



CULTURE CARE CONNECTION

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Increasing the cultural competence of health care providers serving culturally diverse populations
Spring 2018

Funded by Vare

Mobile Clinic Pilot Improves Access to Preventive Care Services

A program piloted by Blue Cross and Blue Shield of Minnesota to increase utilization of preventive screening and wellness exams by Medicare members highlighted ways to address barriers and accessibility to care.

“The annual wellness visit is something that is allowed and recommended by the Centers for Medicare & Medicaid Services that we don’t see in other commercial health insurance plans,” said Kimberly Switlick-Prose, Blue Cross senior director, strategy and analytics.

According to a *North Carolina Medical Journal* [study](#), people who get an annual wellness visit are much more likely to become engaged in their care and get other preventive screening visits indicated for them, like mammograms, colorectal and diabetes kidney screening, and diabetes A1C and retinal eye exams. Blue Cross found that members who

get an annual wellness visit are 220 percent more likely to have colorectal cancer screening.

As Blue Cross examined why some members did not complete preventive visits, they began to uncover the underlying issues getting in the way of appropriate utilization of these health-enabling services.



The Blue Cross and Blue Shield of Minnesota “Blue Bus”

In addition to not having the time, resources, and motivation to travel to traditional clinics, members found navigating health systems to be complex: From low health insurance



This Issue

Clinical Corner 2

News and Resources 3

Events 4

literacy to appointment scheduling to traversing large health system campuses for multiple locations of care.

The mobile health clinic solution was chosen as the method with the greatest potential to address these issues.

Mobile health clinics (MHCs) are ideal for delivering a majority of the [top 25 most-defined](#) clinical and cost effective prevention services cited

by the national Partnership for Prevention, including colorectal cancer, diabetes, and hypertension screening. As a link between clinical and

Continued on Page 2 >>

community settings, MHCs address both medical and social determinants of health, tackling health issues on a community-wide level.

Beginning in June of 2017, the “Blue Bus” was offered to members who had not had an annual wellness exam in the past year, plus had at least one additional preventive screening exam they had not yet completed, but that they were eligible for and were recommended to get. In all, 12,000 members qualified to participate.

An effective outreach program for the pilot involved communications tailored to address some of the social determinant challenges around transportation, and low health and health insurance literacy. Letters were sent to all the individuals indicating this program was available and that

they qualified for it, and to let them know that they would be getting a phone call to get them signed up and scheduled.

“Blue Cross found that members who get an annual wellness visit are 220% more likely to have colorectal cancer screening.”

Response to the MHC pilot was significant, with a high turnout even in areas where many services were available at traditional clinics. “Some of the locations that had the highest demand were less than a mile from a

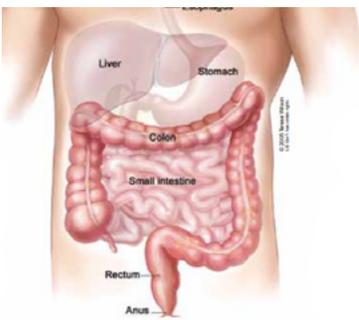
major provider system, suggesting that the convenience is really quite a factor,” said Switlick-Prose. “Not all providers offer retinal eye exams, and it’s hard to know where to go. Sometimes that uncertainty is just enough of a hurdle that people don’t act on it.”

MHCs have a sense of visibility and user-friendliness that removes many logistical barriers to traditional forms of health care, helping and encouraging more vulnerable populations to receive the necessary health services.

“By helping people get their annual wellness visits, we’re helping to create a more enabling ecosystem for people to be healthy,” said Switlick-Prose. “That makes it much easier for people to actually get connected and become meaningfully engaged in their health.”

CLINICAL CORNER

Improving Colorectal Cancer Screening Rates - March is Colorectal Cancer Awareness Month



MN Community Measurement’s recent [2017 Health Equity of Care Report](#) highlighted how colorectal cancer screening rates have improved since 2014 for nearly all race and ethnicity categories. Yet rates for certain populations

continue to be substantially lower than those of Whites.

Patients in the American Indian racial group had a 55 percent screening rate, which is 18 percentage points lower than the 73 percent statewide average. Minnesota Somali patients had a 28 percent screening rate.

Improvement efforts have been underway on several fronts. The American Indian Cancer Foundation began the “Improving Northern Plains American Indian Colorectal Cancer Screening (INPACS)” project to better understand successes and challenges for colorectal cancer screening and to improve screening rates. The [INPACS project](#) focused

on colorectal cancer screening practices within Indian Health Service, tribal health, and urban clinics in American Indian communities across the Northern Plains states, including Minnesota. A primary finding of the project was that system-level strategies are needed to impact colorectal cancer screening rates. For example, provider recommendation for screening is the most influential factor in a patient completing colorectal cancer screening. This emphasizes the importance of clear, understandable, consistent, and up-to-date communication between the patient and their provider.

The Fall 2014 Culture Care Connection [profiled](#) how NorthPoint Health & Wellness Center used a handheld electronic medical communicator to help non-English speaking and non-American born patients understand take-home sample collection information for the Fecal Immunochemical Test used in colon cancer screening. Minnesota Department of Health Sage Cancer Screening program offers [resources for providers](#) to provide colorectal cancer screenings free of charge.

NEWS AND RESOURCES

Community Health Worker Toolkit – Guide for Employers

Commissioned by the Minnesota Department of Health and developed by Wellshare International in partnership with the MN Community Health Worker Alliance. This Toolkit provides employers and prospective employers with practical guidance for organizational and practice integration of Community Health Workers (CHWs), and to understand the education and competencies of CHWs.

[More >>](#)

Teaching Method Improves Understanding of Structural Racism in Pre-med Students

This paper presents the results of a comparative study of an interdisciplinary pre-health curriculum based on structural competency with a traditional premedical curriculum. Results suggest that students who took the structural competency-based curriculum identified and analyzed relationships between structural factors and health outcomes at higher rates and in deeper ways than did other premed students, and also demonstrated higher understanding of structural and implicit racism and health disparities. [More >>](#)



Many Faces of Community Health Conference Call for Abstracts Now Open

Many Faces of Community Health is a two day conference that explores improving care and reducing health disparities in underserved populations

and among those living in poverty. Many Faces brings information and resources on clinical care, public policy, and health innovations to Minnesota's health care community, with a focus on safety net providers.

The conference examines community care innovations, health care delivery models, and other healthcare reform initiatives that promote health equity, prevent and manage chronic diseases, and assure access for all.

Abstracts are due March 30th.

[More >>](#)

The Curb Cut Effect: How Making Public Spaces Accessible to People With Disabilities Helps Everyone

This article, written by a PhD student in developmental cognitive neuroscience with ADHD, explains how, by destigmatizing technologies that improve the functional capabilities of persons with disabilities and making them universal, we can make them like curb cuts: devices that help everyone.

[More >>](#)



Asthma Medication Posters

These posters from the Minnesota Department of Health are to assist school health office staff, pharmacists, asthma educators, primary care clinics, and others to help patients identify their inhaled asthma medications. The posters display a photo of each inhaler – the generic and brand name of the medication, the delivery dose, and manufacturer's name for all currently available FDA approved inhaled asthma medications commonly prescribed in the U.S. [More >>](#)



Stratis Health 2018 Building Healthier Communities Award Recipients

Stratis Health in March announced the recipients of its 2018 Building Healthier Communities award, in celebration of National Patient Safety Awareness Week. This Stratis Health grant program supports initiatives that promote a culture of health care quality and patient safety in the state.

2018 Recipients

East Metro Coordination of Care Post-Acute Care Mental Health Workgroup will produce a post-acute care behavioral health video training targeted to staff in long-term care, residential care, and assisted living.

Led by the University of Minnesota School of Nursing, **East Side Table Program Evaluation Partnership** will evaluate the East Side Table's 10-week Make-at-Home Meal-Kit program.

The program helps families access and prepare affordable, healthy food while developing lifelong food skills that contribute to improved dietary, health, and equity outcomes.

Fruit and Veggie Rx Program, led by the HealthEast Foundation, will use its award to support a project where primary care teams identify low-income, food insecure refugee and immigrant patients with chronic diet-related disease. They work to empower patients and families to make better food choices by providing nutrition education and increasing affordable access to healthy produce.

[More >>](#)

EVENTS



National Minority Health Month – April 2018

Observed every year in April to highlight the health disparities that persist among racial and ethnic minority populations and the ways in which legislation, policies, and programs can help advance health equity. This year's theme is Partnering for Health Equity. Partnerships at the national, state, tribal, and local levels are vital to the work of reducing health disparities and advancing health equity. Beginning April 1, 2018, OMH will join with partners, health advocates, and organizations to highlight the role

of partnerships in improving the health of people and communities across the country. [More >>](#)



SAVE THE DATE Community Health Worker Alliance Statewide Conference Wednesday, May 23, 2018 7:30 a.m. – 5:00 p.m. TIES Event Center, St. Paul

The theme of this year's conference is New Horizons in Community Health: Thriving at the Forefront of Health. Registration will open in March.

For questions, contact info@mchwalliance.org, or visit the [Minnesota CHWA website](http://MinnesotaCHWA.org).

2018 Readmissions Action Learning Day Monday, April 30, 2018 8:30 a.m. – 5:00 p.m. \$50 Hilton Airport/Mall of America, Bloomington

This event is for health care and community-based organizations from across the continuum of care (hospitals, home health, skilled nursing, clinics, and others) interested in improving care transitions and coordination to reduce hospital readmissions and keep patients at home. Topics include:

- Utilizing Targeted Assessment Prevention to tackle disparities
- Care transitions and social determinants of health
- Community-based coordination of care initiatives

[More >>](#)

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Stratis Health is a nonprofit organization that leads collaboration and innovation in health care quality and safety, and serves as a trusted expert in facilitating improvement for people and communities.

Stratis Health works toward its mission through initiatives funded by federal and state government contracts, and community and foundation grants, including serving as Minnesota's Medicare Quality Improvement Organization.

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