

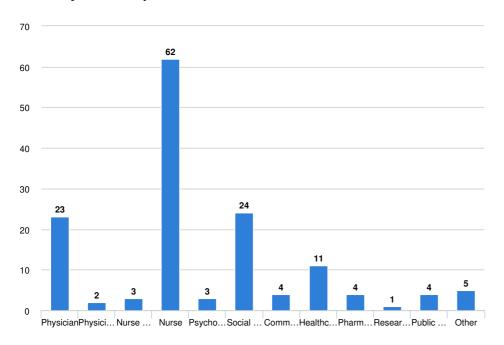
2019 CTC-RI Annual Conference: Advancing Integrated Primary Care: Innovations at Work Thursday, October 24, 2019

The Crowne Plaza Hotel | Warwick, RI

Evaluation Summary

Total Attendees: 363 | Survey Respondents: 139 (38%)

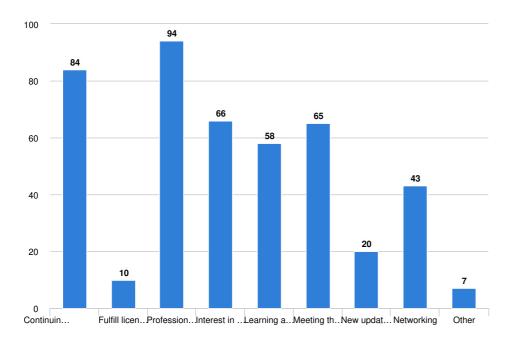
What is your occupation?



Dhysician	00
Physician	23
Physician Assistant	2
Nurse Practitioner	3
Nurse	62
Psychologist	3
Social Worker	24
Community Health Worker	4
Healthcare Administrator/Manager	11
Pharmacist	4
Researcher	1
Public Health Professional	4
Other	5

- Care coordinator
- Peer Recovery Specialist
- Project Coordinator
- Recently completed grad school in social work
- Training & Development, Rhode Island Quality Institute

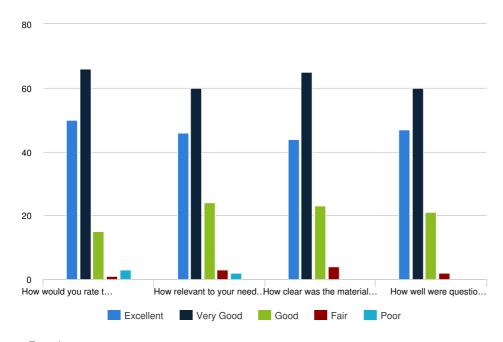
What was you interest or purpose in attending this activity?



Continuing education credits	84
Fulfill licensure requirements	10
Professional Development	94
Interest in topic	66
Learning about available resources	58
Meeting the needs of patient populations	65
New updates in diagnosis and treatment	20
Networking	43
Other	7

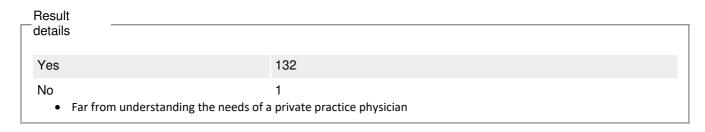
- Decided to attend conference, not just present
- Forced to attend by PCMH kids guidelines
- I was a presenter for one break out session
- Member of Planning Committee
- Public health partner to CTC
- Required by CTC

Overall Conference Evaluation

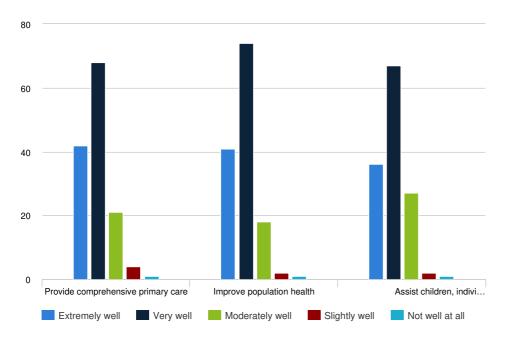


	Excellent	Very Good	Good	Fair	Poor
How would you rate this educational activity overall?	50	66	15	1	3
How relevant to your needs was the information presented?	46	60	24	3	2
How clear was the material presented?	44	65	23	4	0
How well were questions answered?	47	60	21	2	0

Was the content of this activity fair, balanced, objective, and free of commercial bias?



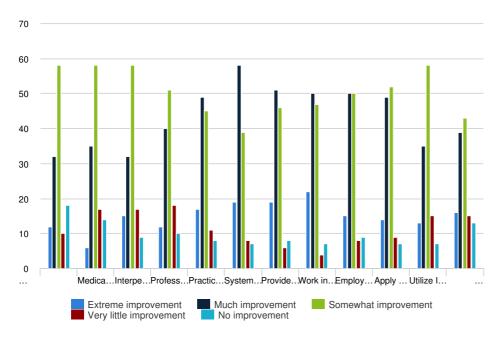
How well were the Learning Objectives of this activity met overall?



Result

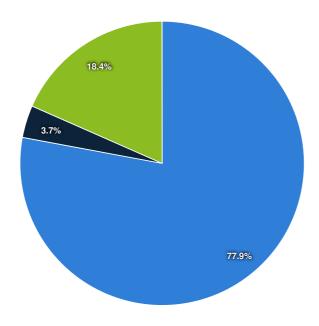
details					
	Extremely well	Very well	Moderately well	Slightly well	Not well at all
Provide comprehensive primary care	42	68	21	4	1
Improve population health	41	74	18	2	1
Assist children, individuals and families with substance use disorders	36	67	27	2	1

Which of the following competency areas do you feel may have been improved as a result of this activity?



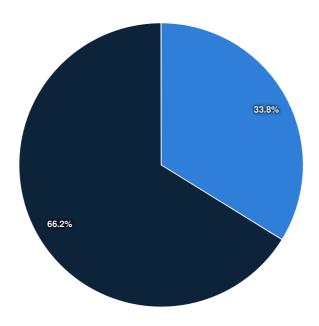
	Extreme improvement	Much improvement	Somewhat improvement	Very little improvement	No improvement
Patient Care and Procedural Skills	12	32	58	10	18
Medical Knowledge	6	35	58	17	14
Interpersonal and Communication Skills	15	32	58	17	9
Professionalism	12	40	51	18	10
Practice-Based Learning and Improvement	17	49	45	11	8
Systems-Based Practice	19	58	39	8	7
Provide Patient-Centered Care	19	51	46	6	8
Work in Interdisciplinary Teams	22	50	47	4	7
Employ Evidence-Based Practice	15	50	50	8	9
Apply Quality Improvement	14	49	52	9	7
Utilize Informatics	13	35	58	15	7
Values/Ethics for Interprofessional Practice	16	39	43	15	13

Will you participation in this activity have an impact on your practice, leadership, performance, or with you research?



Result	
details	
Yes	106
No	5
Not Sure	25

Please explain your response to the previous question



- It will continue to drive our care coordination model of treating the whole person in their environment.
- At administrative level.
- Job searching
- I will change the way I think about asking social determinants of health questions, and also treat + refer
- Patients with anxiety
- Taking the resources back to the office to share with providers
- Planning to develop enhanced primary care.
- Research avenues to increase access to team based approaches for child mental health
- Referral coordination planned
- Ideas to better integrate care
- Listen to patient goals and what they think will work for them.
- Information will help guide continued evolution
- There was excellent dialogue in all the sessions
- Improved communication with colleagues
- Broader knowledge of anxiety in pediatrics
- Learned about working more with opiate addiction
- It gives us a better understanding of out patients and the community based help that is out there for them.
- While I found some of my breakout sessions to be helpful, the majority of sessions I attended were not
- · Well-organized.
- Population health implementation
- · Complete waste of time
- Education and different perspectives on ways to improve patient centered care
- Use the community to assist provider practices
- I am unsure of my next nursing direction.
- It validated many of our initiatives
- My organization is currently working towards expanding integrated primary care and much of the conference spoke to this subject
- Purpose and meaning filled life concept will assist me in development of plan for wellness
- Attending the session of pharmacy innovations: pharmacy and collaborative care agreements was very insightful.
- Increased knowledge with how to improve Population Health
- More information and resources to provide to population
- This has allowed us to see how other agencies are overcoming boundaries that we experiencing in our agency
- I plan on attending further training on desensitization for anxiety.
- Will try to apply the concepts to current practice.
- I would participation in an activity to improve population health
- Useful info. for forming research questions
- My leadership will be more client-solution based
- Provided some new resources
- Increase understanding of what others are seeing as valuable in the state
- Improved interaction with certain high-risk groups

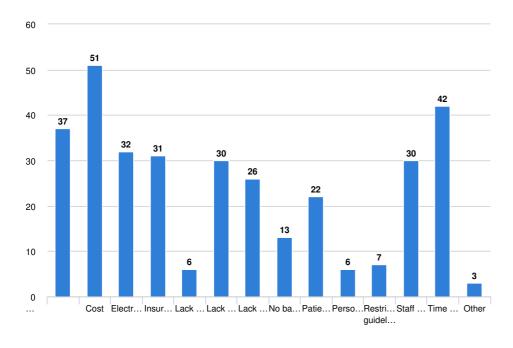
- Many of the suggestions/discussions were theoretical and will require the support of Administration
- Met many participants with the same interests to now network with
- Employee satisfaction
- I am part of a team and will utilize their skills
- Grant writing knowledge and resources
- Will try to work better with families affected by substance use.
- Enjoyed session on anxiety teaching for parents on exposure
- Increased knowledge and information to fulfill patient needs.
- New ideas to implement
- It was good to learn about the future direction of primary care. I'm not sure how much influence I can have as a pharmacist.
- I learned more about resources available to help individuals and families with substance use treatment.
- I have more resources to provide to patients
- This information was helpful to know, but will not necessarily be utilized in my every day role.
- I did not find information this year pertained to my role as well as it has previous years.
- It provoked and inspired my thinking about the possibilities for integrated care
- Yes, will begin to look into two generation health and behavioral health care integration
- Working together with other community health practices to supply comprehensive medical care in one location will be beneficial
- I learned a lot about interdisciplinary teams and collaborations in the community
- Didn't quite understand some of the topics
- The changes to my practice will be influenced by the information gathered from this activity.
- As a senior manager of care management, it not only will impact myself, but have an opportunity to give information to nursing team
- I always learn new info at this seminar that is useful in day to day operations
- · Our role as nurse care managers in primary care is still evolving
- Improve approaches
- Resources
- Not sure where this will lead me
- I am not a clinician; some of the info I heard may lead to additional learning for myself, or creating learning module for other
- The learning activities were insightful and help show different opportunities for interdisciplinary care
- · Bringing back the data and lessons learned will inform our current IBH practices and improve our delivery of care
- I did learn things that I could bring back to my practice.
- Learned about Integra home program
- Increased knowledge
- I was impressed by the value of screening for social determinants of health
- It will change how we design pediatric case management
- Exposure to the public health framework in RI, networking with professionals at an early stage in my career
- Put into practice
- I plan to provide trainings to the staff I work with of the above competency areas often to remind
- Supporting better shared access to EMR
- In particular the discussion around "burn out", some strategies to engage clinicians and staff
- Being more knowledgeable about resources to best help our patients
- Pathways to population health
- Great insight into practice evolution
- Opioid impact on mother/babies helpful
- I am not currently involved in healthcare delivery systems other than being a provider
- Particularly in reflecting on population health
- There were many relevant ideas
- Information will be taken back to team
- Very informative on implementing interdisciplinary communications
- My main goal was to leave with new resources for my patients and assess how others are meeting their patients needs
- I was able to obtain resources that would help me to meet the needs of my patients
- New ways of thinking about SDOH
- Working with Substance Involved Families
- Help with clinic redesign
- System constraints, patient refusals

What is the most important thing you learned by attending this activity and how will it affect you and your practice?

- That CHW outreach should be leveraged more than it currently is.
- Need to expand beyond practice/payer and standardize approach in RI.
- Doctors don't need an office and can share patients
- Some surveys for child mental health screening
- The building blocks for an innovative primary care practice.
- The importance of collaborating with other providers to support parents in recovery and team based, non-stigmatizing models
- Population health
- Back to basics care of whole person, their family and community
- Inspired to partner in information sharing.
- High-quality referral process
- Skills to use with children who suffer with Autism
- Importance of communication/increase communication (x 2)
- More than one model of primary care integration
- Working more with our care team to identify and help opiate addiction.
- To use the resources we have already available, but are not readily using. To see the patient as a person not as a number.
- I learned about provider well-being and the importance of communication when working in multidisciplinary teams.
- IHI speaker had good material
- That integrated psychiatry works for the health centers but has no place in small practices that do not receive wrap around payment
- Patient centered care, The benefits of integrated behavioral health in primary care
- Using technology to roll out SDOH
- · Population management
- That the challenges of primary care are completed misunderstand and disregarded
- Some of the barriers and lessons learned were very informative. I will share with our implementation teams.
- Integra modality was an excellent method for delivering care in the home
- I will speak with our operations team about the benefits of having a pharmacist on site if possible.
- Taking bits and pieces from the many presenters and applying where needed
- Burnout and moral injury can be prevented with appropriate leadership, community and experience
- Ways to incorporate outside resources in our agency, need to improve care for mothers with SUD DX
- Treatment of Adolescent Anxiety
- To complete as many things for the whole family as a whole in one area.
- How to help to improve population health
- Opportunities for collaborative pharmacy practice and research on the effectiveness and cost-effectiveness of these programs
- What we can improve on in our practice
- Reinforced that I must proactively seek out partners and innovate from community base up
- Improvements in Current Care
- The larger goal of HIT within the state
- How to utilize new communication skills and access community resources for families with NAS babies
- How many resources there are
- Employee retention
- Importance of team work
- Learned about families affected by substance use.
- Skills with pediatric anxiety
- How to meet the needs of multiple patients using information that is available and obtainable.
- Exposure to new ideas such as CHARM
- The future of CPAs, I hope, will allow me more leeway to steer therapy in my practices.
- Treatment for substance use, resources available, also home care availability, communication with primary care providers.
- I learned about AWV's- when to do them and what can be done at that visit. I will share this info with my practices
- Treating children with anxiety. However this will not directly be used by my in this practice.
- Just more information
- A couple of good resources for behavioral health and pain management.
- The significance of prioritizing solid and consistent communication among providers
- Internal systems changes identified
- I'm interested that our state appears to be moving forward with this model and am excited to be a part of it
- Community collaboration and alignment

- How to treat anxiety
- Team based care and wrap around services
- Better ways to be part of an integrated care team
- Different ways to explore practice transformation for the betterment of patient care
- Redefining addiction provided me with updated information on recovery resources, which I will provide to my
 patients as needed.
- Primary practices want to coordinate with mental health providers
- Population health overview as I am redesigning my own care management team
- Learned of new resources for patients---will utilize these referrals for our patients
- Applying evidence based practice despite barriers
- Available resources (x 3)
- Leadership
- I believe the most important take away from this conference was patient centered care and interdisciplinary care
 teams.
- Learning about the Pain Program at ESH
- Hearing about anxiety and OCD behaviors in children was very helpful. More on screening SDOH.
- Learned about Integra home program
- Working with SUD families and multi-disciplinary teams
- Knowledge
- Screen for social determinants of health and, specifically "How's my health"
- Focus on population health as well as program specific interventions
- To change the newborn well visit schedule for substance exposed newborns
- Team commitment to education and efficient use of funding is need to achieve healthy communities for all
- Extent of public health work that is being done here in RI that I was not aware of previously.
- It made me value my profession and informed me of ways I can be a leader as a social worker in my agency
- Role of psychiatry in IBH and how to employ in our practice
- Success of the hospital at home program and collaboration with community paramedicine
- Screening for SDOH's are so important to improving overall health with patients
- Keynote Population Health strategies
- Framework for population health collaboration with other organizations
- The importance and feasibility of including psychiatry in primary care settings
- Looking at the community and build relationships
- Leverage skills and licensure of all members of the interdisciplinary team
- I learned of new ways to assess for the needs of the patient
- The importance of teamwork and collaboration.
- Use of Community Partnerships to Improve outcomes
- Tools for advancing population health
- Acceptance that medical and nursing errors will occur with fragmented health care system as it exists now in the
- Generated more interest in trauma informed care

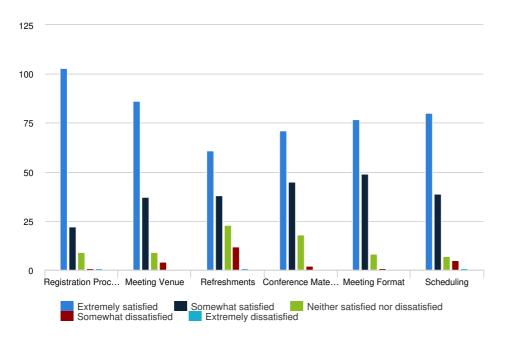
What barriers, if any, do you anticipate encountering as you make changes in your practice or professional behavior?



Administrative/institutional support	37
Cost	51
Electronic health records	32
Insurance/financial issues	31
Lack of opportunities	6
Lack of resources	30
Lack of staff support	26
No barriers anticipated	13
Patient adherence/resistance	22
Personal/staff lack of experience	6
Restrictive practice guidelines/protocols	7
Staff Resistance to change	30
Time constraints	42
Other	3

- As a health plan, much of our CM is regulated, making it more difficult to coordinate with practices and create a single point of service
- Not in a professional role yet

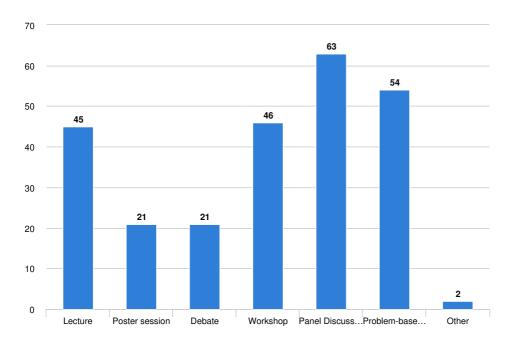
How would you rate your experience with this conference?



Result

details					
	Extremely satisfied	Somewhat satisfied	Neither satisfied nor dissatisfied	Somewhat dissatisfied	Extremely dissatisfied
Registration Process	103	22	9	1	1
Meeting Venue	86	37	9	4	0
Refreshments	61	38	23	12	1
Conference Materials	71	45	18	2	0
Meeting Format	77	49	8	1	0
Scheduling	80	39	7	5	1

What format would you like to see included in future conferences?



Lecture	45
Poster session	21
Debate	21
Workshop	46
Panel Discussion	63
Problem-based/Case-based learning	54
Other	2

- Group discussions/more networking opportunities
- Topic

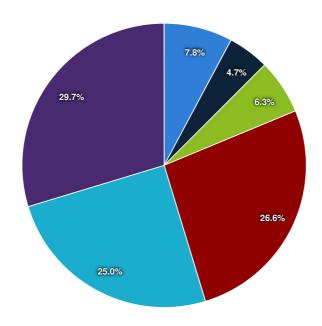
What topics would you like to see next year related to this conference?

- How best to include lifestyle medicine in primary practice
- More topics related to adolescents and young adults
- Behavioral health related
- Team based integrated care for adolescent substance use
- Pre-approved case management CEUs
- IBH options for small practices
- Medical marijuana and the parents that care for their children while using it.
- I would like to see sessions featuring information regarding the Aging/ Older Adult population.
- What's after ACOs
- Local successes in community-clinical linkages
- Continued education on integrated behavioral health models and care at home model
- Ideas on interventions to address positive screens for SDOH
- Progress of integra and their quality outcomes
- Improving the referral process.
- More on collaboration between community based organizations and primary care
- De-escalation training with staff and patients
- Panel discussions from the Accountable Entities on Best Practices
- Adolescent addiction
- Time scheduled in between sessions.
- Discussion on Transition of care and Crucial conversation
- Value-based care
- Ensuring living wages in CTC-RI enterprises
- Substance use in kids/teens
- Integration issues, more on intervention with kids/families
- RN changing roles in health care
- Ongoing r/t primary care collaboration, substance use treatment/resources.
- Population health with a focus on nutrition
- More community resources in a variety of areas that would help in the primary care setting would be helpful.
- Confidentiality in pediatric behavioral health/health integration
- Incorporating LEAN into care teams; Adverse childhood events screening
- More interesting topics for pediatrics
- Integrated behavioral health, integrated vs collocated care
- Withdrawal specifically from psych medication.
- Different ways/barriers between primary care and community/mental health agencies
- Continue to educated re: population health and how to integrate spirituality assessments along side SDOH
- Updates on behavioral health
- Geriatrics
- Goals of Care conversations
- More mental health in children treatment and prevention strategies, SDOH screenings
- Take some of the same topics and bring them down from 30,000 feet to ground level
- MAT in pregnancy
- Disabled persons, families and care givers meeting their needs and eliminating barriers to achieve whole health for all
- More discussion of the effects that race/ethnicity, gender, SES, and sexual orientation can have on
- Access and quality of care.
- Specific examples of brief Interventions
- Billing and reimbursement specific codes/rates provided BY the insurance companies for the providers to use.
- Trauma informed care
- Obesity, mental health disorders
- MAT and primary care
- Race & racial disparity among patients and providers
- How to develop an ROI for resources to transform practice
- How to overcome barriers with insurance companies
- · Dealing with different cultures and how culture impacts health. specifically Hispanic cultures
- More local programs and outcomes
- Lead screening, canine pet therapy, child population, elderly memory population like dementia

Overall comments

- Excellent conference. Thank you.
- Thanks!
- A very good conference. The speakers were very good.
- Interesting and informative
- Very nice conference! Learned a lot and shared a lot
- Very good
- The Keynote speakers provided a good framework for system change
- I really enjoyed the day. Very informative and the time limit was perfect.
- I enjoyed the first half of this conference far more than the second half. I am unsure if I will participate next year.
- IHI speaker was great; Dr. Wood less so -- mostly gave his bio
- · A giant waste of time
- Very informative conference
- Rather have a hot nicer lunch vs. big breakfast buffet
- Enjoyed conference. The rooms were cool and I did hear other people complain about the temperature
- A complete waste of my time
- The ability to hear each speaker was variable, the CEO from Canada was so difficult to hear.
- Well done, thank you!
- Overall, great conference!
- · Overall, it was very informative and enjoyed the different discussions
- Would have preferred turkey over ham for lunch. Did not feel the two keynote speakers worked well (was a bit disjointed)
- Excellent day overall!
- It would be good if there was a small break (even if 5 minutes) between one workshop ending and another starting.
- · Great job!
- Excellent conference
- The acoustics in the conference rooms made it difficult to understand the speakers.
- Excellent
- Very informative
- Very hard to hear Paul Woods, even with mike, was challenging to hear for my whole table.
- Thanks for putting on!
- Very good
- I enjoyed this conference very much, interesting topics, lots to offer and learn in one conference!
- Very good conference. materials were interesting. speakers were good
- In some of the presentations, it was difficult to hear the presenters, which made the learning environment more challenging
- Overall, great trainings and conference
- Great work!
- Fair
- Enjoyed the conference
- Very good program
- · Very informative
- Time to move between sessions; need at least 5 minutes for next speaker to set up and for attendees to get to next room
- Thank you for the opportunity to participate!
- I enjoyed this years conference!
- Very grateful that CTC puts this conference on for all of us and makes CEU's accessbile
- Well done
- Audio in the combined conference hall was terrible
- · Very interesting, informative and inspiring, looking forward to the day when this goal has been realized
- The conference was an amazing opportunity. The amount of time and effort to organize was noticed so thank you.
- Some speakers hard to hear if not comfortable holding a mic then they should be given a clip on
- Excellent sessions, very relevant,
- Thank You.
- Good conference
- Great speakers, maybe more interaction with the audience
- Thank you so much!
- I was disappointed to see the focus on pedi/ob model that completely ignored family medicine approach.

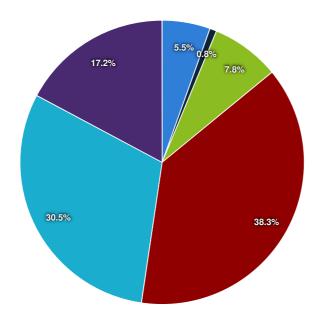
Would your practice/organization be interested in attending the IHI Pathways to Population Health Training?



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details	
0 (Low Interest)	10
1	6
2	8
3	34
4	32
5 (High Interest)	38

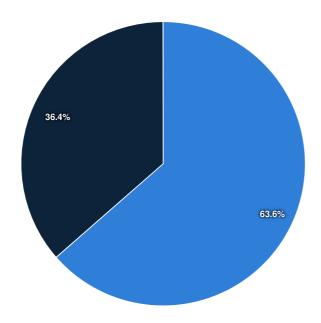
Would your practice/organization use the Framework that you learned about in today's session?



Result

details	
0 (Low Interest)	7
1	1
2	10
3	49
4	39
5 (High Interest)	22

Does your practice currently use a framework to address social determinants of health (SDOH) and chronic disease management among your patient population and improvements in community-clinical linkages?



Result details	
Yes	82
No	47

What framework is used?

- Our Optum team uses the Whole Person Care model for care coordination.
- Algorex
- See Chelsea for the framework
- Health advocates
- SDOH questionnaire
- Integrated behavioral health staff In primary care, social work resource
- Provide gaps in care reports on quality measures related to chronic diseases
- EHR can identify high risk population. In-house developed SDOH workflow
- We use a SDOH screening tool when we see patients for the first time.
- · Screenings with Health Advocates
- · Multiple screening tools
- Specialty programs such as CHF and COPD
- Educational curriculum for Community Health Workers on SDOH work
- Practice developed, it is always changing
- Not sure/unknown (x 5)
- SDOH, ACES
- A questionnaire used during transitions of care
- PCP screening and community organizational screening
- Medical socia worker and CHT
- Community Coalitions
- We are screening for barriers during patient contacts and making referrals to our community health team
- As appropriate
- With our EHR, data has been added to capture SD community based care
- Evaluation connection resources
- Screening
- CHT
- PRAPARE (x 2)
- CHADIS
- Care plans for complex patients
- Case managers assess
- We based and in person based questionnaires, social work, pharmacy navigators
- Questionnaire
- · Food insecurity screening
- Screening form created at office built internally
- CTC Metrics
- SDOH assessment with every visit
- Nurse case managers and community health advocates are available to all patients.
- Community health assessment
- SDOH

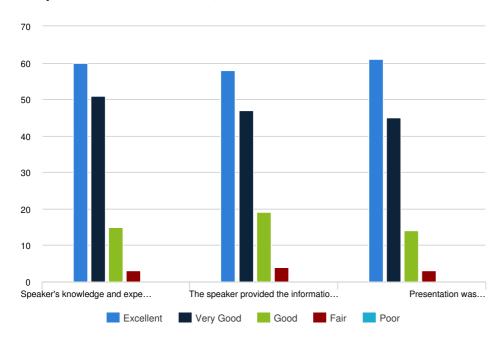
Other additional feedback on the Pathways to Population Health Model:

- Very compelling perhaps not immediately practical
- I am not sure if this question is asking about specific frameworks?
- On "would we use the Framework" we are an educational enterprise to the question isn't really appropriate to us
- This was very interesting, helpful, excellent approach in helping the population managing health care needs.
- We are developing a tool that could capture SDOH surveys to be shared with other practitioners in the state
- Enjoyed learning about the model and definitely would like to learn more about research and implementation
- · Sounds interesting

Did you attend the morning session?

Resultdetails		
Yes	133	
No	2	

Speaker Evaluation: Welcome—Innovations at Work: Care Transformation Collaborative Perspective - Debra Hurwitz, MBA, BSN, RN

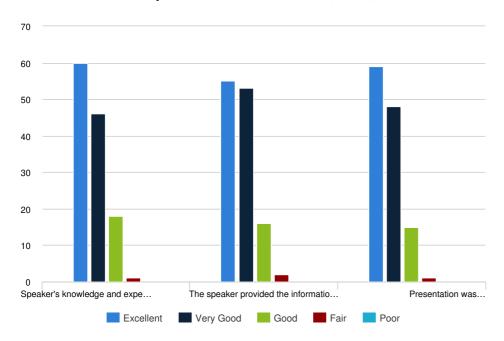


Excellent	Very Good	Good	Fair	Poor
60	51	15	3	0
^{it} 58	47	19	4	0
61	45	14	3	0
3	60 at 58	60 51 at 58 47	60 51 15 at 58 47 19	60 51 15 3 at 58 47 19 4

Speaker Comments: Debra Hurwitz, MBA, BSN, RN

- Really enjoyed her presentation
- Couldn't hear well
- Very difficult to hear

Speaker Evaluation: Innovations at Work: Rhode Island Office of the Health Insurance Commissioner Perspective - Marie L. Ganim, PhD, MPA

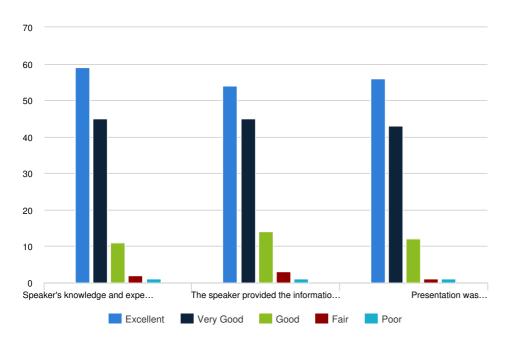


	Excellent	Very Good	Good	Fair	Poor
Speaker's knowledge and experienced enhanced this activity	60	46	18	1	0
The speaker provided the information in an effective/interesting manner that acilitated my learning	55	53	16	2	0
Presentation was fair, objective, and unbiased toward any product or program	59	48	15	1	0

Speaker Comments: Marie L. Ganim, PhD, MPA

- Very Informative
- Still working out audio troubles

Speaker Evaluation: Innovations at Work: Working with Community: Rhode Island Department of Health Perspective - Nicole Alexander-Scott, MD, MPH

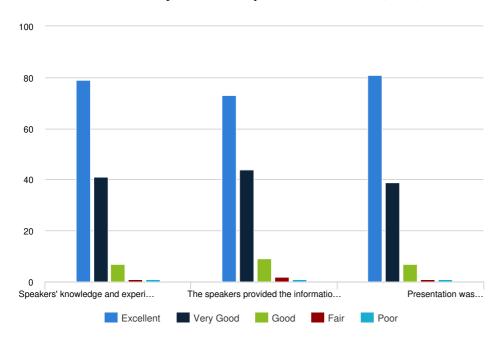


Excellent	Very Good	Good	Fair	Poor
59	45	11	2	1
t 54	45	14	3	1
56	43	12	1	1
1	59 t 54	^t 54 45	59 45 11 t 54 45 14	59 45 11 2 t 54 45 14 3

Speaker Comments: Nicole Alexander-Scott, MD, MPH

- Enjoyed her presentation
- Spoke too quickly, very interesting
- Came late, seemed not committed

Speaker Evaluation: Supporting Population Health Through Team-Based Practice Re-Design and Broad Community Partnerships - Somava Saha, MD, MS & Paul Woods, MD, MS, CCFP

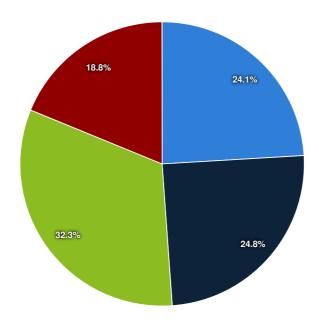


	Excellent	Very Good	Good	Fair	Poor
Speakers' knowledge and experienced enhanced this activity	79	41	7	1	1
The speakers provided the information in an effective/interesting manner that facilitated my learning	73	44	9	2	1
Presentation was fair, objective, and unbiased toward any product or program	81	39	7	1	1

Speaker Comments: Somava Saha, MD, MS & Paul Woods, MD, MS, CCFP

- Somava was much more engaging than Paul.
- Dr. Saha's presentation was clear and very informative.
- Dr. Saha was outstanding; Dr. Woods mostly gave his bio -organizers should refer slides prior to major talks
- Brilliant! This was the highlight of my learning, presentation and approach to the concepts made it easy to understand
- Saha was great. Paul was difficult to hear.
- Would recommend not having two keynote speakers that do not work with one another. Presentation was disjointed, and did not flow
- Saha was very uplifting. Both had some great anecdotes to instill hope and innovation
- Soma was excellent as was Paul but he was difficult to hear
- Dr. Saha was excellent
- Dr. Saha's presentation was definitely more engaging than Dr. Woods.
- Dr. Saha was a great speaker! Very engaging and knowledgeable
- Shoma Saha was a better speaker
- These two are dynamic presenters
- Interesting material, very engaging, excellent presenter
- Dr. Saha was extremely inspiring
- Exciting and energizing, would love to work with her team in a RI project

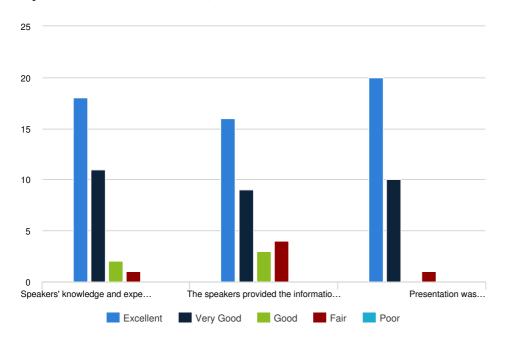
Which concurrent breakout session I did you attend?



Result

riesuit	
details	
Innovations in Primary Care Integrated Psychiatry	32
Innovations in Working with Specialists: High Value Care Coordination	33
Population Health Breakout	43
Innovations in Pediatric Care and Payment: Family-Based Recovery Care	25
	Innovations in Primary Care Integrated Psychiatry Innovations in Working with Specialists: High Value Care Coordination Population Health Breakout

Speaker Evaluation: Innovations in Primary Care Integrated Psychiatry - Nelly Burdette, PsyD & Jonathan Kole, MD, MBe

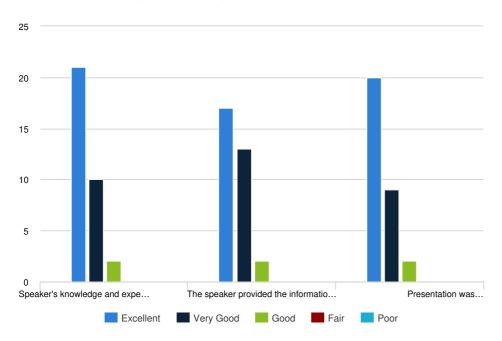


	Excellent	Very Good	Goo	d Fai	r Poo r
Speakers' knowledge and experienced enhanced this activity	18	11	2	1	0
The speakers provided the information in an effective/interesting manner hat facilitated my learning	16	9	3	4	0
Presentation was fair, objective, and unbiased toward any product or program	20	10	0	1	0

Speaker Comments: Nelly Burdette, PsyD & Jonathan Kole, MD, MBe

- Dr. Kole did not project well with the microphone deterring from his message.
- I found Dr. Kale to be difficult to hear: he spoke quietly and fast.
- The speaker was very difficult to hear and understand
- So hard to hear and somewhat repetitive

Speaker Evaluation: Innovations in Working with Specialists: High Value Care Coordination - M. Carol Greenlee, MD, FACP, FACE

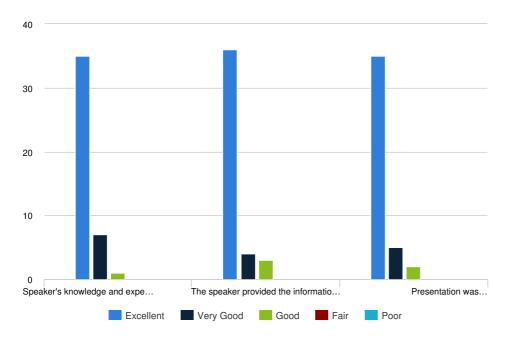


	Excellent	Very Good	Good	Fair	Poor
Speaker's knowledge and experienced enhanced this activity	21	10	2	0	0
The speaker provided the information in an effective/interesting manner that acilitated my learning	17	13	2	0	0
Presentation was fair, objective, and unbiased toward any product or program	20	9	2	0	0

Speaker Comments: M. Carol Greenlee, MD, FACP, FACE

No responses

Speaker Evaluation: Population Health Breakout - Somava Saha, MD, MS

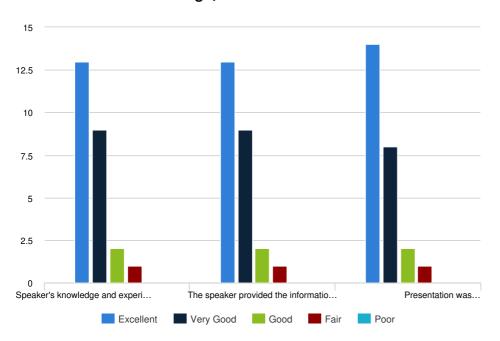


Excellent	Very Good	Good	Fair	Poor
35	7	1	0	0
36	4	3	0	0
35	5	2	0	0
t	35 t 36	35 7 t 36 4	35 7 1 t 36 4 3	35 7 1 0 t 36 4 3 0

Speaker Comments: Somava Saha, MD, MS

- Would have liked her to present more, not have us in a workshop. Want to hear best practices from her
- Excellent speaker; engaging, interactive presentation, obvious passion for work
- Great resources and tools

Speaker Evaluation: Innovations in Pediatric Care and Payment: Family-Based Recovery Care - Suzanne C. Brundage, MSc

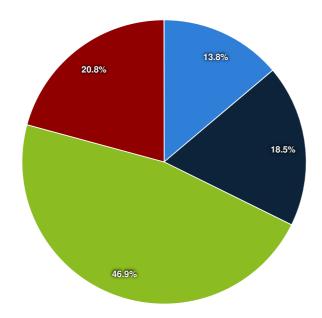


	Excellent	Very Good	Good	Fair	Poor
Speaker's knowledge and experienced enhanced this activity	13	9	2	1	0
The speaker provided the information in an effective/interesting manner that acilitated my learning	13	9	2	1	0
Presentation was fair, objective, and unbiased toward any product or program	14	8	2	1	0

Speaker Comments: Suzanne C. Brundage, MSc

• I was disappointed not to hear about the FM approach which already incorporates a lot of this work.

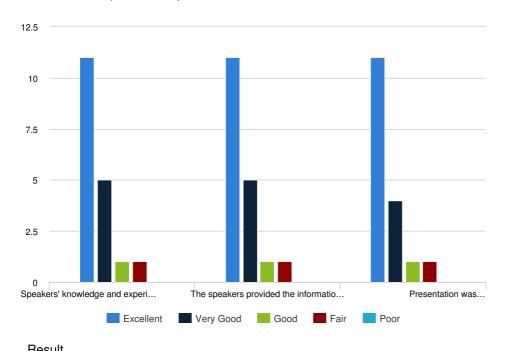
Which concurrent breakout session II did you attend?



Result

ricsuit	
details	
Pharmacy Innovations: Pharmacy and Collaborative Care Agreements	18
Primary Care Practice Re-Design	24
Community Innovations: Partners—Large-Scale Screening for Social De	eterminants of Health 61
Innovations in Pediatric Care: Recovery-Friendly Pediatric Practice—NH	H Model 27

Speaker Evaluation: Pharmacy Innovations: Pharmacy and Collaborative Care Agreements - Jeffrey Bratberg, PharmD, FAPhA & Christopher Durigan, PharmD, BCPS, CDOE & Linda J. Rowe-Varone, PharmD, BCPP

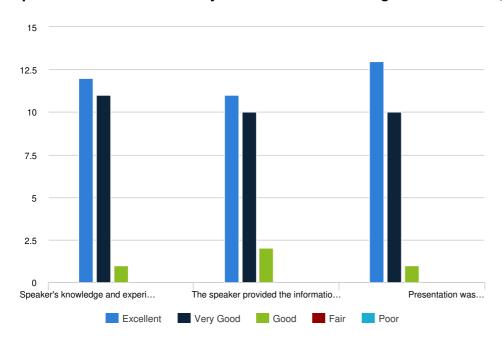


	Excellent	Very Good	Good	l Fai	r Poo r
Speakers' knowledge and experienced enhanced this activity	11	5	1	1	0
The speakers provided the information in an effective/interesting manner hat facilitated my learning	11	5	1	1	0
Presentation was fair, objective, and unbiased toward any product or program	11	4	1	1	0

Speaker Comments: Jeffrey Bratberg, PharmD, FAPhA & Christopher Durigan, PharmD, BCPS, CDOE & Linda J. Rowe-Varone, PharmD, BCPP

Excellent

Speaker Evaluation: Primary Care Practice Re-Design - Paul Woods, MD, MS, CCFP

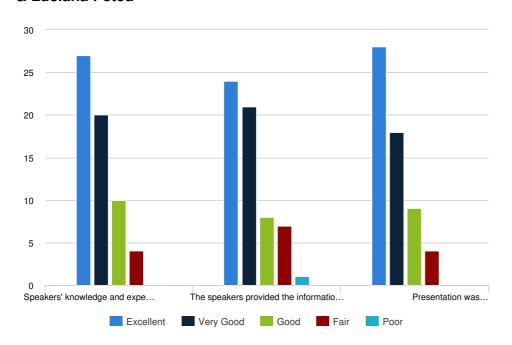


Excellent	Very Good	Good	Fair	Poo
12	11	1	0	0
11	10	2	0	0
13	10	1	0	0
1	12 ^t 11	12 11 10	12 11 1 t 11 10 2	12 11 1 0 t 11 10 2 0

Speaker Comments: Paul Woods, MD, MS, CCFP

No responses

Speaker Evaluation: Community Innovations: Partners—Large-Scale Screening for Social Determinants of Health and Referral to Community - Kristy Helscel, MPH & Kerry E. McBride & Luciana Petcu

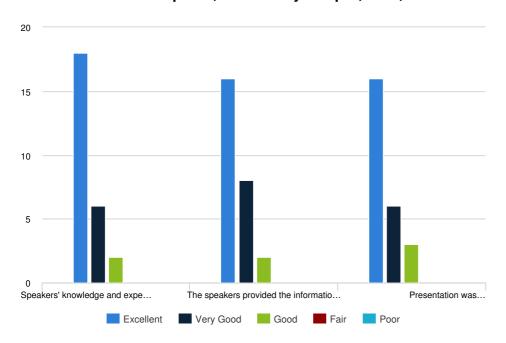


	Excellent	Very Good	Good	l Faii	r Poor
Speakers' knowledge and experienced enhanced this activity	27	20	10	4	0
The speakers provided the information in an effective/interesting manner hat facilitated my learning	24	21	8	7	1
Presentation was fair, objective, and unbiased toward any product or program	28	18	9	4	0

Speaker Comments: Kristy Helscel, MPH & Kerry E. McBride & Luciana Petcu

- Very challenging to hear when not all speakers used mike effectively. rotunda is a challenging room to begin with.
- Very good
- Free advertising for Partners
- Hard to hear related to room

Speaker Evaluation: Innovations in Pediatric Care: Recovery-Friendly Pediatric Practice—NH Model - Steven H. Chapman, MD & Holly Gaspar, MEd, MPH

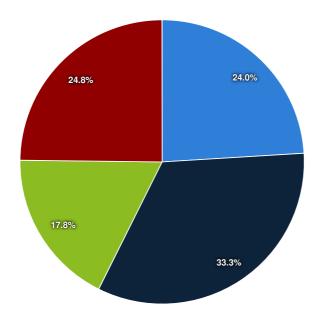


Excellent	Very Good	Good	Fair	· Poor
18	6	2	0	0
16	8	2	0	0
16	6	3	0	0
	18	18 6 16 8	18 6 2 16 8 2	18 6 2 0 16 8 2 0

Speaker Comments: Steven H. Chapman, MD & Holly Gaspar, MEd, MPH

- Nicely done together.
- Great presentation; very engaging with the audience, and thoroughly answered questions
- Inspiring!

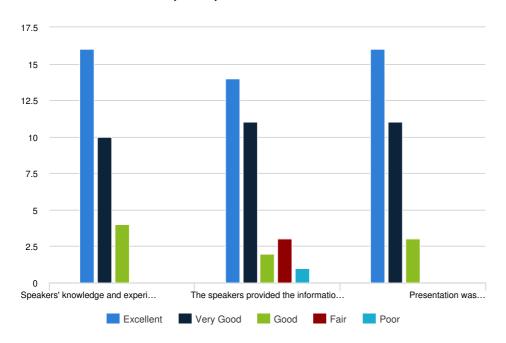
Which concurrent breakout session III did you attend?



Result

i lesuit	
details	
Practice Innovations: Annual Wellness Visits	31
Innovations in Leadership: Practical Interventions to Improve Clinician Well-Being	43
Innovations in Primary Care Payment: Capitation	23
Innovations in Care: Assessing and Treating Anxiety in Pediatric Population	32
	Practice Innovations: Annual Wellness Visits Innovations in Leadership: Practical Interventions to Improve Clinician Well-Being Innovations in Primary Care Payment: Capitation

Speaker Evaluation: Practice Innovations: Annual Wellness Visits - Claire M. Haynes, BSN, RN & Susan Whittaker, CPC, CPMA

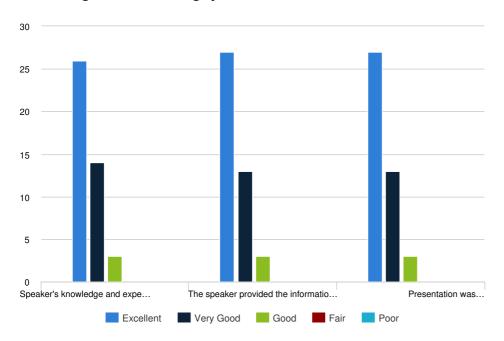


etails					
	Excellent	Very Good	Good	Fair	Poor
Speakers' knowledge and experienced enhanced this activity	16	10	4	0	0
The speakers provided the information in an effective/interesting manner that facilitated my learning	14	11	2	3	1
Presentation was fair, objective, and unbiased toward any product or orgram	16	11	3	0	0

Speaker Comments: Claire M. Haynes, BSN, RN & Susan Whittaker, CPC, CPMA

• Title of workshop in materials did not reflect content/target population

Speaker Evaluation: Innovations in Leadership: Practical Interventions to Improve Clinician Well-Being - Nicolas S. Nguyen, MD

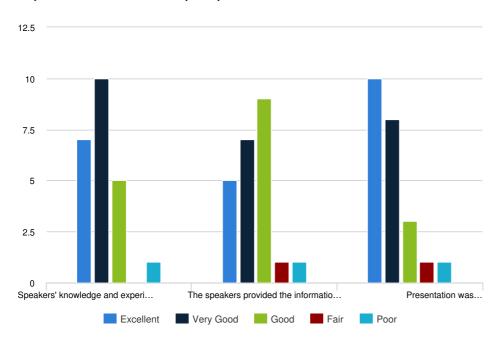


Excellent	Very Good	Good	Fair	Poor
26	14	3	0	0
t 27	13	3	0	0
27	13	3	0	0
	26 .t 27	^t 27 13	26 14 3 t 27 13 3	26 14 3 0 tt 27 13 3 0

Speaker Comments: Nicolas S. Nguyen, MD

- Very knowledgeable
- Excellent
- Dr. Nguyen was very engaging; included group discussions & provided great examples of how leadership can do more for their staff

Speaker Evaluation: Innovations in Primary Care Payment: Capitation - Michael W. Cropp, MD, MBA & Fuad Sheriff, MD, FACP

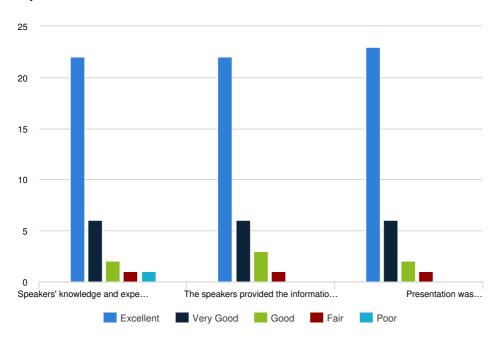


letails					
	Excellent	Very Good	Good	Fair	Poor
Speakers' knowledge and experienced enhanced this activity	7	10	5	0	1
The speakers provided the information in an effective/interesting manner that facilitated my learning	5	7	9	1	1
Presentation was fair, objective, and unbiased toward any product or program	10	8	3	1	1

Speaker Comments: Michael W. Cropp, MD, MBA & Fuad Sheriff, MD, FACP

- Difficulty hearing = acoustics
- Very little information on the nuts and bolts of transitioning to a capitation model.

Speaker Evaluation:Innovations in Care: Assessing and Treating Anxiety in Pediatric Population - Hannah E. Frank, MA & Jennifer B. Freeman, PhD



letails					
	Excellent	Very Good	Good	Fair	Poor
Speakers' knowledge and experienced enhanced this activity	22	6	2	1	1
The speakers provided the information in an effective/interesting manner that facilitated my learning	22	6	3	1	0
Presentation was fair, objective, and unbiased toward any product or program	23	6	2	1	0

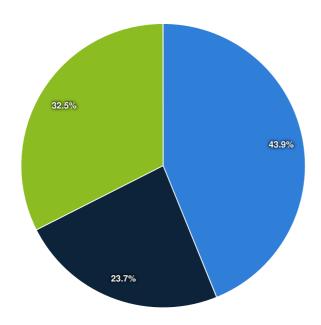
Speaker Comments: Hannah E. Frank, MA & Jennifer B. Freeman, PhD

- Very practical, would have liked more info about primary care screening tools
- Terrific!!
- This was my favorite!
- One of the strongest presentations I attended
- Excellent

Did you attend the afternoon session?

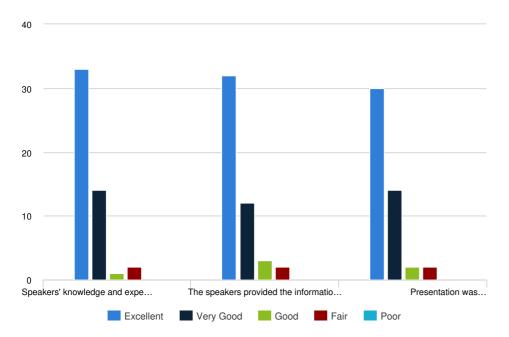
Result details		
Yes	115	
No	17	

Which concurrent breakout session IV did you attend?



Result details	
Innovations in Community: Acute Care at Home Model—Partnering with Paramedics	50
RI's Statewide Health Information Technology Strategic Roadmap and Implementation Plan	27
Children and Recovering Mothers: A Collaborative Approach	37

Speaker Evaluation: Innovations in Community: Acute Care at Home Model—Partnering with Paramedics Ruth E. Scott, RN, MHA, CCM & Ana Tuya Fulton, MD, FACP, AGSF

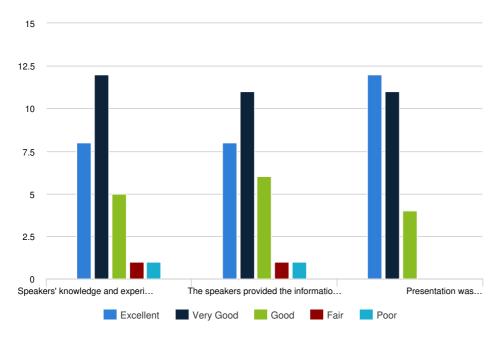


Excellent	Very Good	Good	Fair	Poor
33	14	1	2	0
32	12	3	2	0
30	14	2	2	0
	33	32 12	33 14 1 32 12 3	33 14 1 2 32 12 3 2

Speaker Comments: Ruth E. Scott, RN, MHA, CCM & Ana Tuya Fulton, MD, FACP, AGSF

- Title did not reflect accuracy of workshop thought it was about partnering with paramedics to engage, very elder focused.
- Very knowledgeable, interesting program.
- I appreciated hearing from the different parties included in this model and understanding the qualifications for the program
- Unfortunate that service only available to integra medicare/caid members
- Mhh, missing a background needs survey, discussion of scope of practice, documented patient satisfaction QI

Speaker Evaluation: RI's Statewide Health Information Technology Strategic Roadmap and Implementation Plan - Amy Zimmerman, MPH & Melissa Lauer, MPA

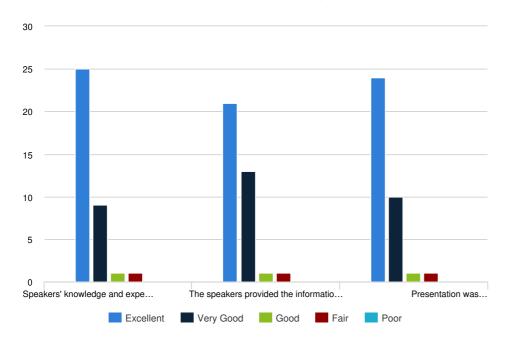


	Excellent	Very Good	Good	Fair	Poor
Speakers' knowledge and experienced enhanced this activity	8	12	5	1	1
The speakers provided the information in an effective/interesting manner that facilitated my learning	8	11	6	1	1
Presentation was fair, objective, and unbiased toward any product or program	12	11	4	0	0

Speaker Comments: Amy Zimmerman, MPH & Melissa Lauer, MPA

- There was very little presentation: Questions from the audience was the majority of this session.
- Good discussion
- I assessed this as more of a stakeholder engagement session
- Great topic
- Great connection with audience
- Somewhat over my head but helpful in enhancing my knowledge

Speaker Evaluation: Children and Recovering Mothers: A Collaborative Approach - Shara O. Tarule, APRN & Susan Albertini White, MS, FNP-BC

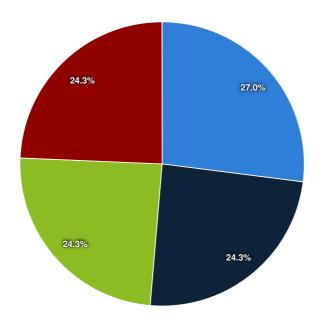


	Excellent	Very Good	Good	Fair	Poor
Speakers' knowledge and experienced enhanced this activity	25	9	1	1	0
The speakers provided the information in an effective/interesting manner hat facilitated my learning	21	13	1	1	0
Presentation was fair, objective, and unbiased toward any product or program	24	10	1	1	0

Speaker Comments: Shara O. Tarule, APRN & Susan Albertini White, MS, FNP-BC

- I am one of the presenters and looking forward to getting feedback
- Hard to hear

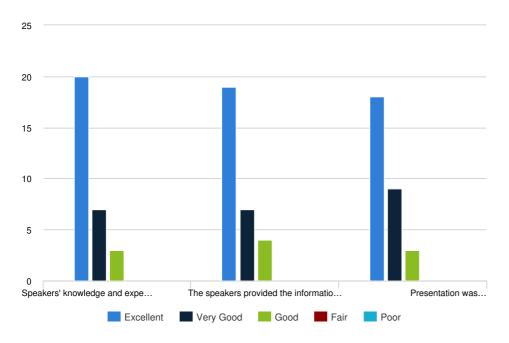
Which concurrent breakout session V did you attend?



Result

nesuit	
details	
Re-Defining the Recovery—What Matters Most	30
Innovations in Using HIE to Assist with Transitions of Care	27
Innovations in Care: CODAC and Pain Solutions	27
Introduction to Conscious Discipline for Families and Caregivers	27

Speaker Evaluation: Re-Defining the Recovery—What Matters Most - Michael Beauregard & Francine Knowles, APRN CNS & Lisa McManaman, RN

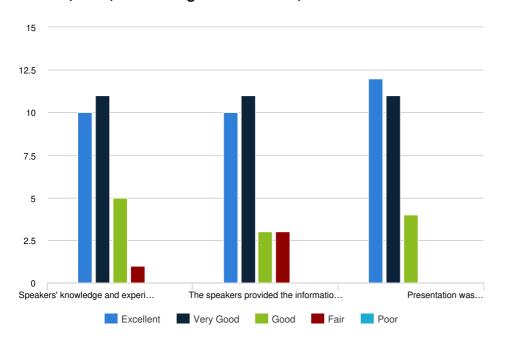


etails					
	Excellent	Very Good	Good	Fair	Poor
Speakers' knowledge and experienced enhanced this activity	20	7	3	0	0
The speakers provided the information in an effective/interesting manner that facilitated my learning	19	7	4	0	0
Presentation was fair, objective, and unbiased toward any product or program	18	9	3	0	0

Speaker Comments: Michael Beauregard & Francine Knowles, APRN CNS & Lisa McManaman, RN

• Lisa's strength brought tears to my eyes.

Speaker Evaluation: Innovations in Using HIE to Assist with Transitions of Care - Jennifer C. Cormier, MEd, RN & Margaret M. Menna, MBA

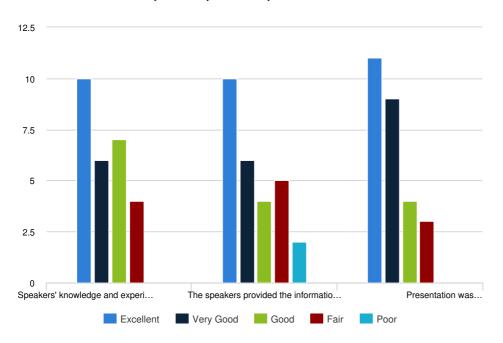


	Excellent	Very Good	Good	Fair	Poor
Speakers' knowledge and experienced enhanced this activity	10	11	5	1	0
The speakers provided the information in an effective/interesting manner hat facilitated my learning	10	11	3	3	0
Presentation was fair, objective, and unbiased toward any product or program	12	11	4	0	0

Speaker Comments: Jennifer C. Cormier, MEd, RN & Margaret M. Menna, MBA

• Difficulty hearing attendees speak, did not speak into microphone

Speaker Evaluation: Innovations in Care: CODAC and Pain Solutions - Frank R. Sparadeo, PhD & Laura Levine, LMHC, LCDCS, LCDP CAGS

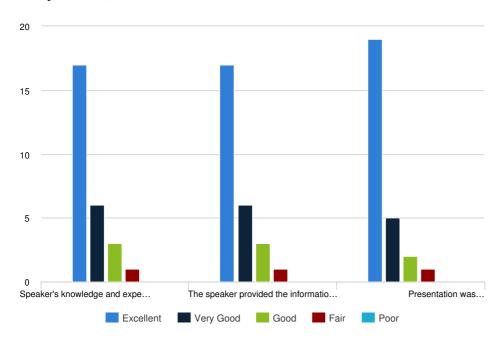


etails					
	Excellent	Very Good	Good	Fair	Poor
Speakers' knowledge and experienced enhanced this activity	10	6	7	4	0
The speakers provided the information in an effective/interesting manner hat facilitated my learning	10	6	4	5	2
Presentation was fair, objective, and unbiased toward any product or program	11	9	4	3	0

Speaker Comments: Frank R. Sparadeo, PhD & Laura Levine, LMHC, LCDCS, LCDP CAGS

• Low energy

Speaker Evaluation: Introduction to Conscious Discipline for Families and Caregivers - Cheryl Cotter, MEd



Excellent	Very Good	Good	Fair	Poor
17	6	3	1	0
t 17	6	3	1	0
19	5	2	1	0
	17 It 17	i ^t 17 6	17 6 3 t 17 6 3	17 6 3 1 t 17 6 3 1

Speaker Comments: Cheryl Cotter, MEd

- Loved the activities! I had more energy after!!!!
- Took me out of my comfort zone and I really enjoyed it!!
- Very interactive! Cheryl has an outgoing personality that is engaging and instructs clearly and easy to understand.