





Dear Friends,

We are excited to share with you the third annual report from the Lunder-Dineen Health Education Alliance of Maine. This report reviews the progress we are making towards our goal of improving the overall health of Maine residents by expanding their health knowledge and by advancing the skills and expertise of Maine health professionals.

2014 was Lunder-Dineen's third full year of operations, and as you can see in the following pages, we're very proud of our progress—and so are many others in Maine. We hit a target we set to meet with clinical leaders and executives from every hospital in Maine. We also met with dozens of other professional associations, patient advocacy groups, community practices, educators, legislators, and more (see a full list on pages 42-45).

We're not only meeting with these experts. Lunder-Dineen is convening interprofessional teams from across the state and collaborating with them to develop and disseminate valuable education that focuses on identified and critical areas of need. In this report, you'll find

details on our initiatives in oral health, alcohol use, and nursing preceptorship, as well as updates on how we're supporting the development of emerging leaders across professions.

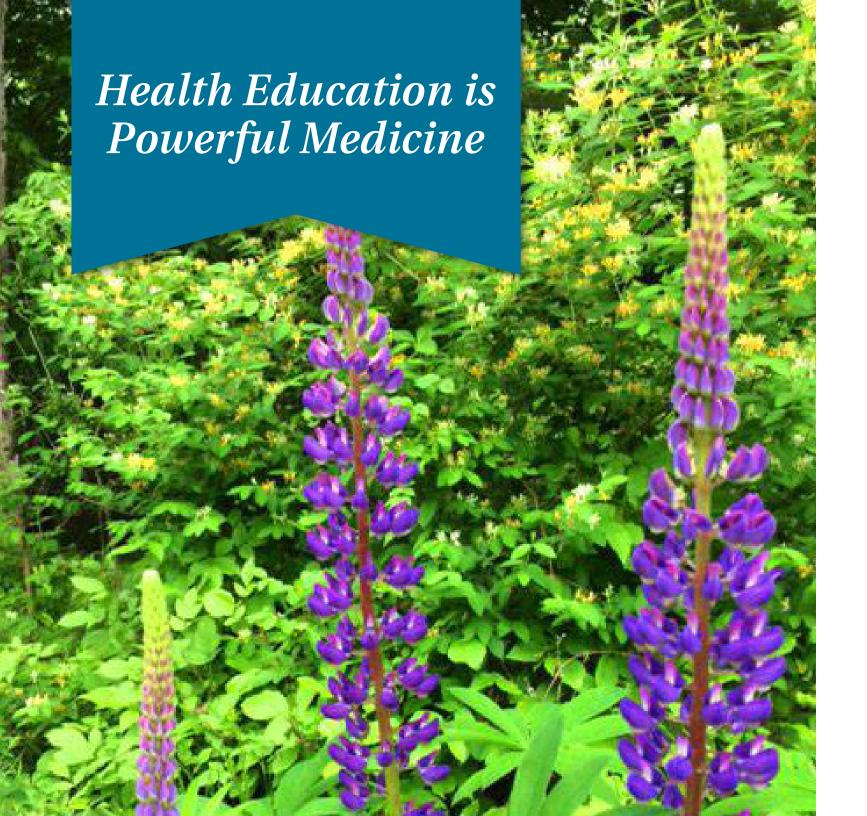
We once again express our deep gratitude to Peter and Paula Lunder, the Lunder family, and the Lunder Foundation. Their passion for Maine led them to initiate the grant that established Lunder-Dineen in collaboration with Massachusetts General Hospital more than three years ago. All of our efforts are aimed at turning their vision for a healthier Maine into a reality.

We look forward to continuing to demonstrate that health education is powerful medicine.

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

Table of Contents

Our Story	7
Meet the Lunder-Dineen Team	10
Free Health Education Customized for Maine	15
Current Educational Activities	17
Featured Educational Initiatives	22
Oral Health: MOTIVATE	23
Alcohol Use: Time to Ask	26
Nursing Preceptorship	29
Continuing Nursing Education	34
Community Outreach Success Story	35
Community Outreach	36
A Glimpse at 2015	40
Collaboration	42



Our Story

The Lunder-Dineen Health Education Alliance of Maine was founded in 2011. This innovative program is the only one of its kind nationwide between a large academic medical center and a neighboring state. Creation of Lunder-Dineen was spearheaded by Peter and Paula Lunder, the Lunder family, and the Lunder Foundation, in honor of the exemplary care Peter Lunder received at Massachusetts General Hospital under distinguished primary care physician James J. Dineen, MD, a Gardiner, Maine native.

Dr. Dineen has made health education a focal point of his medical career, aiming to provide health care professionals with accessible and innovative training opportunities, and to give patients and families the knowledge they need to improve their health. He serves as a Lunder-Dineen co-chair along with fellow Maine native Jeanette Ives Erickson, RN, DNP, FAAN, chief nurse and vice president for patient care services at Mass General, and Robert J. Birnbaum, MD, PhD, vice president of continuing professional development at Partners HealthCare.

Our team believes that health education is powerful medicine and can improve the overall health of Maine residents. Teams, organizations and businesses operate successfully when they have access to the best resources. In health care in particular, new treatments, protocols, and standards of care develop very quickly. Staying informed about the best treatment options and implementing best practices and the latest evidence-based guidelines are often difficult for patients and professionals alike. Health education expands patients' and families' understanding of their health care needs and options, promotes healthy lifestyles and preventive care, and provides information about health care beyond a doctor's office or hospital. For members of interprofessional teams, health education provides access to experts, research, and guidance that help all team members make the best clinical decisions and optimize patient health.

For these reasons, Lunder-Dineen offers free, Maine-tailored, evidence-based, and on-demand education to Maine health care professionals and the communities they serve via our website, www.lunderdineen.org. Our educational programs cover health

education issues specific to Maine—including mental/behavioral health, substance abuse, older adult health, nursing excellence, oral health, and veterans health—and many are available for Continuing Medical Education/Continuing Nursing Education credit. This is a valuable benefit for smaller hospitals and health care practices, particularly in rural areas, that may not have the funding to send their staff for continuing health education, as well as for busy practitioners who cannot take time away from patient care to attend conferences and workshops.

Lunder-Dineen works directly with Maine's health care community, from frontline caregivers to hospital administrators, to identify health education needs at the grassroots level and create educational interventions designed to bridge those gaps. One of our guiding principles is to collaborate with and increase access to existing resources in Maine, rather than duplicate them. We are continually building our network of experts within the Maine health care community, thus enabling us to become even more effective in identifying and quickly addressing new health education needs.

Lunder-Dineen's relationship with Mass General, the primary teaching hospital of Harvard Medical School, builds upon Mass General's mission to partner with its neighbors to build, improve and sustain health care delivery and healthier communities. Mass General's commitment to Lunder-Dineen includes making available the full resources of the Massachusetts General Hospital Academy, the Norman Knight Nursing Center for Clinical & Professional Development, the Maxwell & Eleanor Blum Patient and Family Learning Center, the Red Sox Foundation and Massachusetts General Hospital Home Base Program, and the Partners HealthCare Office of Continuing Professional Development—in addition to the time and expertise of a 10-person, volunteer Operations Committee from Mass General to guide the progression of Lunder-Dineen.

By leveraging this expertise and a state-of-the-art Learning Management System (LMS), Lunder-Dineen is able to measure the impact of education and interventions against the identifiable need to improve health care quality.

Vision

To improve the health of Maine residents by advancing the skills and expertise of Maine's health professionals.

Mission

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

Guiding Principles

- To collaborate with Maine and Massachusetts General Hospital experts to develop Maine-tailored programs
- To provide innovative solutions to interprofessional health care education
- To build upon existing educational materials and programs in Maine
- To maximize use of online learning that is available 24 hours a day, whenever a learner chooses to access it
- To evaluate program effectiveness based on desired outcome levels



Meet the Lunder-Dineen Team

Our success these last few years is due in part to our incredible group of dedicated employees and volunteer leadership. The Lunder-Dineen Operations Committee consists of full-time and part-time employees and we also benefit from in-kind support from interdisciplinary Mass General executives from across the hospital who lend their time regularly to advance our mission. Our team convenes to review overarching areas such as education, outreach, operations and sustainability. Specific topics include strategic planning, program evaluation and philanthropic outreach.



Jeanette Ives Erickson, RN, DNP, FAAN Co-Chair



James J. Dineen, MD Co-Chair



Robert J. Birnbaum, MD, PhD Co-Chair



Gino Chisari, RN, DNP Chief Learning Officer, Nursing



Tristan Gorrindo, MDChief Learning Officer,
Physicians



Labrini Nelligan, MS Executive Director



Denise O'Connell, LCSW, CCM, CCP Senior Program Manager



Carole MacKenzie, RN, BSN, MEd Curriculum Coordinator



Glenn L. Laudenslager IV, MBA Community Outreach Coordinator



James E. Thompson Sustainability Advisor

······ACCOLADES FROM THE COMMUNITY ·······

OMNE Nursing Leaders of Maine is grateful for the relationship we have established with the Lunder-Dineen team. Carole, Labrini and Denise have joined us in multiple venues as we assess and respond to contemporary challenges that nurse leaders face across the state.

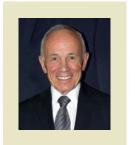
This year, the OMNE Annual meeting was focused on providing tools and resources to nurse leaders as they strive to create and sustain healthy work environments. After discussing the topic with the Lunder-Dineen team, they facilitated the presentation of R. Gino Chisari, RN, DNP, Director of the Norman Knight Nursing Center for Clinical and Professional Development at Massachusetts General Hospital. Dr. Chisari's presentation "Enough is Enough: A Leader's Guide to Creating a Bully Free Environment" was incredibly well received. Gino is an inspiring, engaging speaker, he gets at the heart of a topic none of us want to admit exists, but all of us know it is there in our workplace. Gino offered tools, strategies and courage, no one left empty handed.

Carole, Labrini, Denise and Gino contributed greatly to the success of our annual meeting. The members of OMNE look forward to continued collaboration with the Lunder-Dineen team. ??

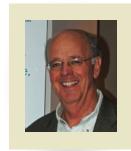
—Paula Delahanty, RN, BSN, MHSA Vice President, Nursing Services Pen Bay Healthcare



Our recently expanded Advisory Committee as of December 2014 includes:



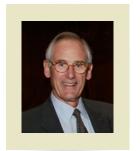
George Campbell Vice President Transportation Engineering The Louis Berger Group, Inc.



Jack EmoryPresident
The Lunder Foundation



Paul S. Goodof Consultant to Nonprofits and Private Trustee



Admiral Gregory G. Johnson USN-Ret.



Marjorie Lunder Goldy The Lunder Foundation



Robert McAfee, MD Former President, American Medical Association, Retired Maine Medical Center Surgeon



Noah Nesin, MD, FAAFP Family Physician and Chief Medical Officer, Penobscot Community Health Center



Larry Pugh Trustee, Colby College



Mark Vogelzang President & CEO, Maine Public Broadcasting Network (MPBN)



www.lunderdineen.org

Our website is the most important tool for disseminating our health education.

In August 2014, we improved our website and launched new content pages on oral health, nursing, interprofessional education, and much more. Our site now displays optimally for any device or screen size, whether mobile phone, tablet or desktop. With more than 30% of the traffic on lunderdineen.org originating from mobile devices, this is an important enhancement that allows health care professionals in Maine to participate in our education wherever and whenever they prefer.

Free Health Education Customized for Maine

Over the last year, we've worked to build a portfolio of interprofessional continuing health education programs that are tailored to the needs of Maine health care professionals. We're proud that our interdisciplinary course catalogue now features nearly 100 hours of free education on more than 15 different topics and therapeutic areas. The majority of these programs provide continuing medical education credits for family physicians, nurses, psychiatrists, social workers, and other health care professionals in Maine.

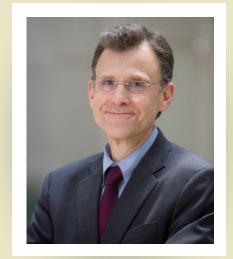
We often collaborate with experts in Maine and beyond to disseminate existing education to a wider audience through our website. This allows professionals from all across the state to access the same high-quality education at no cost. In the past year, we've made sessions available from the following conferences and organizations:

- 23rd Annual Maine Geriatrics Conference
- Alzheimer's Association Statewide Conference
- Communities in Action Symposium
- Dirigo Geriatric Society
- Innovations in Care Delivery: Advancing a Professional Practice Environment
- Maine Community Health Options
- Maine Medical Center's Geriatrics Day Symposium
- Massachusetts General Hospital Nurses Week 2014
- Massachusetts General Hospital Nursing Grand Rounds
- Preparing for the Future: Alzheimer's Disease and Related Dementias
- Strategies for Creating and Sustaining a Professional Practice Environment

For a full listing of our interprofessional continuing health education courses, please visit www.lunderdineen.org/take-course.

Robert Birnbaum Co-Chair, Lunder-Dineen Health Education Alliance of Maine

Robert J. Birnbaum, MD, PhD, is one of Lunder-Dineen's co-chairs and the vice president of Continuing Professional Development at Partners HealthCare. Dr. Birnbaum is an assistant professor of psychiatry at Harvard Medical School, founding director of the Massachusetts General Hospital Psychiatry Academy, and founding executive director of the Massachusetts General Hospital Academy, which provides transnational and global education/training programs that



include regional live symposia and online activities such as webinars and simulations.

Dr. Birnbaum's psychiatry residency training was completed at Mass General, as was his chief residency in psychopharmacology, and his PhD research was in protein biochemistry and molecular neurogenetics. He serves on the Education Review Board of Partners HealthCare and is chair of Partners HealthCare's Education Outcomes Research Committee (ORC), which studies a wide variety of issues related to dissemination and implementation science. He has been a supervisor and consultant focusing on Asian transcultural mental health care issues for the Shanghai Mental Health Center (SMHC) and the Institute of Mental Health (IMH) at Peking University (PKU). Dr. Birnbaum has also been an education consultant to the Red Sox Foundation and Massachusetts General Hospital Home Base Program, which focuses on traumatic brain injury and post-traumatic stress disorder in veterans returning from Iraq and Afghanistan.

Dr. Birnbaum has published widely and spoken to multidisciplinary audiences nationally and internationally on various aspects of continuing medical education and health care reform. Lunder-Dineen is fortunate to have his expertise and guidance on developing and disseminating evidence-based educational programs for health care professionals in Maine.

Current Educational Activities

All on-demand educational activities are free and many qualify for CME/CE credit. Visit www.lunderdineen.org and select "Take a Course" to participate now.



Affordable Care Act

- ACA Overview: Value-Based Insurance Design, CO-Ops, and Reforms in 2014
- Alzheimer's Disease and Related Dementias: The Triple AIM and the Affordable Care Act

Children's Health

- Communities in Action Symposium: Ingredients for Healthy Brain Development
- Communities in Action Symposium: Community Roles in Supporting Children's Health and Well-Being
- Continuity of Care for Down Syndrome
- Is It Concussion, or Something Else?

Diabetes

- Riding the Genomic Wave in Type 2 Diabetes
- Update in Inpatient Diabetes Management: Research, Teaching, and Practice

Insurance

ACA Overview: Value-Based Insurance Design, CO-Ops, and Reforms in 2014

Interprofessional Education

- Innovations in Care Delivery: Creating the New Culture through Relationship-Based Care
- Innovations in Care Delivery: The Strategic Imperative for Innovation
- Medical Education 2011: A Personal Journey and Personal Reflections
- Shared Decision Making: Implications for Policy and Practice
- Strategies for Creating and Sustaining a Professional Practice Environment

Mental Health

 Basic Skills and Clinical Applications of Motivational Interviewing

Nursing

- Innovations in Care Delivery: Creating the New Culture through Relationship-Based Care
- Innovations in Care Delivery: The Attending Registered Nurse
- Innovations in Care Delivery: The Patient Journey

- Innovations in Care Delivery: The Strategic Imperative for Innovation
- MGH Nurses Week 2014: Chief Nurse Address: Five Gifts of Insightful Leaders
- MGH Nurses Week 2014: Clinical and Professional Transformation: CSI Academy
- MGH Nurses Week 2014: Implementing Power as Knowing Participation in Change
- MGH Nurses Week 2014: Self-Care Palette for Nourishing the Mind, Body and Spirit
- MGH Nurses Week 2014: The Trained Nurse in the 19th Century

Nursing Grand Rounds

- MGH Nursing Grand Rounds: After Traumatic Events: Does Time Really Heal All Wounds?
- MGH Nursing Grand Rounds: Best Practices for Providing Safe, Effective, Satisfactory Pain Relief
- MGH Nursing Grand Rounds: Compassionate Self Care
- MGH Nursing Grand Rounds: Implications for the Braden Scale
- MGH Nursing Grand Rounds: Innovations in Interprofessional Care: Nurses Leading the Future
- MGH Nursing Grand Rounds: Nursing Informatics
- MGH Nursing Grand Rounds: The Amazing Life and Times of Florence Nightingale

Older Adult Health

- Alzheimer's Association Conference: Research Update
- Alzheimer's Association Conference: The Five Domains of Habilitation Therapy
- Advances in the Diagnosis and Treatment of Parkinson's Disease
- Aging Veterans: The Challenges, Some Solutions, and Some Remaining Challenges
- Alzheimer's Disease and Related Dementias: Dementia and Primary Care
- Alzheimer's Disease and Related Dementias: Guidelines for Assessment and Differential Diagnosis
- Alzheimer's Disease and Related Dementias: The Triple AIM and the Affordable Care Act
- MMC Geriatrics: Stroke Review: Primary and Secondary Stroke Prevention
- MMC Geriatrics: Surgical vs. Nonsurgical Management of Back Pain in the Elderly
- MMC Geriatrics: The Role of Prognostication in the Care of the Elderly
- MMC Geriatrics: Using Social Media to Improve the Care of the Elderly
- The Joys and Sorrows of Older Veterans: Thoughts from a Geriatric Psychiatrist
- UNE Geriatrics: Brave New Syzygy World
- UNE Geriatrics: From Dietary to Dining

- UNE Geriatrics: Notes from the Field: Avoiding Common Errors in the Care of Older Adults
- UNE Geriatrics: Oral Health Impact on Systemic Disease in Seniors
- UNE Geriatrics: Year in Review: Where We Have Been and Where We Are Going

Oral Health

UNE Geriatrics: Oral Health Impact on Systemic Disease in Seniors

Other Medical Issues

- Continuity of Care for Down Syndrome
- Is It Concussion, or Something Else?
- Managing Patients with Cirrhosis: Opportunities for Improvement
- Medical Grand Rounds: Update in Clinical Cardiology for Internists 2010
- Translational Therapeutics Development at NIH

Palliative Care

Making the Case for Integrated Palliative and Oncology Care in Metastatic NSCLC Patients

Practice Improvement

- Bringing Health Information to Life
- Health Care Reform and the Future of Primary Care
- Shared Decision Making: Implications for Policy and Practice
- Strategies for Creating and Sustaining a Professional Practice Environment
- The Choosing Wisely® Campaign: Choosing Wisely in Maine

Physical Medicine and Rehab

Spaulding Virtual Grand Rounds 2013-2014: Preventing Injury and Enhancing Recovery

Substance Abuse

Responding to Patients Abusing Bath Salts

Veterans Health

- Aging Veterans: The Challenges, Some Solutions, and Some Remaining Challenges
- The Joys and Sorrows of Older Veterans: Thoughts from a Geriatric Psychiatrist











·· ACCOLADES FROM THE COMMUNITY ······

Working with the Lunder-Dineen Health Education Alliance of Maine has been an incredible opportunity for the University of New England College of Osteopathic Medicine, Department of Geriatric Medicine. Their highly professional and skilled staff are taking older adult function and oral health care to new heights.

For Lunder-Dineen's oral health project, MOTIVATE—Maine's Oral Team-based Initiative: Vital Access To Education, they have brought together an enthusiastic interprofessional team, each member with impressive accomplishments. This team's goal is to advance oral health for older adults in Maine. We are first focusing on improving oral health care for residents in Maine Veterans' Homes and will disseminate proven education and training models across the state and beyond. It is a very inclusive process honoring and engaging the veterans, their families, staff, and administrators at the various sites.

As we say in the field, "Geriatrics is a team sport" and Lunder-Dineen's leadership supports this approach in all of their older adult related projects. We are proud to be working with Lunder-Dineen through our Annual Maine Geriatrics Conference and the MOTIVATE initiative.

—Marilyn R. Gugliucci, PhD, AGHEF, GSAF, AGSF Professor & Director, Geriatrics Education and Research University of New England College of Osteopathic Medicine Department of Geriatric Medicine



Featured Educational Initiatives

Our approach to developing education for Maine health care professionals is guided by a framework of four principles.

Lunder-Dineen used this framework to identify three important educational initiatives to launch in 2014. For each of these initiatives—oral health, alcohol use, and nursing preceptorship—Lunder-Dineen convened a team of statewide experts who will collaboratively develop and implement innovative, interprofessional, evidence-based, and sustainable educational models to serve as exemplars that can be utilized to improve health across various settings in Maine.



Identifying areas of educational priority by reviewing Maine health outcomes and conducting formal and informal needs assessments in collaboration with the Maine health care community.

Establishing relationships with Maine health care stakeholders and subject matter experts to enhance and support their educational efforts and to better understand opportunities for collaboration.

Leveraging innovative learning methodologies and technologies, and measuring the impact of education and interventions against the identifiable need to improve health care quality.

Developing education that aligns with the framework of the Institute for Healthcare Improvement Triple Aim Initiative.

Oral Health

MOTIVATE is an innovative, evidence-based, and Maine-tailored program being developed by Lunder-Dineen and a team of statewide Maine-based experts in response to national calls-to-action from the U.S. Surgeon General, American Dental Association, Robert Wood Johnson Foundation, and others to raise awareness about the connection between good oral health and good systemic health. The program will improve, promote, and protect the oral health and overall health of Maine's long-term care residents by advancing the skills, expertise, interprofessional education, and practice of health care professionals.



According to Portland-based older adult health expert and MOTIVATE team member Leonard Brennan, DMD, the rate of dental disease in residents living in long-term care settings often progresses rapidly if recommended oral health care is not provided. The result is tooth decay, swollen and sore gums, difficulty eating, pain, and distress. "In many cases, long-term care residents may live with oral health problems because they think it is just part of aging," Brennan says. "Attending to the oral health needs of long-term care residents will improve their overall health by reducing infections and the difficult problems they cause."

The pilot advisory team convened by Lunder-Dineen—including Dr. Brennan, University of Maine, University of New England, Husson University, Maine Dental Association, and Maine Veterans' Homes—will develop and implement this innovative, interprofessional, evidence-based, and sustainable educational model to serve as an example that can be utilized to improve oral health across health care settings. The model will include a "blended learning" program of online learning modules combined with an in-person workshop.

Watch our videos or download

the MOTIVATE resources at

www.lunderdineen.org/oral-health.

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the MOTIVATE resources at

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Lunder-Dineen's vision for this initiative is to support overall health through innovative oral health education. Long-term care settings present a unique opportunity to work with an interprofessional team on developing and piloting evidence-based practices that improve quality of life and overall health through the use of practical, valuable, effective, cost-saving measures in oral health care.

Pilot Advisory Team







Demi Kouzounas, DMD



Jennifer Crittenden, MSW James B. Hanley, DMD



Marilyn Gugliucci, PhD



Ad Hoc Advisors

Maria Dolce, PhD, RN, CNE



Timothy Oh, DMD



Lenard W. Kaye, DSW, PhD

Learn more about MOTIVATE at lunderdineen.org/oral-health

Rodney A. Larson, PhD, RPh

Alcohol Use

Unhealthy alcohol use is often under identified and as a result undertreated, and it has become a major public health issue in Maine and nationally. In fact, most health care professionals receive very little education about alcohol use, even though according to experts on our advisory team 30% to 60% of all hospital visits in Maine and nearly 30% to 40% of primary care visits are alcohol related. In areas of rural Maine, unhealthy alcohol use and its related problems are acute.

To address this critical issue, Lunder-Dineen has convened a team of Maine-based experts to develop and implement a unique initiative to raise awareness, provide interprofessional education and skills, and address the gap in alcohol assessment and treatment. Our focus is to become a leader in innovative approaches and cultural shifts in interprofessional alcohol education and care practices.



Designed for primary care physicians, all professionals on their teams, and other non-addiction health care professionals, Time to Ask helps these clinicians properly identify, assess, and recommend treatment for patients who may be affected by unhealthy alcohol use. It is our vision that this development process can be piloted to raise awareness, change attitudes, and address the gap between education and treatment of substance abuse disorders.

Substance abuse is one of the most requested health education topics among Maine health care professionals, as it is not included in any continuing education curriculum for non-addiction specialists. The social stigma surrounding substance use makes it challenging for health care professionals to discuss it with their patients. Through targeted, evidence-based education, Time to Ask will help health care professionals further develop their skills to assist patients and families experiencing unhealthy alcohol use. The initiative will embed education and enhanced skills into their regular workflows, so it will support cultural shifts in how conversations about alcohol take place between clinicians and patients.



Time to Ask has been in development during 2014, and very soon we will conduct a needs assessment survey prior to launch of the program in Community Health Centers in rural Maine where there are few addiction specialists. We plan to create, implement, evaluate, sustain, and broaden the model during 2015.

Pilot Advisory Team



Elisabeth Fowlie Mock. MD. MPH. FAAFP



Noah Nesin, MD, FAAFP



Mark Publicker, MD. FASAM, ABAM Diplomate



Jennifer Reck, MA



Mary Lindsay Smith, PhD, MSW

Ad Hoc Advisors



Denise Bouchard, NP



Mazen Hamoudi, MD



John F. Kelly, PhD



Patrick Killoran, MD



Rodnev A. Larson, PhD, RPh



Gust Stringos, DO

Learn more about Time to Ask at lunderdineen.org/alcohol-use

Nursing Preceptorship

Through the Maine Nursing Preceptor Education Program, Lunder-Dineen will work in collaboration with a statewide Maine-based advisory team to broaden and expand the reach of Maine Partners in Nursing Education and Practice's (MPNEP) 2013 Preceptor Pilot Program.

Precepting is a period of practical, guided training when a new nurse, or a nurse transitioning fields, applies the knowledge learned in school to clinical practice under the supervision of an experienced nurse. This program is designed to build and deliver a statewide model for preceptor education to support the provision of efficient, effective, patient-centered care through education, support, and integration of nurses in Maine.



Inspire. Teach. Guide. Invest.

The importance of nursing preceptorship has grown in recent years as patient care is increasingly dynamic and complex. In addition, an effective nursing preceptorship program is vitally important to the health care landscape in Maine since registered nurses between the ages of 52 and 71 comprise more than 47 percent of the nursing workforce, with 52 percent not planning to remain in the workforce in five years (Maine Nurse Resource Inventory, 2008-2010). This anticipated retirement of the nursing workforce signals an immediate need for quality precepting as a tool to prepare, transition, and retain new and transitioning nurses.

According to the Maine Partners Investing in Nursing (PIN) project, 42 percent of Maine preceptors surveyed in 2012 felt somewhat or poorly prepared to precept, and 57 percent had received no formal preceptor education. Research indicates turnover rates of new graduate nurses range up to 60 percent, affecting organizational performance and the delivery of safe, patient-centered, cost-effective care. A Robert Wood Johnson Foundation study reported the average cost of replacing a full-time RN is \$36,567.

A National Council of State Boards of Nursing study found that mentoring and transition programs for nurses led to a significant reduction in errors and improved patient outcomes. For these reasons, Lunder-Dineen will convene and collaborate with a statewide Maine-based advisory team to ensure the future of an adequate nursing workforce that supports health across the continuum of care in the state.

The advisory team is comprised of members from MPNEP, representatives from associate degree nursing programs and long-term care settings, and emerging nursing leaders in the state. The program is currently in the planning and development stage and will be launched in 2015. It will include activities on Lunder-Dineen's online Learning Management System (LMS) and a live workshop in strategic locations across the state.

Learn more about our Maine Nursing Preceptor Education Program at lunderdineen.org/nursing

Pilot Advisory Team



Taffy Davis, MSN, RN-BC



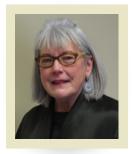
Christina Hanson, RN, MSN, CCRN



Lisa Harvey-McPherson, RN, MBA, MPPM



Kristiina Hyrkäs, PhD, LicNSc, MNSc, RN



Karole Johnson, MSN, RN



Terri Matthew, RN, BSN



Gloria Neault, MSN, RN



Sherry Rogers, RN, MSN, NEA-BC



Su Sepples, PhD, RN



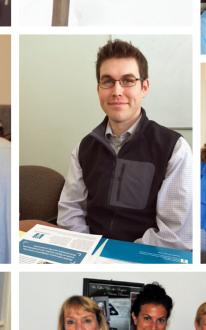
Erin Soucy, PhD, RN



Paula White, MS, RN

Team members not pictured: Kelly Lundeen, RN Marcia J. Parker, RN, MS, CNE Melissa Stoliker, RN, BSN Starr Sweeney, BS, RN, BSN





CENTER













Continuing Nursing Education

For more than a year, Lunder-Dineen has offered nursing professionals in Maine free access to live, monthly Nursing Grand Rounds from the Massachusetts General Hospital Norman Knight Nursing Center for Clinical and Professional Development. While participation has grown steadily, in 2014 Lunder-Dineen made it even easier to access high-quality nursing education. Collaborating with the Knight Nursing Center,



our team made available more than a dozen on-demand sessions on a variety of nursing, leadership and interprofessional topics.

These sessions are available at no cost to nursing professionals in Maine whenever their schedule allows, and many are certified for continuing education credits.

Sessions launched in 2014:

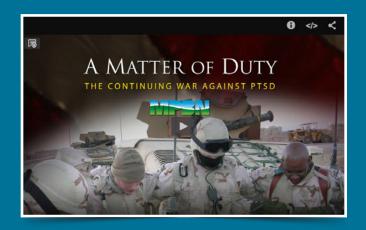
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- MGH Nursing Grand Rounds: Nursing Informatics
- MGH Nursing Grand Rounds: The Amazing Life and Times of Florence Nightingale

Community Outreach Success Story

Matter of Duty

In 2014, Lunder-Dineen was proud to sponsor Matter of Duty, a special documentary from the Maine Public Broadcasting Network that tells the stories of Maine soldiers who were deployed to the wars in Iraq and Afghanistan, the Gulf War and the Vietnam War and returned home to face a new, relentless enemy: post-traumatic stress disorder (PTSD).



This exceptional program helped raise awareness for PTSD among the public and health care professionals throughout Maine and gave veterans, their families and friends, and caregivers an important voice to share their stories. Lunder-Dineen collected data from several screenings across Maine and measured participant feedback.



learned new information about post-traumatic stress disorder (PTSD)



learned new information about community resources available to assist service members, veterans, and their families



of respondents say the documentary increased their understanding of the impact of war on service members, veterans, their families, and the community

 $Watch\ the\ video\ at$ www.mpbn.net/Television/LocalTelevisionPrograms/AMatter of Duty.aspx

Community Outreach

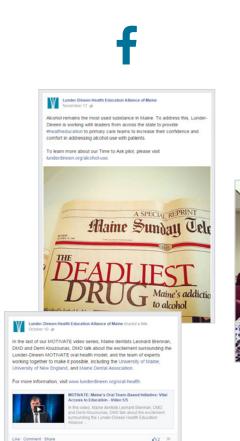








We have focused on developing a strong social media presence for Lunder-Dineen on the major social media networks: Facebook, Twitter, Instagram and YouTube. We use this approach to build awareness and educate key stakeholders about our organization, mission and educational programs. In recent months, we have shared information and statistics relating to our important initiatives in oral health, alcohol use, and more. These online communities serve as an additional touchpoint to build relationships with other health care groups across Maine.





Lunder-Dineen's mission emphasizes improving the health and well-being of communities across Maine, which makes our commitment to community outreach an important facet of our organization. As a result, we attended a number of important events throughout Maine over the course of 2014 to share information about our education, including the Maine Military & Community Network Conference, the Maine Quality Counts QC 2014 Conference, the OMNE Maine Nurse Leaders Annual Conference, the University of New England Annual Maine Geriatrics Conference, and the University of Maine Geriatrics Colloquium.









····· ACCOLADES FROM THE COMMUNITY ······

I would like to express my appreciation for the support that Lunder-Dineen has provided to Maine service members, Veterans and their families through partnering with the Maine Military & Community Network. Through primary sponsorship of the Fourth Annual Maine Military & Community Network Conference, 234 attendees received education that increased awareness of the community challenge of suicide. This partnership brought Dr. Kelley Posner, author of the Columbia Suicide Severity Rating Scale, to the University of New England where 83 behavioral health professionals were taught in the use of practitioner level tools to identify at-risk individuals and ultimately reduce veteran suicide, as well as within the community at large. Lunder-Dineen has truly made an impact upon the lives of Maine's military community through a targeted emphasis on health education.

—Nathaniel Grace Sergeant First Class Community Liaison Maine Military Community Network













A Glimpse at 2015

A critical aspect of our mission to improve the health of Maine residents is staying close to the current needs of health care professionals across the state. Through ongoing meetings with frontline providers, regular presence at health care events in Maine, and collaboration with experts on each of our flagship initiatives, we are able to conduct informal needs assessments that align and inform our strategy.

Throughout late 2014 and into early 2015, our focus centers on formal needs assessments for our MOTIVATE and Time to Ask initiatives, and initial steps to get our Nursing Preceptorship initiative ready for rollout. Throughout the balance of 2015, our attention will turn to development and implementation of each of those programs, and all of the steps involved in maintaining momentum and monitoring results.

Throughout 2014, we actively worked to raise awareness about Lunder-Dineen's mission and goals. As part of that effort, we sought out speaking engagements for our team members and in November 2014, our Chief Learning Officer Gino Chisari, RN, DNP, was a featured presenter at the 7th Annual OMNE Annual Meeting, speaking on nursing leadership and healthy work environments. Lunder-Dineen has also been invited to speak about MOTIVATE at University of New England's Annual Geriatrics Conference in Bar Harbor in June 2015, and our team is currently building out the framework for an interactive, interprofessional workshop on MOTIVATE for that event.

In our community outreach, our focus will remain on raising awareness and driving participation in our free education. In 2015 we'll place renewed focus on creating engaging formats for our education—such as pocket guides, infographics, posters and resource guides—that provide easy access to our education for busy clinicians, even if they only have limited time.

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?? My father, a physician who moved to Maine in 1945, attended medical school and did his internship in Boston, and was blessed with many colleagues who ultimately wound up at Massachusetts General Hospital, and to whom he could turn for second opinions or for help when he came across some disease or problem he had not previously seen. It pleased him immensely that, as I was building a career in Boston, I got involved as a volunteer with Mass General and got to know some of his friends. Now having returned to Maine myself, I am thrilled that through the far-sighted generosity of Paula and Peter Lunder the same kind of connections are being fostered and developed between all kinds of practitioners and clinicians in Maine through Lunder-Dineen, and the educational resources of a major metropolitan teaching hospital are freely and readily being made available to clinicians throughout the state—from York to Calais to Fort Kent and all points between. It's a privilege to be involved with Lunder-Dineen, led by an immensely talented team with deep Maine roots, as it holds so much promise for the benefit of the citizens of my home state.

—Paul S. Goodof
Consultant to Nonprofits and Private Trustee
Member of Lunder-Dineen Maine Advisory Committee

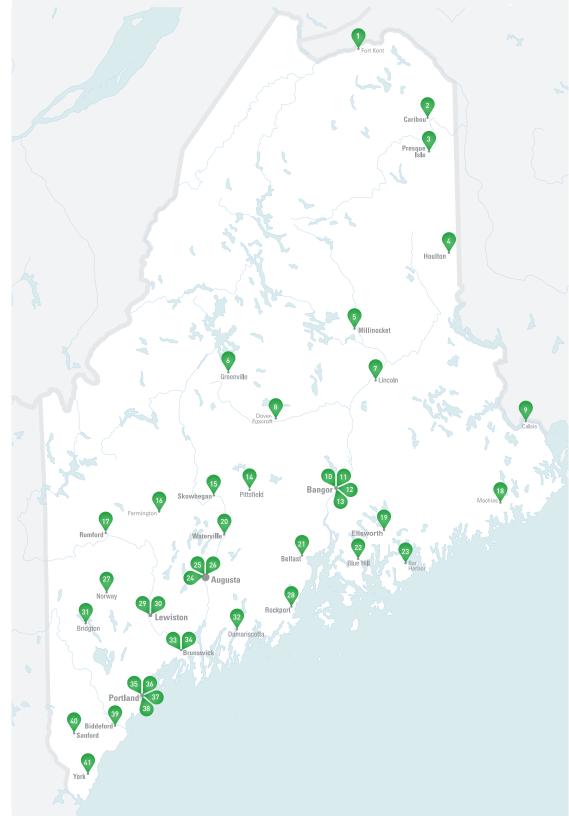


Hospitals We've Talked with in Maine

Over the last 24 months, we've met with every hospital in Maine—from frontline clinicians up to health system leadership, and from Fort Kent down to York. This ensures we have perspective from all over Maine and access to all kinds of experts as we develop health education programs tailored to the unique needs of Maine.

- 1. Northern Maine Medical Center
- 2. Cary Medical Center
- 3. The Aroostook Medical Center
- 4. Houlton Regional Hospital
- 5. Millinocket Regional Hospital
- 6. CA Dean Memorial Hospital
- 7. Penobscot Valley Hospital
- 8. Mayo Regional Hospital
- or mayo nogional noopite
- 9. Calais Regional Hospital
- 10. Eastern Maine Medical Center
- 11. Acadia Hospital
- 12. Dorothea Dix Psychiatric Hospital
- 13. St. Joseph Healthcare
- 14. Sebasticook Valley Hospital
- 15. Redington-Fairview Hospital
- 16. Franklin Memorial Hospital
- 17. Rumford Hospital
- 18. Down East Community Hospital
- 19. Maine Coast Memorial Hospital
- 20. Inland Hospital
- 21. Waldo County General Hospital

- 22. Blue Hill Memorial Hospital
- 23. Mount Desert Island Hospital
- 24. Riverview Psychiatric Center
- 25. MaineGeneral Medical Center
- 26. VA Maine Healthcare
- 27. Stephens Memorial Hospital
- 28. Pen Bay Hospital
- 29. Saint Mary's Regional Medical Center
- 30. Central Maine Medical Center
- 31. Bridgton Hospital
- 32. Miles Memorial Hospital
- 33. Mid-Coast Hospital
- 34. Parkview Adventist
- 35. Spring Harbor Hospital
- 36. Mercy Hospital
- 37. Maine Medical Center
- 38. New England Rehab Hospital of Portland
- 39. Biddeford Medical Center
- 40. Sanford Medical Center
- 41. York Hospital











Other Stakeholders We've Talked to in Maine

We have met with more than 50 health care organizations, advocacy groups, legislators, educators, and community-based health care professionals and practices who represent all regions of Maine. They have contributed invaluable information to our ongoing needs assessment of education gaps, and they have full access to all of Lunder-Dineen's current educational resources.

■ Health Care Organizations

- 1. Maine Quality Counts
- 2. The Maine Hospital Association
- 3. The Maine Healthcare Association
- 4. Organization of Maine Nurse Executives
- 5. Society for Social Work Leadership in Healthcare
- 6. Daniel Hanley Leadership Institute
- 7. Maine Medical Association
- 8. Maine Primary Care Association
- 9. Maine Military and Community Network
- 10. Maine Partners in Nursing Education and Practice*
- 11. Maine Vets Centers
- 12. Maine Veterans Homes
- 13. OneMaine Health Collaborative*
- 14. Mainely Girls
- 15. Case Management Society of New England, Maine Chapter*
- 16. Inland Hospital Medical Group
- 17. Maine Action Coalition*

■ Government

- 18. Maine Centers for Disease Control
- Maine Department of Health & Human Services – Office of Substance Abuse and Mental Health Services
- 20. Congressman Mike Michaud
- 21. Senator Susan Collins' Office

■ Education

- 22. University of New England
- 23. Southern Maine Community College
- 24. University of Maine
- 25. University of Southern Maine
- 26. Maine Concussion Management Initiative

■ Philanthropic

- 27. The Libra Foundation and Pineland Farms
- 28. The Bingham Program
- 29. Maine Health Access Foundation

Insurance

30. Maine Community Health Options

■ Older Adult Health

- 31. University of Maine Center on Aging
- 32. University of New England Geriatric Education Center
- 33. Maine Area Agencies on Aging
- 34. Dirigo Pines Retirement Community
- 35. Elder Independence of Maine/ SeniorsPlus
- 36. The Alzheimer's Association, Maine Chapter
- 37. Maine Gerontological Society*
- 38. Dirigo-Maine Geriatric Society*
- 39. Penobscot Community Health Care: Community Care/Geriatrics

■ Primary Care and Community-Based Health Care

Federally Qualified Health Centers

- 40. Penobscot Community Health Center
- 41. Sacopee Valley Health Center
- 42. Eastport Health Center
- 43. Pines Health Services

Outpatient Mental Health Services

- 44. Sweetser Adult Mental Health Services
- 45. Spurwink Adult Mental Health Services

Addiction Services

- 46. Mercy Recovery Center
- 47. Mid Coast Addiction Resource Center

Oral Health

- 48. Leonard Brennan, DMD
- 49. Maine Dental Association

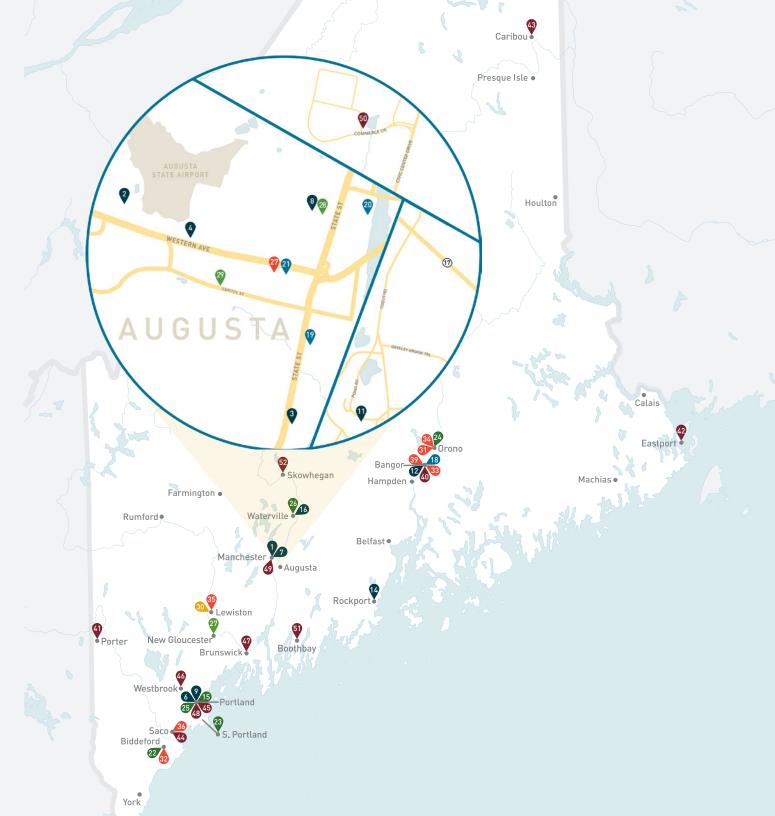
EMS

- 50. Maine Emergency Management Agency
- 51. Boothbay Region Ambulance Service

Family Practice

52. Redington-Fariview Family Practice and Occupational Medicine

 $^{*}\mathrm{Consists}$ of a group of health care professionals from various employers, stakeholders, roles and practice settings across Maine























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The aging population in Maine is rapidly increasing and many seniors are highly vulnerable and at increased risk for diseases. Oral disease is not a normal part of the aging process. It signals a need for effective educational programs and an integrated, interprofessional approach to improving oral health.

The Lunder-Dineen Health Education Alliance of Maine recognized these issues and stepped forward with enthusiastic leadership, teambuilding experts, and financial support to develop assessment tools and educational programs that will improve the lives of Maine's most fragile population. They provided the important energy to help create a unique oral health/total health care model for long-term care facilities. Locally, regionally and nationally, the health care system has been looking for a leader willing to take on the challenge of improving the total health of seniors in long-term care. Lunder-Dineen has accepted this difficult task.

The Lunder-Dineen MOTIVATE initiative has the potential to be one of the most innovative and exciting health care models for geriatric oral health care in the United States. Maine seniors will be the beneficiaries of this new and exciting model that helps restore dignity and improved quality of life to our aged population.

—Leonard Brennan, DMD

General dentist and older adult
oral health expert, Portland, Me.
Co-Director, Dental Geriatric
Fellowship Program, Harvard University





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