

EDUCATIONAL OUTREACH SESSIONS

Area	Specific Educational Session
<i>Cross-cutting themes / Responsible Party</i>	
Health Literacy:	Introduction to health literacy
	Cultural competency
Chronic Care Model:	Chronic Care Model (CCM) Introduction
	Planned care across conditions
	Connecting to Your Community
Self-management:	What is a self-management goal, how is it documented; how do you know it was achieved?
	How to assist pts with 2 or more chronic diseases in setting effective self-management goals
	How to set goals with patients with depression
	Motivational Interviewing
	Supporting Behavior Change in Patients with Chronic Illness
	Living Well (chronic disease self-management course)
	MH Learning Resource Centers: what they have to offer
Teamwork:	How to build effective teamwork into a busy practice
	Setting goals for your practice team
	Learning how to make change happen by using PDSA (Plan-Do-Study-Act) cycles of change
	Mapping staff roles and responsibilities

	Mapping patient flow from door-to-door
	Role of the chronic illness care manager
	Group visits
	Role of home care
Using Data for Improvement:	Using the CIR within office flow (Chronic Improvement Registry)
	Use CIR Progress Reports to improve care
	Comparing Progress Reports & PTE targets, how to identify areas to focus improvement efforts
Spreading and Sustaining Change:	How teams successfully spread and sustain improvements
Other Cross-Cutting Clinical Issues:	Pay for Performance (P4P) – How to be successful
	NCQA Recognition Programs: Getting Started
	Patient Satisfaction Surveys: How to start and what to do with your data!
<i>Clinical Themes / Responsible Party</i>	
Diabetes	Diabetes 101 & ADA Standards of Care
	Diabetes tools of the trade (pumps, pens, meters, etc)
	Talking w/ a newly diagnosed patient prior to being able to get them into a DSME class
	LDL – How to get a patient to target
	BP – Getting to target
	A1c – Reaching goal with patients
	Preventing diabetic nephropathy
CVD	CVD “101”
	Links between CVD and diabetes, CVD & depression
	Identifying and overcoming challenges in meeting CVD Secondary Prevention treatment goals
	Addressing CVD risk factors – getting to goal
	Blood Pressure Review and Update
Primary Care Mental Health	Depression – the hidden co-morbidity
	Use of the PHQ-9 for diagnosis and management of depression

	Treatments for depression, when and how to use them: watchful waiting, meds, psychotherapy, combination
	Treatment of depression with medication
	Screening for common co-morbidities of depression
Asthma / COPD	Introduction to asthma management
	Asthma skills and competencies
	What you must know about asthma (patho, severity classification)
	The Asthma Control Test—What is it and how do I use it?
	Treating Patients with COPD (review of guidelines/resources)
Obesity	Naming the problem: measuring BMI
	Working with patients towards a healthy weight
	Practical tips for healthy eating
	Getting active – promoting physical activity
	Medical treatment options for obesity
	Surgical treatment options
Elder Care Issues	Dementia care in practice
	Falls risk assessment
	Older driver assessment
	Care transitions: how practices can help ensure successful transitions
Tobacco Treatment	Tobacco Intervention in Clinical Settings: One hour training on the resources available for tobacco users in Maine, as well as best practice guidelines for tobacco treatment.