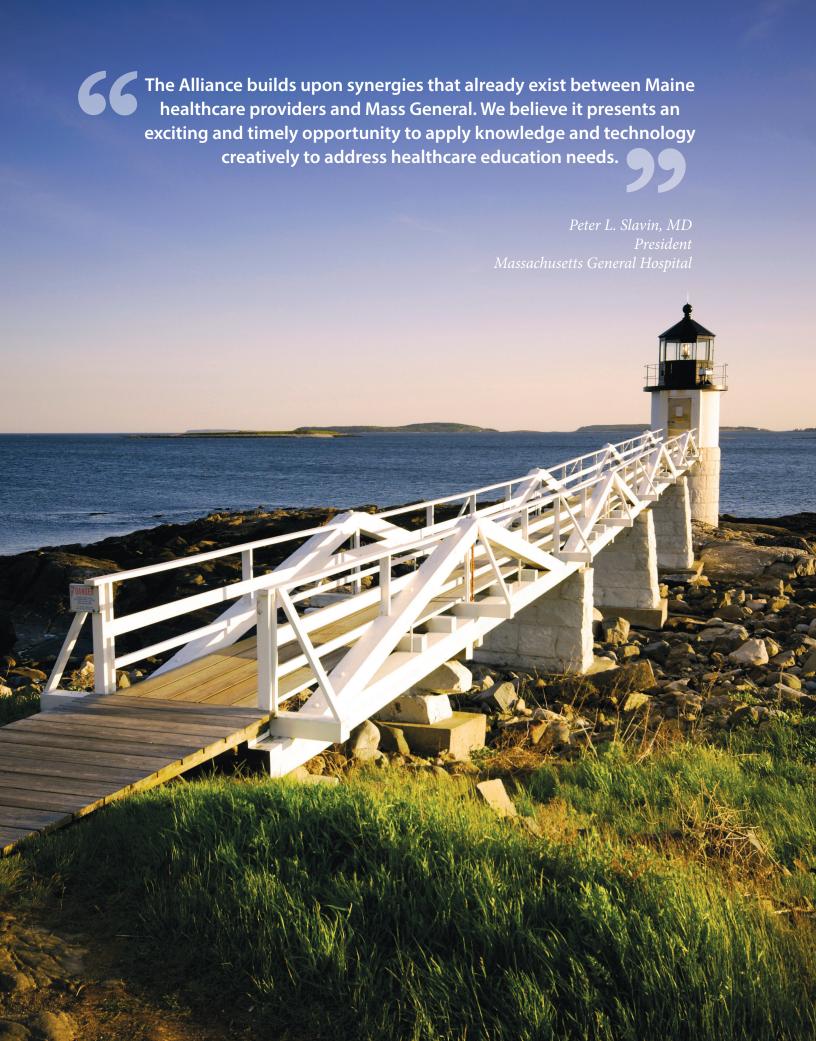






Progress Report 2011-2012





James J. Dineen, MD



Jeanette Ives Erickson, RN, DNP, FAAN



Robert J. Birnbaum, MD, PhD

Dear Friends,

This progress report presents what we have accomplished and learned during our first year of operation as we strive to fulfill the vision set forth by the Lunder Foundation and the Lunder family, whose generous gift established the Lunder-Dineen Health Education Alliance of Maine.

Peter and Paula Lunder envisioned a mutually beneficial collaboration between Maine and Massachusetts General Hospital to enhance health care throughout this state long cherished by their family.

Our pioneering educational model marshals resources within Maine and Mass General to create what has not existed before: education designed to meet the needs of an entire state; and a model that helps clinicians work in teams with each other and with patients and families to improve health in measurable ways.

As new forms of healthcare delivery increasingly call for patient-centered teamwork, this is an idea whose time has come. We are transforming healthcare education to help clinicians across disciplines adopt practices that advance better, more efficient care.

This year, we've expanded our relationships with Maine healthcare providers, launched our web-based learning environment and introduced our first services and collaborative projects. The Alliance is already making an impact.

We are grateful to Peter and Paula Lunder, their family, the Lunder Foundation and our colleagues in Maine who have helped us create a statewide model of education tailored to clinicians dedicated to bringing their patients the best of care.

James J. Dineen, MD, co-chair Jeanette Ives Erickson, RN, DNP, FAAN, co-chair Robert J. Birnbaum, MD, PhD, co-chair

Mission

The Lunder-Dineen Health Education Alliance of Maine strives to improve the health and well-being of Maine residents by providing high quality education in collaboration with Massachusetts General Hospital. Alliance educational programs are designed to help meet the needs of Maine health professionals, their patients and the community.

Vision

To improve the health of Maine residents by advancing the skills and expertise of Maine's health professionals. ON SEPTEMBER 14, 2010, THE LUNDER FOUNDATION and the Lunder family made a generous gift to Massachusetts General Hospital's Campaign for the Third Century of MGH Medicine. In addition to helping fund the hospital's new inpatient facility, the Lunder Building, their gift also helped to establish an organization within Mass General to provide "state-of-the-art educational programs tailored to the interests and needs of physicians, nurses and other healthcare professionals as well as patients and families throughout the state of Maine."

The name of the Lunder-Dineen Health Education Alliance of Maine honors our co-chair, James J. Dineen, MD, a Maine native and internist who spent 43 years at Mass General caring for countless patients—including the Lunder family—and helping to redefine and foster the patient-physician relationship.

Joining Dr. Dineen in leading the Alliance are fellow Maine native Jeanette Ives Erickson, RN, DNP, FAAN, senior vice president for Patient Care and chief nurse at Mass General; and Robert Birnbaum, MD, PhD, a psychiatrist who is director of continuing professional development for Partners HealthCare and director of knowledge translation research at the MGH Academy.

They lead a 10-member Operations Committee of Mass General senior staff members including Labrini I. Nelligan who was appointed as executive director in November 2012, and Denise O'Connell, LCSW, CCM, CCP, of Bangor, Maine, who joined the Alliance in August 2011 as senior program manager.

We are pleased to present our inaugural progress report, which reviews the goals and progress of the Lunder-Dineen Health Education Alliance of Maine during its first year of operation.

Creating a new learning model that transforms healthcare education

Our leadership reflects the collaborative approach of the Alliance, which builds upon expertise within Maine and Mass General to benefit Maine as well as other communities that can learn from our experience.

We are making history together. As the first collaborative endeavor between an entire state and a major academic medical center, we are pioneering an educational model that fosters patient-centered teamwork among clinicians and measurably links education with patient outcomes. This approach supports Maine initiatives to adopt new forms of primary care that engage all the stakeholders who contribute to better health, including patients and families.

The Lunders' visionary gift is the catalyst of this collaboration between Maine healthcare providers and Mass General, an endeavor that capitalizes on our respective strengths.

Maine's highly interconnected healthcare infrastructure meets the unique challenges of providing quality medical care to a predominantly rural and aging population. Its resources vary from esteemed community clinics and family practices to a network of critical access hospitals linked by



Labrini I. Nelligan



Denise O'Connell, LCSW, CCM, CCP

medical helicopters to urban medical centers at the forefront of clinical care and physician education. Complementing Maine's 42 hospitals are training programs in the health professions that include multiple sites throughout Maine.

Maine is nationally recognized for its progressive healthcare environment, which engages all sectors, from healthcare providers and employers to consumers and governmental organizations. The state is in the vanguard of initiatives to improve the quality and efficiency of health care on multiple fronts, from performance measurement and accountable care to the advanced use of health information technologies.





Honored as number one in the 2012-13 U.S. News & World Report roster of "America's Best Hospitals," Mass General is renowned for patient care, clinical education and research. Mass General runs the largest hospital-based medical research center in the world. Its education programs engage research and clinical faculty who are internationally recognized leaders in their disciplines.

The Alliance brings together the expertise of the MGH Academy, which provides continuing education to more than 30,000 healthcare professionals worldwide; the Norman Knight Nursing Center for Clinical and Professional Development, which provides Mass General nurses with more than 300 professional development courses; and the Maxwell & Eleanor Blum Patient and Family Learning Center, which focuses on the education of patients, families and caregivers.

Through the Alliance, these three organizations are working together for the first time. They are pooling their expertise to join with Maine healthcare providers in developing a statewide educational infrastructure that can engage clinicians across disciplines, involve patients and families, and link training to patient outcomes.



C Working side-by-side with providers in Maine ensures that our health education programs are tailored to meet their unique needs. We ensure quality by constantly measuring the impact and outcomes of the programs we provide.

> Jeanette Ives Erickson, RN, DNP, FAAN Senior Vice President for Patient Care and Chief Nurse Massachusetts General Hospital

Our promise

We began developing the Alliance by conducting a statewide needs assessment with Maine clinicians to identify where Mass General can add value to existing educational resources. Maine clinicians tell us that they want continuing education that is affordable, measurable, aligned with Maine healthcare reforms, learner-driven (offered when, where and how the user prefers) and informed by the latest research and best practices.

Our promise is to provide high-quality, evidence-based education to Maine healthcare providers and their constituents — education that measurably improves the health and well-being of Maine residents.

As we work with Maine healthcare providers to fulfill this promise, we hope to become integral to their continued success in meeting the needs of Maine residents.

AFTER RECEIVING THE GIFT FROM THE LUNDER FAMILY and Lunder Foundation in September 2010, Mass General formed the Alliance Operations Committee with the charge of translating the Lunders' vision into a working organization. Our first year focused on forming the basic structure of the Alliance; reviewing data on existing health outcomes in Maine; meeting with civic and healthcare leaders in Maine; and guided by these initial conversations, developing a strategic plan.

In January 2012, our Operations Committee held its first planning retreat in Portland, Maine, to outline the Alliance's overarching goals and tactics for the year ahead. We determined that our priority was to begin delivering educational programs aligned with the interests and needs of Maine healthcare professionals. A number of interrelated activities enabled us to achieve this goal and more.

During this past year, the Alliance:

- » Completed its first comprehensive assessment of clinicians' educational needs
- » Created and launched an innovative, web-based learning infrastructure, which has received more than 1,600 visits
- » Introduced educational programs targeting diverse audiences, including nurses, physicians and clinicians serving veterans and their families
- » Began collaborative projects with Maine healthcare providers that engage caregivers across disciplines
- » Met with leadership from more than 40 percent of the state's hospitals
- » Conducted outreach to build a statewide community of participants

Needs assessment identifies priorities of Maine clinicians

In September 2012, we completed a four-month comprehensive needs assessment. This needs assessment will guide us in developing educational programs tailored to the unique needs of Maine clinicians. Conducted by Market Street Research, Inc., the assessment revealed some of the state's gaps in health education, identified learning modalities preferred by Maine clinicians and indicated topics and issues of greatest interest. The assessment consisted of two phases: the first phase used interactive, online bulletin boards to gather qualitative, in-depth feedback from Maine nurses and physicians; a second quantitative phase involved an online survey sent to 150 clinicians, with a sampling that evenly represented both nurses and physicians.

More than 90 percent of the respondents tell us that the Alliance is a highly appealing concept — particularly its promise to tailor programs to the specific needs of Maine clinicians and their patients. And most say they would be likely to use our service.

Topics of interest to a large number of survey respondents include education on the diseases and health conditions they encounter in daily practice, particularly issues prevalent among Maine's low-income, aging and rural population such as diet and obesity, geriatric health, pain management, tobacco and alcohol abuse and behavioral health. Respondents also indicate interest in topics that affect their ability to efficiently and effectively coordinate care, such as patient education, interpersonal skill building, electronic medical records and nursing informatics.

The assessment highlights the flexibility of Maine clinicians in how they prefer to participate in education. Respondents are receptive to both online learning and live events such as conferences and seminars, and they already participate in a variety of online learning activities — webinars, video conferences, simulation trainings and more. Since the majority of survey participants respond favorably to the Alliance's web-based

learning infrastructure, the needs assessment indicates that the educational formats planned by the Alliance align well with current learning preferences of Maine clinicians.

Several common themes emerged that promise to influence how we build our educational programs and communicate their value to Maine clinicians. Respondents cite ease of use and flexibility as priorities, and report time and cost constraints as barriers to participating in education. Credibility and relevance of content are also key criteria in making an investment in training, as are dynamic and engaging presenters. Respondents say they learn about education from professional associations, colleagues and employers, as well as a wide variety of other sources such as email and direct mail.

Guided by these findings, the Alliance will provide training that meets intended users' criteria of relevance, quality and convenience and emphasize these benefits in a multichannel awareness strategy.

I'm most interested in the issues I encounter most in my practice: chronic illness issues, infectious disease updates, preventative health care.

patient outcomes.

patient outcomes.

Website introduces a learning resource dedicated to Maine clinicians

On May 15, 2012, the Alliance launched its online learning environment, www.mainehealtheducation.org, the first website dedicated to providing healthcare education to diverse caregivers throughout an entire state in collaboration with a leading academic medical center. Healthcare professionals in Maine can participate in education through the website either individually or as teams. In time, the site's educational resources will extend to other stakeholders, including patients and their families.

The new website provides Maine constituents with world-class educational options regardless of their location in the state and enables the Alliance to efficiently craft offerings tailored to their unique needs. Adopting state-of-the-art instructional design techniques used by the MGH Academy and the Knight Nursing Center, the Alliance creates customized programs by conducting needs assessments, identifying knowledge gaps, analyzing the latest research and presenting faculty who are leaders in their fields.

The site and its educational programs are designed to support Maine's ongoing healthcare reforms and offer clinicians in various disciplines the option of learning the same material together, an approach conducive to building a patient-centered team.

Measurement is designed to meet the needs of both individuals and teams. When appropriate, metrics extend beyond simple criteria such as participation or knowledge acquisition. They include traditional pre- and post-testing as well as related

The website streamlines individual and facility accreditation processes and tracks user demographics and other data that will help us quantify the reach of our services.

tools to acquire and post credits of the American Medical

Drawing from recent research in implementation and

dissemination sciences, the Alliance website builds in a

activity is assigned an outcome level that can vary from

framework for evaluating behavioral changes. Each learning

participation and knowledge acquisition to changes in clinical

follow-up surveys are used to determine changes in practice and

performance or patient health. Tools such as simulation and

Association (AMA) and other credentialing bodies. The Alliance

learning platform also incorporates innovative tools that enable practitioners to determine changes in their daily practice and

Educational programs begin serving Maine clinicians

This year, we introduced our first set of web-based educational programs. These initial offerings are intended for nurses and physicians as well as clinicians serving veterans and their families.

Maine clinicians are already using the Alliance website as their self-directed learning resource and portal, choosing from its inviting and easily navigated online catalog of courses, webinars, archives and links to other helpful resources. All current offerings are available at no cost.

Regardless of location, once a visitor registers for free on our website, he or she can take courses and engage with renowned expert faculty via web-based seminars and simulations, satellite and live symposia, discussion boards and teleconferences.

The Alliance also began offering Maine clinicians face-to-face and live learning experiences as well as services that address specialized needs, such as caring for veterans of the conflicts in Iraq and Afghanistan.



The Alliance aims to make educational resources on PTSD and TBI easily accessible to Maine veterans and their caregivers.

Participants in our initial educational offerings span the state — from Fort Kent in the far north to Kittery in the south, and from Farmington in western Maine to coastal communities extending from Bar Harbor to Portland.

Enhancing educational resources to clinicians serving veterans

Post-traumatic stress disorder (PTSD) and traumatic brain injury (TBI) are among the afflictions borne by veterans of our nation's conflicts in Iraq and Afghanistan. These veterans have often endured multiple deployments, leading to a high incidence of these debilitating conditions.

In cooperation with the U.S. Department of Veterans Affairs, the Red Sox Foundation and Massachusetts General Hospital Home Base Program provides clinical care to veterans and families affected by PTSD or TBI; promotes research to improve treatment and understanding of these disorders; supports veteran-to-veteran outreach; and educates clinicians and the community about the needs of afflicted veterans and their families.

The Alliance is working closely with Home Base to make these educational resources easily accessible to Maine veterans and their caregivers. As a first step, the Alliance website offers a free, 14-part series of one-hour online sessions developed by the Home Base Program, the U.S. Department of Veterans Affairs, National Center for PTSD and the MGH Academy titled: "From the War Zone to the Home Front: Supporting the Mental Health of Veterans and Families." This successful series has reached over 5,700 clinicians, including over 90 in Maine. It will continue to be available for free over the next three years, and a War Zone Series II is currently in production for 2013.

Promoting professional development of nurses

Nursing Grand Rounds are some of the most popular programs of the Knight Nursing Center. Since March 2011, the Alliance has enabled Maine nurses to take part in these monthly, one-hour forums via video streaming. Already, 11 clinical sites in Maine are regular participants.

Collaborative projects educate stakeholders across disciplines

This year, we developed our first collaborative projects with Maine healthcare providers who share our interest in educating all members of treatment teams. In Bangor, a group of civic and medical professionals became the expert faculty in our first course tailored to urgent needs in Maine. The webinar was designed to educate first responders, teachers and other caregivers on how to intervene safely and effectively with users of street drugs known as bath salts.

In our second collaborative initiative, the Alliance is participating in a statewide pilot to guide primary care practices in adopting the model of a patient-centered medical home (PCMH).

Bangor team shares expertise in bath salts intervention via webinar

In 2011, their city plagued with violent crime triggered by potent street drugs known as bath salts, a team of Bangor medical and law enforcement personnel developed expertise in coping with this substance abuse epidemic.

Under the guidance of the Alliance, the team developed a webinar that translates their frontline experience into an intervention protocol available to other communities within and beyond Maine. The faculty includes Ron Gastia, Bangor's recently retired police chief; Shawn Yardley, director of Health and Community Services in Bangor; Jonnathan Busko, MD, emergency room physician at Eastern Maine Medical Center and Maine EMS Region IV medical director; and Anthony Ng, MD, chief medical officer at Acadia Hospital.

The team drafted learning objectives and content working with MGH Academy curriculum specialists, who cast the material into an hour-long, four-module format, recorded the team's lectures and devised pre- and post-test questions. The team's multidisciplinary, evidence-based intervention and prevention strategies can benefit diverse users, from emergency first responders to teachers and parents. Clinicians receive one AMA credit for the course, which is available for free on the Alliance website.

Advancing Maine patient-centered medical home pilot

The Alliance is working with Maine Quality Counts, a nonprofit collaborative committed to improving health care in the state, to support adoption of the PCMH model of primary care throughout Maine.

The Dirigo Health Agency's Maine Quality Forum, Maine Quality Counts, the Maine Health Management Coalition and MaineCare (Maine's Medicaid program) are jointly conducting a statewide pilot program to evaluate the PCMH model, which is designed to improve the quality and efficiency of patient care. Currently, the pilot involves 25 of the state's 540 primary care practices, with 50 more practices expected to join soon.

Collaborating with Maine Quality Counts through the Alliance, a team from the MGH Academy and the Knight Nursing Center are exploring opportunities to develop educational strategies to assist primary care practices in their transition to a PCMH model. The team reviewed data from the National Demonstration Project of the American Academy of Family Physicians and the Maine PCMH pilot and identified the core competencies associated with a PCMH practice. They hope to identify opportunities to align these skills with a variety of facilitated and self-directed learning options to acquire the required competencies — including webbased community forums, interactive learning modules and clinical simulations with proficiency measurements.

This framework provides a way to design customized training that facilitates a primary care practice's achievement of measurable quality improvement milestones throughout its transition process.

At the American Association of Medical Colleges Annual Conference on Integrating Quality, held in June in Chicago, Alliance co-chair Dr. Birnbaum presented a poster distilling the team's framework. Entitled "Improving Quality and Team-Based Practice: Using Education Innovation to Implement the Patient Centered Medical Home Throughout Maine," it highlights practical, actionable educational interventions to facilitate measurable quality improvement in primary care practices. Dr. Birnbaum's presentation generated much interest as a proactive solution to an emerging need.

The Alliance is honored to be part of this initiative along with Maine Quality Counts, the Knight Nursing Center, the MGH Academy and Partners HealthCare.

Outreach to clinicians through events, publications, social media, and more

Another objective of the needs assessment was to determine how nurses and physicians in Maine perceive and use online educational services. The information we gained will guide a strategy that employs the most efficient and effective channels to inform clinicians about our free educational programs.

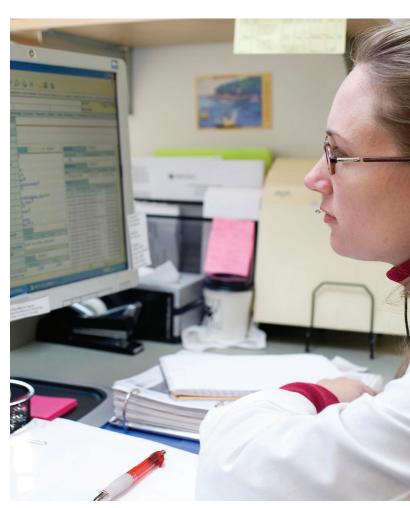
Most clinicians surveyed already use web-based continuing education courses provided by commercial websites. They find out about educational opportunities through email, postal mail, social media, events and word-of-mouth from colleagues. What distinguishes the Alliance to our survey respondents is our plan to

tailor offerings to the needs of Maine clinicians and to offer highquality training that is affordable or free.

Based on survey feedback, we plan to promote the Alliance and build a statewide community of participants through face-to-face meetings and conferences; an array of awareness tools that share educational information about clinical topics; and an awareness campaign that uses direct mail, email, social media and other Maine-based communications channels.

Currently, about one-third of the clinicians surveyed use social media. Our outreach strategy will leverage active and fast-growing social media communities such as Facebook and Twitter to share information about our educational programs and draw visitors to our website.

This year, we took part in several Maine healthcare conferences, including those that specifically target the needs of Maine's service men and women. We also helped sponsor annual meetings of the Maine Primary Care Association and Maine Quality Counts. Such events offer the Alliance opportunities for valuable personal interaction and developing relationships with individuals and groups who may use and recommend our programs.



Maine clinicians can use online educational tools to participate in web-based seminars.

WHILE MEETING THIS YEAR'S GOAL—to begin delivering educational services that meet the needs of Maine clinicians—we continued to develop the resources that our new organization needs to fulfill its ambitious mission.

Advisory Committee to engage Maine leadership

The Alliance's mission is galvanizing support among civic, healthcare and thought leaders in Maine. We are in the process of recruiting such individuals to join our all-volunteer Advisory Committee. Their perspectives and support will guide us as we extend our collaborations with healthcare providers.

Including up to 25 members, this circle of ambassadors, guides, donors and friends will advance our endeavors on a variety of fronts. They range from strategic planning, philanthropic outreach and advocacy to evaluation of our impact on the health of Maine residents. We plan to convene the first meeting of our Advisory Committee in the spring.

Fundraising: building a sustaining circle of support

In the coming years, as the Alliance extends its pioneering model of healthcare education statewide, its expenses will increase to fund development of innovative learning activities tailored to the needs of Maine.

Mass General development leadership is steering our strategy to develop abiding support for this transformative venture.

In 2012, we began our fundraising process, which mines allegiance to Maine as a powerful incentive for supporting the Alliance, not only to the Mass General team who staff our committees but also to prospective donors.

On September 12, 2012, we held our first donor event, which drew more than 60 guests. Hosted in Boston by Mass General, the event featured remarks by Alliance co-chairs and staff, as well as Peter and Paula Lunder. In June 2013, we will host our second donor event at a location in Maine.

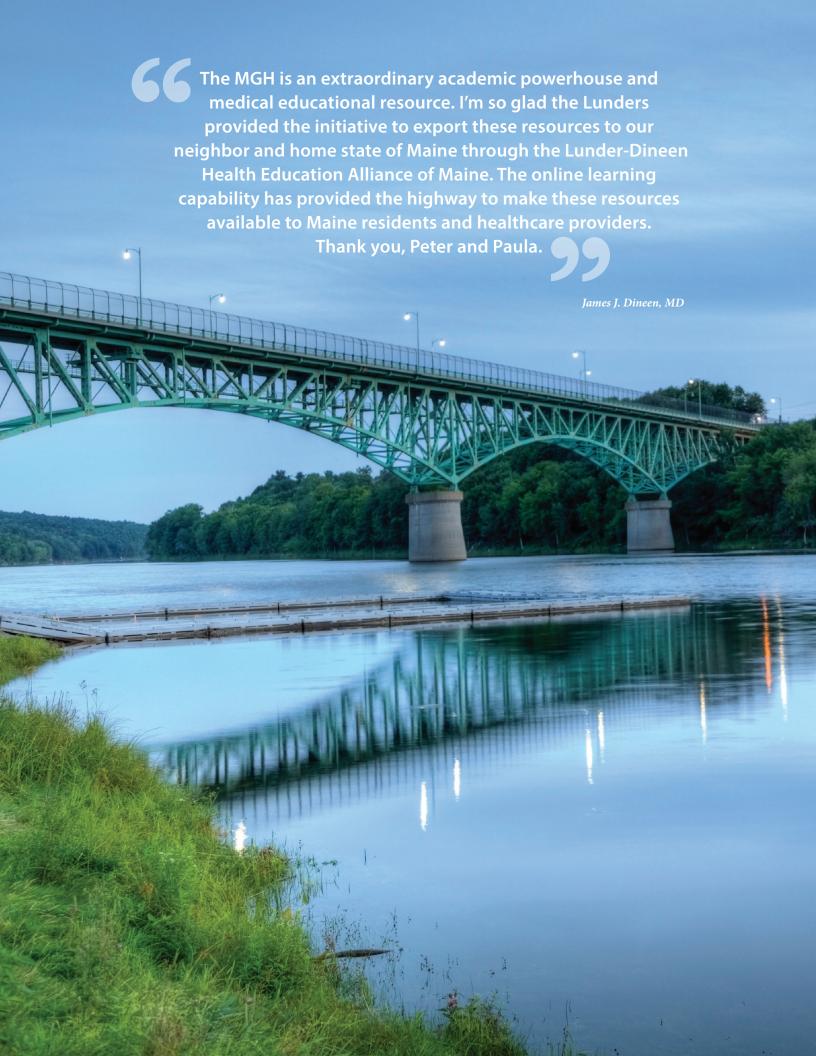
While development is in its startup phase, we are encouraged by the early enthusiasm of our founding Advisory Committee members and our positive initial conversations with donors.

Looking ahead

Our number one goal in 2013 is to build a portfolio of educational programs custom-tailored to the priorities of Maine clinicians. And, based on our research and needs assessment, our objective is to provide content in multiple formats with diverse entry points. For example, we plan to develop webinars and white papers and also conduct various symposiums in Maine that convene clinicians across disciplines.

In 2013, our programs will be informed by a broader base of Maine stakeholders, including the clinicians who participated in our needs assessment as well as the members of our newly formed Maine Advisory Committee.

We are grateful to those who have already joined this endeavor and look forward to working with many more Maine healthcare providers in the coming years. Together, we will develop and refine meaningful and relevant educational programs that make a measurable impact on the health of Maine residents.





Our logo's three branches reflect the three-way collaboration connecting Maine and Massachusetts General Hospital with the Alliance, a new, growing entity rooted in Maine.