

## Descriptions: Deeper Dive Learning Labs

### Round 1: 12:30-2:30pm



#### Leveraging Care Teams and Using | [Petaluma Health Center \(CA\)](#) Technology & Alternative Visits to Expand Access and Care

- Jessica Moore, FNP, Associate Clinical Director and Director of Innovations
- Dr. Danielle Oryn, DO, MPH, Chief Medical Information Officer
- Tiffany Jimenez, RN, MSN, Director of Quality Improvement and Care Innovation



In this session, Petaluma Health Center will share their core care team structure and highlight key roles shared across their six family medicine teams. They will also share how they've **used technology tools and alternative visits** to expand their clinic's capacity to care for patients beyond traditional face-to-face encounters, **enabling team members to work at the top of their licenses** and spend more time managing uncontrolled chronic diseases. You'll share your experiences with peers – what do your teams and roles look like? How have you leveraged alternative visits and technology to optimize capacity and resources?



#### Defining Populations, Identifying | [Cherokee Health Systems \(TN\)](#) Complex Patients and Using Data to Design Care Strategies

- Dr. Parinda Khatri, MD, Chief Clinical Officer

This session will describe Cherokee Health Systems' (CHS) Bio-Psycho-Social Assessment and how the organization **quantifies patient complexity** from biological, psychological and social domains. Dr. Khatri will share how CHS **developed this process** of complexity measurement, as well as **application of this multi-domain approach for risk stratification, resource allocation, and clinical decision-making**. You'll have an opportunity to share with peers your biggest challenges in identifying and stratifying complex patients, barriers to overcoming these challenges, and work as a team to develop concrete actions to take your stratification process to the next level.



#### Population Health Strategies for Improving | [La Clinica \(OR\)](#) Outcomes and Patient Engagement

- Tara Kirk, Director of Performance Excellence
- Jillian Robinette, Integrated Behavioral Health Coach



This session will explore La Clinica's journey from struggling with patient engagement and the team's capacity to manage population health on a large scale to having **increased patient engagement and comprehensive systems to manage patient populations**. You'll learn how La Clinica used **metric champions, huddles, data dashboards, and care workflows** to improve outcomes as well as team engagement. You'll add to the conversation by sharing your wisdom and struggles in managing the health of your population.



#### Considerations for Deepening & | [Health Management Associates](#) Strengthening Integrated Behavioral Health

- Dr. Lori Raney, MD, Principal

This session will discuss models of integrated care and take a dive deeper into topics that participants are having challenges with, which may include **workflows, measurement-based care, PCP buy-in, brief interventions, and training of new hires**. Team activities will be focused on moving your behavioral health integration work forward, and could include re-designing workflows, role-playing interventions or other activities customized to the needs of participants.

## Round 2: 3:00pm-5:00pm



### Assessing & Addressing Social Needs: | [Petaluma Health Center](#) Lessons Learned in Early Implementation

- Jessica Moore, FNP, Associate Clinical Director and Director of Innovations
- Dr. Danielle Oryn, DO, MPH, Chief Medical Information Officer
- Tiffany Jimenez, RN, MSN, Director of Quality Improvement and Care Innovation

In this session, Petaluma Health Center (PHC) will share early lessons learned from assessing and addressing social needs, including their **screening strategy and use of the PRAPARE tool**, using a **virtual platform** like Aunt Bertha to help connect patients to external resources, and **using data to inform community partnerships**, including PHC's partnership work to address food insecurity and unemployment. You will have the opportunity to share experiences, challenges, and strategies for integrating assessing and addressing social needs into your organization.



### Optimizing Team Structures & Building | [Cherokee Health Systems](#) High Functioning Teams

- Dr. Parinda Khatri, MD, Chief Clinical Officer

This session will focus on how Cherokee Health Systems (CHS) **optimizes team structure, processing, and staffing** to enhance clinical quality, efficiency, and joy in practice. Dr. Khatri will do a deep dive into characteristics of **high functioning teams, attributes of individual team members, and components of team science implementation** in the primary care setting. She will also share how they train CHS staff in core competencies, how they monitor competencies, and how they develop staff further. You will be asked to share experiences, lessons learned, and strategies for building effective teams.



### How Practice Managers Use Financial Information & | [La Clinica](#) Data to Make Decisions

- Tara Kirk, Director of Performance Excellence
- Jillian Robinette, Integrated Behavioral Health Coach

This session will dive into **decision-making about clinical resources through the lens of financial data**. This session will talk through La Clinica's journey of going through a **change management process** of moving financial oversight and management from senior leadership to the practice management level. The change of ownership and accountability has impacted the efficiencies, innovation and overall financial picture for La Clinica. You will consider the possible benefits to your organization and brainstorm how you could make a stronger connection between finances and clinical resource decisions.



### Capabilities Needed for Value-Based Care | [CHCS](#)

- Rob Houston, MBA, MPP, Associate Director for Payment Reform
- Greg Howe, Senior Program Officer

This session will help your health center understand four foundational capabilities needed to **succeed in a value-based payment (VBP) environment and create value proposition**. These four capabilities are:

- Implement new care models to manage complex patients.
- Using data to support care delivery, improve quality, and reduce total cost of care.
- Coordinating effectively with external providers and community-based organizations.
- Building internal and external support.

By the end of this session, your organization will understand the capabilities needed to succeed in VBP, be able to make the connection between these capabilities and VBP, and learn how to effectively communicate a value proposition to partners, MCOs, and other stakeholders.

