthcare reform efforts for safety net providers and the people we serve. Conference sessions will offer practical and effective tools and strategies for improving community-based primary care and reducing health disparities. Sessions will explore clinical, operational and policy issues of importance to safety net providers.

Experience a variety of learning techniques and collect useful tools, tips and resources. Enjoy networking and view informative community and industry exhibits. Hear thought-provoking and practical ideas and gain renewed inspiration to meet workplace challenges.

**Conference Objectives** - Upon completion of this conference, participants will be able to:

- Describe the impact of health care reform on safety net providers and underserved populations in Minnesota
- Recognize how national and state health care reform will affect access, quality, and reimbursement
- Apply leadership principles of successful organizations to support organizational change during chaotic shifts in the environment
- Identify resources to help safety net providers prepare for the next wave of challenges

## Detailed Agenda

**Thursday, October 22, 2009**

7:30–8:30 am **Registration/ Continental Breakfast/ Exhibit Set-up**

8:30–8:45 am **Welcome** **Park Ballroom**

*Rhonda Degelan, Executive Director, Minnesota Association of Community Health Centers (MNACHC), Minneapolis*

*Patricia Adams, Assistant Commissioner, Minnesota Department of Health*

8:45–10:00 am **KEYNOTE I:** **Park Ballroom**

**What Does This Wave of Reform Look Like?**

*Sara Rosenbaum, JD, Chair, Department of Health Policy, School of Public Health & Health Services, George Washington University*

What is driving the momentum toward health care reform at the national and state levels? What is different now that makes meaningful reform more likely to occur? What are the features of reform that we expect to see? What will mark its success or failure?

**Learning Objectives** - Upon completion of this activity, participants will be able to:

- Identify key factors that will play a role in the passage of local and national health reform.
- Describe health reform proposals under debate at national and state levels.

- 10:00–10:15 am **MNACHC 2009 State Legislator Award:** **Park Ballroom**  
**Representative Erin Murphy**  
*Jonathan Watson, Minnesota Association of Community Health Centers*
- 10:15–10:45 am **Break / Exhibits Open** **Terrace Ballroom**  
*Refreshments served in Exhibit Hall*
- 10:45–12:15 pm **CONCURRENT BREAKOUT SESSIONS I**

**A. You Too Can Do Community-Based Participatory Research** **Courtyard 5 & 6**

*Michele Allen, MD, MS, University of Minnesota Program in Health Disparities Research*  
*Kathleen Culhane-Pera MD, MA East Side Clinic of West Side Community Health Services*  
*Clarence Jones, M Ed, QHealth Services / Southside Community Health Services*

When working with health disparities, what is the difference between *doing-for* and *doing-with*? When a community shapes a research project and owns the resulting data, how does this shape the outcome? Learn how clinics can engage in research relevant to the populations they serve and hear about projects that community health centers have pursued within the University of Minnesota's Program in Health Disparities Research.

**Learning Objectives - Upon completion of this activity, participants will be able to:**

- Distinguish how community-based participatory research differs from traditional health care research.
- Discuss how participating in community-based participatory research can support the reduction of health disparities.

**B. Cultural Aspects in Presentation & Treatment of Depression** **Courtyard 3 & 4**

*Gloria Cantor RN, CNS, Community University Health Care Center*  
*Georgi Kroupin MA, LP, HealthPartners Center for International Health*

Although depression affects individuals in all cultures, people of different ethnicities often describe their concerns very differently. Hear a discussion of screening and managing depression in children and adults from diverse cultures. This presentation will include a discussion of the roles of primary care, behavioral health providers and psychiatry at the Community University Health Care Center and the Center for International Health at HealthPartners.

**Learning Objectives - Upon completion of this activity, participants will be able to:**

- Describe ways that depression may be exhibited in patients from diverse cultures.
- Identify ways to adapt depression management to meet the needs of children and adults from a variety of cultures.
- Discuss how generational differences in acculturation affect child-parent dynamics in addressing depression in children.

**C. Community Health Center Dashboard** **Orchard**

*Rick Selvik, MPH, MBA, Health Resources Services Administration (HRSA)*

Learn how Federally Qualified Health Centers can mine Community Needs Assessment, MUA/MUP designation and Universal Data System (UDS) to create a performance dashboard that will answer whether community needs are being met, whether the CHC needs to refocus its target market and whether funding sources are changing.

**Learning Objectives - Upon completion of this activity, participants will be able to:**

- Describe ways for securing data to generate a CHC performance dashboard.
- Recognize how a performance dashboard can be used to improve quality, meet community needs and secure funding.

**D. National Health Care Reform: The Proposals & the Politics**      **Park Ballroom**

*Elizabeth Lukanen, MPH, State Health Access Data Assistance Center (SHADAC)*

What specific proposals have made/are making their way through Congress? From a community health perspective, what are the strengths/ weaknesses of specific proposals? What political realities will likely influence the success or failure of these proposals?

**Learning Objectives - Upon completion of this activity, participants will be able to:**

- Describe what health reform proposals are currently being discussed by Congress and the likelihood of their passage.
- Recognize the potential benefits and deficits of these proposals to community health providers.

12:15–1:15 pm    **Lunch**      **Atrium**  
*Join your colleagues for lunch and stimulating conversation!*

1:30–3:00 pm    **KEYNOTE II:**      **Park Ballroom**  
**How Will This Wave of Reform Break?**

*Maureen Reed, MD, Adjunct Faculty, School of Public Health and School of Medicine, University of Minnesota.  
Community Health Center and Public Health respondents*

If national health care reform occurs, what can we expect in terms of the “Good, the Bad, and the Ugly?” How will the various players in the health care industry react? How does the health care safety net for underserved populations position itself for success in the new environment? What can we expect for our patients?

**Learning Objectives - Upon completion of this activity, participants will be able to:**

- Identify the key stakeholders and their positions regarding the national health reform debate.
- Describe how safety net providers can participate in the national debate to achieve positive outcomes.

3:00 – 3:10 pm    **RECESS!!**      **Park Ballroom**  
*Bernard Turner, 2009 STEPS Community Hero, Healthy Communities Program of the Center for Disease Control*

3:10 – 3:30 pm    **Break / Exhibits Open**      **Terrace Ballroom**  
*Refreshments served in Exhibit Hall*

3:30 – 5:00 pm    **CONCURRENT BREAKOUT SESSIONS II**

**A. Health Care Homes Case Study: Tools & Patient Engagement**      **Courtyard 5 & 6**

*John Halfen MD, Lakewood Health System*

Minnesota is forging ahead on implementing the health care home model in primary care. Come hear how the model is working with adult patients in a rural health setting. Discussion will focus on core principles of health care home implementation, tools to aid providers, and patient engagement.

**Learning Objectives - Upon completion of this activity, participants will be able to:**

- Identify ways that a medical home model differs from current practice.
- Discuss key issues to address in implementing a medical home model within a clinic practice.
- Describe methods to encourage and support patient engagement.

**B. Adolescents & Chronic Disease Prevention** **Courtyard 3 & 4**

*Marvel Jordan, MSW LICSW; Stacie Lundquist, BS, BA, CFT; Corinne Malecha, MPH, RD, LD; Pat Swanson, RD, LD, CDE; & Sharon Windorski, BSN, MA, CNP; Health Start School-Based Clinics/ West Side Community Health Center*

Teens participating in the Adolescent Cardiovascular Disease/Diabetes Prevention Program at WSCHC's Health Start School Based Clinics have successfully lowered both their weight and lipid levels. Learn about this innovative, multidisciplinary approach to adolescent health care and disease prevention.

**Learning Objectives - Upon completion of this activity, participants will be able to:**

- Identify ways to engage adolescents in addressing their modifiable risk factors.
- Discuss behavior-change interventions that have worked with adolescents at high risk for chronic disease.
- Recognize elements of a school-based disease prevention program that might transfer to a medical clinic setting.

**C. Make the Culture Care Connection: How to Address the Cultural Diversity of Your Patients and Staff** **Orchard**

*Mary Beth Dahl, RN, CPC, CPHQ, Stratis Health  
Faith Dohmen, RN & Mary Lewis, MS, RN, Hennepin Faculty Associates  
Brooke Stelzer & Maureen Younkin, RN, Annex Teen Clinic*

The Culture Care Connection initiative is working with 21 clinics and one public health agency to understand, address, and embrace cultural differences at their facilities by assessing CLAS (Culturally and Linguistically Appropriate Services) standards, examining statewide and community demographic changes and shifts, and identifying educational opportunities. Participants will share their insights, successes, challenges and opportunities with meeting the cultural needs of both patients and staff.

**Learning Objectives - Upon completion of this activity, participants will be able to:**

- Describe tools used for assessing cultural differences and educational needs within health settings.
- Identify ways to meet the diverse cultural needs of both staff and patients.

**D. State Health Care Reform: 2009 MN Legislative Session** **Park Ballroom**

*Jonathan Watson, MPLA, Minnesota Association of Community Health Centers  
Phil Griffin, JD, Griffin Government Consulting  
Scott Leitz, MPA, Assistant Commissioner Minnesota Department of Health  
Michael D. Scandrett, JD, Halleland Health Consulting*

As a result of legislation passed nearly two years ago, our state's health care reform is unfolding in "real-time" during 2009. But the 2009 Minnesota legislative session also responded to the state budget deficit by dramatically cutting spending – particularly in health care programs. This session will provide an update on these changes as well as preview of the 2010 Minnesota legislative session that will begin in February.

**Learning Objectives - Upon completion of this activity, participants will be able to:**

- Discuss key legislative changes made in 2009 that impact health care.
- Identify health reforms that will likely be proposed in the 2010 state legislative session.

5:00–7:00pm

**Evening Reception**

*Music with the Ethiopian Jazz Band  
Refreshments & Cash bar*

**Atrium**



**Learning Objectives - Upon completion of this activity, participants will be able to:**

- Identify scenarios to use in evaluating role definitions and communications when large number of staff may be ill.
- Assess staff understanding of preparedness plans.
- Apply clinic triage capabilities during increased patient telephone calls and visits, as well as plans for deferring non-urgent visits during a surge

**B. Physiology of Weight Control: What Works** **Courtyard 5 & 6**

*Mary Deering, RN MPH, Veterans Administration Medical Center – Minneapolis*

Losing a few pounds can dramatically improve health and quality of life. So why aren't your overweight and obese patients doing it? Get a refresher on the physiology of weight control and learn practical ways to help your patients lose that stubborn weight.

**Learning Objectives - Upon completion of this activity, participants will be able to:**

- Compare the range of approaches for weight loss.
- Describe the body's physiologic mechanisms to protect against weight loss.
- Identify ways to support a patient working to lose weight.

**C. HITECH: Resources and Incentives for EHR Utilization** **Courtyard 3 & 4**  
**and "Meaningful Use"**

*Elizabeth Carpenter Cinqueonce, Deputy Director MDH Center for Health Informatics  
Walter Cooney, MA, JD, Neighborhood Health Care Network*

Under the HITECH Act and related legislation, both Medicare and Medicaid will offer incentive payments to qualifying providers for implementation and meaningful use of electronic health records (EHR). Learn about the qualifying criteria and the final definition of "meaningful use," as well as state and federal resources available to assist providers and clinics with their EHR strategies.

**Learning Objectives - Upon completion of this activity, participants will be able to:**

- Define what EHR "implementation and meaningful use" means for providers seeking to qualify for HITECH incentives.
- Describe potential strategies for qualifying and receiving the HITECH incentive payments.

**D. Leadership Case Study in "Riding the Wave"** **Park Ballroom**

*Patricia Moten Marshall, MHA, President, SynerChange*

Times of change that hold potential for organizational disruption, staff turnover, and "organizational fatigue" require a special kind of leadership. How do we apply the general principles of "leading in times of change" to the community-based health care setting?

**Learning Objectives - Upon completion of this activity, participants will be able to:**

- Identify the principles for successful leadership in times of change.
- Discover ways of applying those principles to your care setting.

11:45– 12:00 pm **Box Lunch Pick Up**

12:00 – 1:00 pm **KEYNOTE IV:**

**Where Will This Wave of Reform Take Us?**

**Park Ballroom**

*Carol Backstrom, MHA, Assistant to the Commissioner for Health Reform, Minnesota  
Department of Health*

Health care reform efforts at the national and state levels continue to evolve. What can we expect to see one year from now? Reforms will no doubt present new challenges for providing care to the underserved. What are some steps safety net providers can take now to best meet those challenges? What resources are available to assist safety net providers in taking those next steps?

**Learning Objectives - Upon completion of this activity, participants will be able to:**

- Identify health reform trends and potential directions.
- Describe resources available to assist providers in meeting health reform challenges.
- Recognize potential action steps safety net providers can take with future health care reforms.

1:00 – 3:00 pm

**WORKSHOP:**

**Park Ballroom**

**“Mining an EHR for Quality Data: Practice Culture, Workflow & Technical Issues”**

*Anna Gunvalson, BA & Kristi Jacobsen, BA; Migrant Health Services Inc.*

*Bill Jones, MBA; Deb Mielke MD; & Theresa Cleary RN; Open Cities Health Center*

Whether your clinic is on the cusp of implementing an EHR, well into utilizing one, or approaching the golden ring of exchanging health information, the challenge of collecting and reporting quality data involves a complex blend of human engineering, organizational support and technical know-how. Two community health centers on different EHR platforms will compare their approaches to balancing internal workflow with external requirements in collecting and reporting standardized quality data for immunizations (MIIC), Optimal Diabetes Care (D5) and the federal Universal Data System (UDS).

**Learning Objectives - Upon completion of this activity, participants will be able to:**

- Identify methods of developing buy-in for data capture and use.
- Compare workflow designs that promote data capture within an EHR.
- Describe methods for extracting and utilizing EHR data for standardized quality reporting.



**MANY OF  
COMMUNITY HEALTH**

## **KEYNOTE PRESENTERS:**

### **Sara Rosenbaum, JD - “What Does this Wave of Reform Look Like?”**

Sara Rosenbaum is the Harold and Jane Hirsh Professor and founding Chair of the Department of Health Policy at George Washington University School of Public Health and Health Services, a unique center of learning, scholarship, and service focusing on all aspects of health policy.

Professor Rosenbaum has devoted her career to issues of health law and policy affecting low income, minority, and medically underserved populations as well as the health care safety net. In 1993-1994, Professor Rosenbaum worked for President Clinton, directing the legislative drafting of the Health Security Act and developing the Vaccines for Children program. Professor Rosenbaum also served on the Presidential Transition Team for President-Elect Obama.

A graduate of Wesleyan University and Boston University School of Law, Professor Rosenbaum has authored more than 250 articles and studies focusing on all phases of health law and health care for medically underserved populations. She co-authored *Law and the American Health Care System* (Foundation Press, NY) and has won national awards for scholarship and service including Richard and Barbara Hansen National Health Leadership Award (University of Iowa), a Robert Wood Johnson Foundation Investigator Award in Health Policy Research, and the Oscar and Shoshanna Trachtenberg Award for Scholarship, George Washington University’s highest faculty award.

### **Maureen K. Reed, MD, FACP - “How Will this Wave of Reform Break?”**

Maureen Reed serves as Adjunct Faculty in the School of Public Health and the School of Medicine of the University of Minnesota. She has dedicated her career to delivering better health outcomes for Minnesotans.

Dr. Reed practiced internal medicine at Aspen Medical Group and Fremont Community Clinic and was the Medical Director of HealthPartners. She served on 2007-08 Minnesota Health Care Transformation Task Force, charged by the Governor with developing a statewide action plan for “transforming the health care system to improve affordability, quality, access, and the health status of Minnesotans.” She has taught policy and politics at the School of Public Health and speaks nationally on health care cost, quality, and improvement.

Dr. Reed graduated from the U of M Medical School and completed her residency in internal medicine there. She served on the University of Minnesota’s Board of Regents from 1997-2005, chairing the Board from 2001-2003. She has filed to run DFL for Minnesota’s 6<sup>th</sup> Congressional District in 2010.

### **Patricia Moten Marshall, MHA - “How Can We Ride the Wave of Reform Successfully?”**

Patricia Moten Marshall is the president of SynerChange Chicago, a change leadership firm that helps organizations and individuals see new possibilities, change their mindset, and move from where they are to where they want to be. Prior to starting her firm, Ms. Moten Marshall served in several executive healthcare positions including Director of the Loyola University Medical Center Hospital, Chief Operating Officer for Saint Joseph Hospital and Healthcare Centers, and Vice President for the Lutheran General Health System.

Ms. Moten Marshall holds a master’s degree in hospital administration from St. Louis University. She serves as faculty for the Lake Forest Graduate School of Management Corporate Education Program, where she received its 2007 Most Distinguished Business Management Faculty Award, and chairs the Board of Trustees of the Adler School of Professional Psychology.

### **Carol Backstrom, MHA - “Where Will this Wave of Reform Take Us?”**

Carol Backstrom is the Assistant to the Commissioner for Health Reform at the Minnesota Department of Health (MDH). In this role she works with both MDH and the Department of Human Services to oversee

implementation of the health reform initiative passed by the Minnesota Legislature and signed into law by Governor Pawlenty in May 2008.

Ms. Backstrom has extensive background in health care policy, administration and project management. Prior to joining MDH, she worked for HealthPartners and Regions Hospital in St. Paul, Minnesota. In that position, she led the development and implementation of Well@Work, a new business line of worksite wellness services. Ms. Backstrom also served as manager of Government Relations and Community Health Initiatives for HealthPartners/Regions, focusing on issues related to government program benefits and eligibility, medical education, and uncompensated care.

Ms. Backstrom has a Masters degree in health care administration from the University of Minnesota.

## **BREAK-OUT SESSION SPEAKERS**

### **Michele Allen, MD, MS – “You, Too, Can Do Community-Based Participatory Research”**

Michele Allen is an Assistant Professor in the Department of Family Medicine and investigator in the Program in Health Disparities Research at the University of Minnesota. She researches using participatory methods to develop health promotion and substance use prevention among Latino and other immigrant adolescents. She has received grants from NIH, American Cancer Society, and others supporting her collaborative work with immigrant and refugee communities. She currently practices at the Community University Health Care Center, CUHCC, in Minneapolis.

Dr. Allen completed medical school at University of Minnesota and residency at Ramsey Family and Community Medicine program in St. Paul, Minnesota. At University of California, Los Angeles, she was a Robert Wood Johnson Clinical Scholar a program which provides post-doctoral training for young physicians interested in research and leadership careers in health policy and academic medicine. Dr. Allen has spent her clinical career caring for Latino and other immigrant and underserved families in Los Angeles and Minnesota.

### **Donna Blomquist, RN – “Pandemic-Ready: How to Run a Tabletop Drill in a Clinic Setting”**

Donna Blomquist, a Registered Nurse, is the Twin Cities area Metro Regional Healthcare Preparedness Coordinator with the Hospital Preparedness Program (HPP). In this position she works with hospitals, clinics and long term care facilities in emergency preparedness. Prior to this position, she was the Coordinator of the Metro Clinic Coordination Workgroup (MCCW) which is sponsored by HPP. The MCCW has been meeting since 2004 and focuses on clinic emergency preparedness planning. Ms. Blomquist has participated in many healthcare exercises as well as public health sponsored exercises.

The majority of Ms. Blomquist’s nursing career has been devoted to operations and management in a clinic setting.

### **Gloria Cantor, RN, CNS – “Cultural Aspects in the Presentation & Treatment of Depression”**

Gloria Cantor is a Registered Nurse and works at the Community University Health Care Clinic (CUHCC). She has worked extensively with children and adolescents in the outpatient setting for the past 13 years. Ms. Cantor’s clinical experience includes working in psychiatry in a hospital setting, as a psychiatric crisis nurse manager, and as an inpatient nurse manager.

Ms. Cantor received a BSN and MSN in nursing at the University of Minnesota. She also holds ANCC board certification in child and adolescent mental health.

### **Elizabeth Carpenter Cinqueonce – “HITECH: Resources & Incentives for EHR Utilization and Meaningful Use”**

Liz Cinqueonce is the Deputy Director of the Office of Health Information Technology at the Minnesota Department of Health. In this capacity she provides direction and oversight for the statewide Minnesota e-Health Initiative, manages health informatics projects that support state and local public health, and provides technical assistance to various facets of state government.

Prior to working at MDH, Ms. Cinqueonce served as Vice President of Public Affairs for the Minnesota Pharmacists Association. She is a graduate of the University of St Thomas and has significant experience in health policy development and government affairs.

### **Theresa L. Cleary, RN – “Mining an EHR for Quality Data: Practice Culture, Workflow & Technical Issues”**

Theresa Cleary is the Informatics Nurse at Open Cities Health Center (OCHC). As the co-project manager for OCHC’s EHR initiative, Ms. Cleary provides leadership, direction, and training for all aspects of EHR use and for ongoing development of projects such as e-Prescribe, digital radiology, bi-directional lab interfaces, and clinical reporting enhancements. She is also working in collaboration with the Minnesota Department of Health’s Asthma program in an effort to integrate MDH’s Interactive Asthma Action Plan with OCHC’s EHR.

Her passion for informatics began almost 10 years ago when she volunteered to become a ‘Super User’ and staff trainer for the EpicCare implementation at HealthPartners Midway Clinic. Prior to her position as Informatics Nurse, Ms. Cleary was the Nurse Manager at Open Cities. In this capacity she served as a primary team member in the clinic’s initial transition to EHR. Her comprehensive clinical skills and ability to “speak IT” led to her current role as liaison between OCHC’s culturally diverse, multi-disciplinary departments, IT staff, and EHR related vendors.

Ms. Cleary served as a member of the MN e-Health Initiative’s *Effective Use of Electronic Health Record Systems Work Group*, and was a presenter at the 2009 MN e-Health Summit breakout session titled, ‘*Using Decision Support to Improve Population Health*’.

### **Walter Cooney, MA, JD – “HITECH: Resources and Incentives for EHR Utilization and Meaningful Use”**

Walt Cooney is Executive Director of the Neighborhood Health Care Network, a management services organization that provides IT, quality improvement, fund-raising and other support to 14 community clinics in the Twin Cities metro area. Mr. Cooney also serves as co-chair of the State of Minnesota e-Health Advisory Committee.

Prior to joining the Network, he held clinic management and provider contracting positions with Medica, United Health Group, and Abbott Northwestern Hospital. Mr. Cooney has a B.A. degree from Georgetown University, a M.A. in Health Services Administration from the University of Wisconsin-Madison, and a J.D. from William Mitchell College of Law.

### **Kathleen A. Culhane-Pera, MD, MA – “You Too Can Do Community-Based Participatory Research”**

Kathleen Culhane-Pera is a family physician, medical anthropologist, and Associate Medical Director at West Side Community Health Services in St. Paul, Minnesota. Dr. Culhane-Pera has an NIH grant to support community-academic partnerships for community-based participatory action research.

Since 1985, Dr. Culhane-Pera has conducted qualitative and quantitative research with the Hmong community. In 2007 and 2008, along with Dr. Robert Straka, and the Hmong Pharmacogenomics Research Board, she

obtained grants from the University of Minnesota's Program in Health Disparity Research to conduct qualitative investigative research into the Hmong community's concepts of heredity and potential response to a genomic research project. As part of these grants, in 2008-2009, they collected biological samples for genomic analysis.

In addition, Dr. Kathie (as she is known in the Hmong community) is co-editor of a multicultural case book on culturally responsive care, entitled *Healing by Heart: Clinical and Ethical Case Stories of Hmong Family and Western Providers*.

### **Mary Beth Dahl, RN, CPC, CPHQ – “Make the Culture Care Connection: How to Address the Cultural Diversity of Your Patients & Staff”**

Mary Beth Dahl has been a Stratis Health program manager and quality improvement consultant since 2000. She currently leads the Culture Care Connection initiative, which includes working directly with primary care clinics across the state of Minnesota on cultural issues and challenges, as well as providing oversight to the newly created [www.culturecareconnection.org](http://www.culturecareconnection.org) Web site. She also is involved with several other health care organizations and planning committees, including the Minnesota Diabetes Collaborative, Minnesota Health Literacy Partnership, and Disparities Task Force.

Ms. Dahl is a Registered Nurse, Certified Professional Coder (CPC), and Certified Professional in Healthcare Quality (CPHQ). Her background includes health care quality improvement work in disparities reduction with underserved communities, guideline development and implementation, utilization review, compliance, and nursing. She has worked with clinics for nearly twenty years in a variety of capacities. Ms. Dahl received an AA in Nursing from Lakewood College in White Bear Lake, MN and a BS from Bethel University in St. Paul, MN.

### **Mary Deering, RN MPH: Presenter – “Physiology of Weight Control: What Works”**

Ms. Deering received her BSN at Augsburg College and her MPH at the University of Minnesota School of Public Health. She worked at Cedar Riverside People's Center in the early 1980s, as well as with care management during the MSHO demonstration project days and geriatric community care.

Ms. Deering is certified as a master trainer in Stanford University's Chronic Disease Self Management Program. She is currently the nurse coordinator for adult and pediatric weight management clinics at the University of Minnesota Medical Center-Fairview.

Ms. Deering will speak in place of Dr. Charles Billington, who was unable to attend.

### **Brooke DeKok, REHS – “Pandemic-Ready: How to Run a Tabletop Drill in a Clinic Setting”**

Brooke DeKok is a Registered Environmental Health Sanitarian and has been working in public health emergency preparedness planning for over eight years. For the past five years she has been an Emergency Preparedness Coordinator for Hennepin County Public Health. Ms. DeKok leads the Hennepin County Public Health and Clinic Partnership Workgroup (HCP<sup>2</sup>) which provides emergency preparedness training and support to medical clinics.

In addition to her extensive work in the healthcare community, Brooke has been active in planning and executing numerous emergency responses and exercises. Most recently, she served as the Exercise Director for a large multi-jurisdictional, multi-agency functional exercise. She is well versed in incident management strategies and exercise development.

Ms. DeKok received a BS in Geology and Environmental Science from the University of St. Thomas. She has had professional training in Pandemic Flu Planning & Response and Emergency Response Behavioral Health. Ms. DeKok is federally certified in the National Incident Management System.

## **Faith Dohmen, RN – “Make the Culture Care Connection: How to Address the Cultural Diversity of Your Patients & Staff”**

Faith Dohmen is an RN with more than 35 years of experience as a Pediatric nurse and education coordinator. She has been the coordinator of education for staff and patients at Hennepin Faculty Associates for nearly 10 years. Ms. Dohmen is always looking for opportunities to improve the cultural competence of the staff. She is excited to participate in the Culture Care Connection project.

## **Phil Griffin, JD – “State Health Care Reform: Minnesota’s 2009 Legislative Session”**

Phil Griffin began his career as Staff Assistant during the first term of Minnesota Governor Rudy Perpich. He spent the next four years as staff for the House Higher Education Division and the House Health and Welfare Committee before taking a position lobbying for the Minnesota Medical Association. Mr. Griffin was then hired by Physicians Health Plan (PHP) where he worked for the health plan, its management company United Healthcare and PHP’s successor Medica. From 1993 to 2001 Phil was Vice President of Public Policy for Preferred One.

As the principal and owner of Griffin Government Consulting, Mr. Griffin continues to represent Preferred One and six other healthcare clients. He is a graduate of Hamline University and William Mitchell College of Law.

## **Anna Gunvalson – “Mining an EHR for Quality Data: Practice Culture, Workflow & Technical Issues”**

Anna Gunvalson is the Program Compliance Coordinator at Migrant Health Service, Inc. (MHSI) in Moorhead, Minnesota. She has been with MHSI since 1998. As the Program Compliance Coordinator, Ms. Gunvalson has been involved in the implementation process for MHSI in the transition to electronic medical records and practice management systems.

Ms. Gunvalson has a BA in Sociology from North Dakota State University in Fargo, North Dakota.

## **John Halfen, MD – “HealthCare Homes Case Study: Tools & Patient Engagement”**

John Halfen is a family physician and Medical Director of Lakewood Health System (LHS) located in Staples, Minnesota. LHS is an integrated system consisting of five rural primary care clinics, a critical access hospital, a long term care center, a senior behavior health unit, a senior apartment facility, an aesthetic skin center and an assisted living facility. Dr. Halfen is the Todd County Medical Advisor, as well as a certified Medical Review Officer.

Dr. Halfen has a special interest in geriatric healthcare and in the development of preventive care initiatives for all ages. He leads Lakewood Health System’s Medical Home development, which he has described in the booklet *Putting the Principles into Practice: Medical Home*.

Dr. Halfen trained at the University of Minnesota, and maintains board certification through the ABFP and ABIM/Added Certification in Geriatrics.

## **Kristi Jacobson – “Mining an EHR for Quality Data: Practice Culture, Workflow & Technical Issues”**

Kristi Jacobson is the Chronic Disease Coordinator at Migrant Health Service, Inc. (MHSI) in Moorhead, Minnesota. She has been with MHSI since 2005. Kristi has been actively involved in the EHR implementation process as a super user with duties ranging from software customization to staff training.

Ms. Jacobson has a BA in Biology and Spanish from Minnesota State University Moorhead and is nearing completion of a Masters degree in Health Care Administration from Des Moines University.

### **Bill Jones, MBA – "Mining an EHR for Quality Data: Practice Culture, Workflow & Technical Issues"**

Bill Jones is the Information Technology Manager at Open Cities Health Center in St. Paul, Minnesota and is responsible for managing five servers at two clinic sites. He has past experience in the banking industry and was involved in the IT aspect of banking as they transitioned to electronic systems.

Mr. Jones has a BA in Sociology from the University of Washington, Seattle and an MBA in Management from the University of St. Thomas.

### **Clarence Jones, MEd – "You Too Can Do Community-Based Participatory Research"**

Robert "Clarence" Jones is the Community Outreach Director for Southside Community Health Services/Q Health Connection. He has worked in youth development for more than 25 years, focusing on male responsibilities, especially involving low-income, non custodial fathers with their families and helping New American/immigrant fathers to be positively engaged with their acculturating families and our social systems.

Mr. Jones has facilitated cultural diversity trainings both nationally and internationally. He is active on several community boards, the University of Minnesota Health Disparities Research Board, The Saint Paul's Foundation Pan African Community Endowment (PACE) and the Public Health Advisory Committee for the City of Minneapolis.

Mr. Jones has both a bachelor and masters degree from Concordia University in Saint Paul, Minnesota. He is enrolled in the University of Minnesota School of Public Health Maternal & Child Health program with a focus on the role of fathers in the lives of families. He has co-authored the book, *Black Fathers: An Invisible Presence in America*.

### **Marvel Jordan, MSW LICSW: Presenter – "Adolescents & Chronic Disease Prevention"**

Ms. Jordan received her MSW at the University of Minnesota. Providing services to adolescents has been her life-long passion. She was involved in the early development of the school-based program and has worked for 25 years with the Health Start School-Based Clinic.

Jordan currently supervises Health Start's team of social workers and works with the students at Highland Park High School in St. Paul. Ms. Jordan will speak in place of Linda Dick-Olson, who was called out of town.

### **Georgi Kroupin, MA, LP – "Cultural Aspects in the Presentation & Treatment of Depression"**

Georgi Kroupin is currently a lead psychologist and the head of the Mental Health Program at HealthPartners' Center for International Health (CIH) where he provides individual and family therapy with CIH patients. He also teaches Family Therapy-related classes at St. Mary's University of Minnesota and conducts conferences and community presentations on the topics of cross-cultural mental health and collaborative healthcare.

Mr. Kroupin's past experience includes work as a psychologist and family therapist at the Moscow Center for Marriage and the Family where he also served as Center director. He has co-authored a chapter on New American Families in a Handbook of Family Development and Intervention and co-authored two chapters on refugee mental health in the publication *Immigrant Medicine*.

Mr. Kroupin has an MA in economics and a master's degree in clinical psychology from Moscow State University. He received a Ph.D. in Marriage and Family Therapy from the University of Minnesota.

### **Scott Leitz, MPA – "State Health care Reform: Minnesota's 2009 Legislative Session"**

Scott Leitz serves as Assistant Commissioner at the Minnesota Department of Health where he oversees and directs MDH efforts on health care policy development and health reform. He was instrumental in spearheading the Administration's work in the process of passing major state health care reforms during the 2008 Minnesota legislative session.

Prior to becoming Assistant Commissioner, Mr. Leitz directed the Division of Health Policy, which has broad responsibility for research and analysis on Minnesota's health care. He also served as Minnesota's Health Care Economist from 1999 to 2005.

Mr. Leitz has a master's degree in public affairs from the University of Minnesota's Humphrey Institute of Public Affairs and a B.S. in economics and mathematics from the University of Wisconsin, Eau Claire.

### **Mary Lewis, MS, RN – “Make the Culture Care Connection: How to Address the Cultural Diversity of Your Patients & Staff”**

Mary Lewis is the Clinic Compliance Specialist for The Joint Commission Accreditation Coordination at Hennepin Faculty Associates. She has several years of experience as a nurse in geriatrics and community health care. Her work is directed to the elimination of health care disparities using educational approaches to increase awareness and promote change in health care workers.

### **Elizabeth Lukanen, MPH, Senior Research Fellow – “National Health Care Reform: The Proposals & the Politics”**

Elizabeth Lukanen is the Deputy Director of State Health Access Reform & Evaluation (SHARE), a national program of the Robert Wood Johnson Foundation operated out of SHADAC, the State Health Access Data Assistance Center, at the University of Minnesota School of Public Health. SHARE evaluates state health care reform activities and assembles evidence from a wide variety of reform approaches to help state policy makers identify approaches to health reform that are right for their state.

Ms. Lukanen worked as Senior Research Economist in the Health Economics Program (HEP) at the Minnesota Department of Health prior to joining SHADAC. She holds a master's degree in public health from Columbia University and a bachelor's degree in economics from McGill University.

### **Stacie Lundquist, BS, BA, CFT – “Adolescents and Chronic Disease Prevention”**

Stacie Lundquist earned her BS in Kinesiology, the study of the body and its movements, and her BA in Psychology from the University of Colorado-Boulder. For over eight years, she has worked in the fitness industry providing personal training, rehabilitation, research. Ms. Lundquist is now in her second year working with the Fit Team in adolescent disease prevention at St. Paul high schools.

### **Corinne K. Malecha, MPH, RD, LD – “Adolescents & Chronic Disease Prevention”**

Corinne Malecha is a Registered Dietitian at Teen Age Medical Services (TAMS) an outreach clinic of Minneapolis Children's Hospital. Prior to joining TAMS, she worked as a Licensed Registered Dietitian for 11 years at Health Start, a division of West Side Community Clinic.

Ms. Malecha has BS in Dietetics from University of Wisconsin-Stout and a Masters in Public Health Nutrition from University of Minnesota. She has also completed a 12 month Fellowship in Adolescent Health with the Adolescent Health Program at the University of Minnesota.

### **Deborah Mielke, MD – “Mining an EHR for Quality Data: Practice Culture, Workflow & Technical Issues”**

Deborah Mielke is the Medical Director of Open Cities Health Center a federally funded community health center located in St. Paul, Minnesota. A family physician who has worked in community medicine for over 20

years, Dr. Mielke recently received a Bush Foundation fellowship to pursue a Masters of Public Health in Epidemiology. She has been working with the Open Cities Health Center EHR development team for the past 5 years.

### **Michael D. Scandrett, JD – “State Health Care Reform: Minnesota’s 2009 Legislative Session”**

Michael Scandrett leads the health policy practice of Halleland Health Consulting. His work focuses on health policy, strategic planning, regulatory compliance, and consulting support to health care agencies, nonprofits and governmental entities. In 2007 he spearheaded the creation of the Minnesota Safety Net Coalition, an association of nonprofits collaborating to improve access and reduce barriers to affordable health coverage and services for all Minnesotans.

Mr. Scandrett has been an advisor and policy analyst for over 20 years. His past roles include Executive Director of the Minnesota Council of Health Plans, Executive Director of the Minnesota Health Care Commission and legal counsel to the Minnesota Senate. He has served as a board member and officer of a number of Minnesota nonprofits.

Mr. Scandrett received his JD from the University of Minnesota Law School in 1982.

### **Rick Selvik, MPH, MBA – “Community Health Center Dashboard”**

Rick Selvik works as a Public Health Analyst for the Office of Performance Review (OPR) at HRSA, the Health Resources Service Administration, in its Region V office in Chicago. He reviews the performance of various HRSA grantees ranging from community health centers to special health focus grants and programs and coordinates reviews as a team leader. Mr. Selvik develops performance measures and leads the dialogue with the grantee to identify contributing and restricting factors and the development of performance improvement options.

Mr. Selvik has a Masters in Public Health/Social Work from the University of Minnesota and MBA from the Lake Forrest Graduate School of Management.

### **Brooke Stelzer – “Make the Culture Care Connection: How to Address the Cultural Diversity of Your Patients & Staff”**

Brooke Stelzer is the Health Education Director at the Annex Teen Clinic in Robbinsdale, Minnesota. She provides comprehensive sexuality education presentations for adolescents, parents of adolescents, community groups, and faith communities. She also works with professionals to promote best practices around adolescent sexual health.

Currently, Ms. Stelzer is part of the Gender Inclusive Sexuality Education (GISE) group. GISE is providing a workshop on October 29, 2009 to help educators build gender competencies in sexual health education via a deeper understanding of gender, curriculum adaptations, and the larger context of access and health disparities for transgender youth.

### **Patricia Swanson, RD, LD, CDE – “Adolescents & Chronic Disease Prevention”**

Patricia Swanson has worked with teens for over 30 years in the Health Start School-based Clinics in St. Paul, Minnesota. Her areas of expertise include counseling on: nutrition for pregnant and parenting teens, sports nutrition, disordered eating, anemia, and weight control.

Since 2002 Ms. Swanson has also been employed at Health East Care System as a diabetes educator. In this role she teaches classes on pre-diabetes and Type 2 diabetes for adults and does individual diabetes counseling.

### **Bernard Turner - "Recess"**

Bernard Turner is a recipient of the 2009 STEPS Community Heroes Award from the Center for Disease Control’s Healthy Communities Program. For the past nine years he has promoted healthy living in low-income

communities through fitness classes and supportive services to people of all ages. Mr. Turner has been a featured speaker at the Minnesota Diabetes Conference, Women's Expo and the National Conference on Health Promotion and Education.

Mr. Turner is pursuing a master's degree in business with the goal of launching a chain of fitness centers specifically for people living with chronic conditions.

### **Jonathan Watson, MPA – “State Health Care Reform: Minnesota’s 2009 Legislative Session”**

Jonathan Watson has worked for the Minnesota Association of Community Health Centers, MNACHC, since 1996. He serves as Associate Director and Director of Public Policy. His work involves public policy and fiscal analysis, and participation in State-wide task forces and workgroups.

Prior to joining the Association, he served as a budget and policy analyst for the Wisconsin Department of Health & Family Services where he conducted fiscal and policy analysis on Wisconsin's Medicaid managed care expansion and on the “Wisconsin Works” welfare reform project.

Mr. Watson holds a BA in Economics from Saint Olaf College in Northfield, Minnesota and a Masters in Public and International Affairs from the University of Pittsburgh.

### **Sharon K. Windorski, BSN, MA, CNP: Co-Presenter – “Adolescents & Chronic Disease Prevention”**

Sharon Windorski has worked as a nurse practitioner serving at-risk and underserved adolescents for nine years. She has worked for the Ramsey County Juvenile Detention Center and for Westside Community Health Services in its Health Start School-Based Clinic Program.

Ms. Windorski co-authored the article *Educating NPs to Educate Patients: Cholesterol Screening in the Primary Care Setting* and has presented on the topic of adolescent cardiovascular health.

Ms. Windorski earned a BSN at the University of Minnesota, Minneapolis and MA from the College of St. Catherine in St. Paul. She is certified as Pediatric Nurse Practitioner by the Certification Board of Pediatric Nurse Practitioners and Nurses.

### **Maureen Younkin, RN: Co-Presenter – “Make the Culture Care Connection: How to Address the Cultural Diversity of Your Patients & Staff”**

Maureen Younkin is the lead registered nurse at the Annex Teen Clinic where she has worked for the past 10 years. Ms. Younkin provides sexuality related health care to clients that includes: birth control, sexually transmitted infection testing and treatment and pregnancy testing with all-options counseling. She has also worked part time at Midwest Health Center for women since 1988 and is a certified Sexual Assault Nurse Examiner through Hennepin County Medical Center.

## 2009 Exhibitors

American Diabetes Association  
American Solutions for Business  
BKD, LLP  
Blue Cross & Blue Shield of Minnesota  
Cedar Riverside People's Center  
David Martin Agency, Inc.  
EHS, Electronic Healthcare Systems, Inc.  
Eli Lilly diabetes Care  
Forward Health Group  
Fremont Community Health Services  
GlaxoSmithKline Vaccine  
Great Plains Telehealth  
Headwinds Solutions Minnesota  
HealthPartners  
Health Sciences Library – U of M  
Heartland Medical Distribution  
Henry Schein, Inc.  
i2i Systems  
ICSI  
Learning ZoneExpress  
Lupus Foundation of MN  
Medica Foundation  
Medicare Diabetes Screening Project  
MERCK Vaccines  
Metropolitan Health Plan  
Minnesota AIDS Training & Education Center (MATEC – U of M)  
Minnesota Department of Health: Flu (H1N1), Aging /Chronic disease Management, Health Care homes, HIV/AIDS Unit  
Minnesota Department of Health – Office of Rural Health & Primary Care  
Minnesota International Health Volunteers  
Minnesota Prevention Resource Center  
NorthPoint Health & Wellness Center  
Novartis  
NovoNordisk  
Pfizer  
PSS (Promotion Support Services)  
Quest Diagnostics  
St. Paul Diabetes Lion Club  
STEPS to a Healthier Minneapolis  
Stratis Health  
SunRx  
Takeda Pharmaceuticals  
The NU Group, LLC  
UCare  
Visionary Healthcare  
Vista Staffing Solutions  
Welch Allyn  
Wipfli CPAs and Consultants

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## Minnesota Association of Community Health Centers (MNACHC)



MNACHC is a nonprofit association of federally qualified health centers (FQHCs) and other safety net providers located throughout Minnesota that provide comprehensive preventive and primary care services to all individuals, regardless of their ability to pay. Member clinics offer medical, dental, and mental health care to approximately 190,000 patients in urban, rural and tribal areas each year. The majority of patients served by these clinics are low income, uninsured, and medically underserved.

<http://www.mnachc.org/>

## Minnesota Department of Health (MDH)- Diabetes Program and Heart Disease & Stroke Prevention Program



The MDP and HDSP programs are dedicated to improving the health of all people in Minnesota by reducing the impact of diabetes and cardiovascular disease. To achieve this, we work to attain population-wide impact by collecting and publicizing state diabetes and cardiovascular disease data to guide policy and program design, convening forums and facilitating effective stakeholder partnerships, translating health research into practice, and promoting innovative, effective, and culturally appropriate improvement strategies. Please visit our websites at [www.health.state.mn.us/diabetes](http://www.health.state.mn.us/diabetes) and [www.health.state.mn.us/cvh](http://www.health.state.mn.us/cvh)

## Neighborhood Health Care Network (NHCN)



NHCN is a management services organization for community clinics in the Twin Cities metropolitan area. NHCN provides centralized business and administrative support to these member clinics. Community clinics provide high quality, accessible, affordable health care to primarily low-income and medically underserved populations. NHCN's mission is to strengthen the community clinics through integrated activities to improve the health of underserved communities.

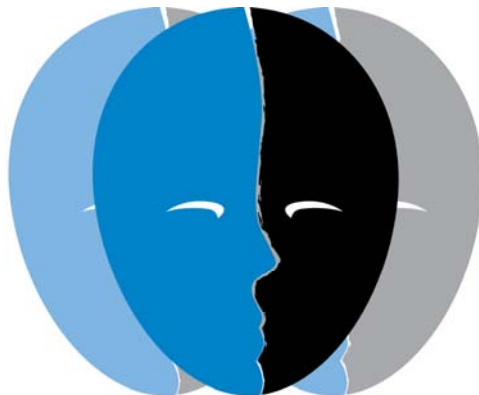
<http://www.nhcn.org/>

The Many Faces of Community Health Conference is made possible, in part, through funding from the U.S. Department of Health and Human Services - Centers for Disease Control and Prevention (CDC) and the Bureau of Primary Health Care (BPHC) and the State of Minnesota.

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