

THE CLINICAL COORDINATION PARTNERSHIP (TCCP) Advisory Committee Meeting

July 9, 2013
Augsburg College

Meeting Minutes

Attendees:

TCCP Partners:

Jennifer Eccles Century College	Heather Froehlich Allina Health	Jeanine Gangeness Minnesota Association of Colleges of Nursing representative
Melanie Johnson Winona State University	Margo Marko University of Minnesota	Christina Marshall Essentia Health
Beth Peterson Bethel University	Tanya Velishek Fairview Health Services	Alison Watkins St. Catherine University

TCCP Staff:

Elizabeth Biel TCCP Director	Judith Mitchell TCCP Assistant
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Guests:

Jane Foote HealthForce Minnesota	Mary Rosenthal HealthForce Minnesota
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I. Welcome & Introductions

II. Meeting Overview

Elizabeth Biel outlined the topics for the meeting. The plan for the meeting is to touch base on the TCCP Transition Plan, Advanced Practice Providers plans, and TCCP activity while Biel is on maternity leave.

The next Advisory Committee meeting is planned for early December.

The TCCP activity this month is mostly entering the Spring/Summer 2014 StudentLink requests. The requests are 60% completed. 25% have been turned in, but still need to be checked and entered into StudentLink. It is expected that the August 2nd deadline will be met.

There will not be a new training session for clinical partners for the spring requests as the information is still the same as the fall session, and it is available on the TCCP website for review.

III. Director's Report

Upcoming changes to StudentLink:

- Will implement a "temporary deny" decision
- Will make "revise decision" more like "email placement" – comments can be included
- Making some updates to clinical partner decision page
- Updating the Java language
- The email confirmation pop-up has been eliminated
- The programmer is looking into changing the decision process so that multiple decisions can be entered, and then submitted, rather than having to submit each decision individually.

The goal is to make StudentLink as fast and easy as possible.

TCCP started using StudentLink in Spring 2013, and since spring has lighter activity, there wasn't as much of a burden placed on the system. Fall 2013 was the first big test. There was a problem with clinical partners having to log out and back in when they were trying to enter decisions. The software programmer, Cliff Campbell, and Biel are meeting with some of the users that had the most problems to see what they're experiencing and figure out ways to fix the problem. They already went to Hennepin County Medical Center, but were unable to recreate the errors, probably because the system wasn't being used as heavily. They are going to Mayo next to see if they can recreate the problem there.

The lessons learned from StudentLink will help make the new Advanced Practice Provider software better as its being built.

The software developer's contract for the next year has to be finalized before he can begin doing this work.

Advanced Practice Providers:

Judith Mitchell is working on getting the baseline data from educational partners.

There is a group working on developing the informational website.

TCCP Transition Plan:

TCCP is working with the non-MnSCU partners to collect the fees. The process includes making sure to have their legal names, getting the contracts finalized and signed, then Winona State University (WSU) sends the invoices. MnSCU will be done as a group. There are only three "outliers." Apart from that, there are just a few details to be worked out with the other partners.

Question: What does an "outlier" mean?

Answer: Some people need more clarification or their superiors didn't know about the process. It's typically because of staff turnover that not everyone involved knows what's going on.

Changes in partnerships:

State Operated Services has decided to stop working with TCCP. They don't have very much clinical activity anyway. University of Wisconsin-Eau Claire has also left, because their sole clinical partner in TCCP decided to not provide them with clinical space anymore – note this was that clinical partner's decision on their own.

Fond du Lac (a MnSCU tribal college) is joining TCCP. Biel had a very pleasant meeting with them. They can see how TCCP will help them and they are going to try to get more of their partners to join.

Hibbing Community College will also join TCCP.

When Biel returns from maternity leave, she will work on getting the rest of the Minnesota Mayo clinical sites on board. She will also work with Essentia, who are adding three or four sites for Academic Year 2014-15.

It was suggested that Mayo be invited to send someone to talk to TCCP members and explain their new policies for charging for some of their provided clinical experiences. It would be helpful to have a copy of the criteria they use to decide who gets charged. Biel mentioned that a representative from Mayo will be at the November Advanced Practice Provider meeting so she can ask about how they came to their decision and what their principles are.

Talks are continuing with HealthPartners and Regions. Everything is going well and Biel will continue to meet with them about bringing them on board.

A list of TCCP groups that have met since the last Advisory Committee meeting was presented: TCCP All Partner meeting; Advanced Practice Nursing/Physician Assistant meeting; Physician Assistant Database meeting; HEIP meeting; Clinical Summit meeting. Some of the outcomes of the Clinical Summit meeting include: Less nursing-focused discussions/meetings; issues with almost all programs that need clinical space; opportunities for increased Adult Services/Long Term Care involvement.

The plan for continuing TCCP activities while Biel is on maternity leave:

Biel and Mitchell will make a master list of reminders/requests that will be sent out to partners.

The webpage content areas will be fleshed out. (Mitchell and Lynn James of HealthForce MN Communications will work on collecting the information.)

The TCCP webpage is being revamped. The content development is an ongoing project.

The web developers are working on the new Advanced Practice Providers software.

The Spring/Summer 2014 requests should be entered by the end of July. Any small changes during Biel's leave will be taken care of by Mitchell.

Orientation materials on the TCCP website are in the process of being updated.

Transition Plan – the WSU business office is taking care of the new fees work.

MnSCU transition plan – Jane Foote and Valerie DeFor are working on this.

Biel will be back full time in November. She will be doing some checking in during September and October.

IV. Re-order StudentLink Search Result Data

There is an issue with clinical partners entering their decisions in StudentLink. It is necessary to scroll over to see all the information for each entry, and when a decision is entered, the screen reloads back to the left side, so the partners have to keep scrolling over. Biel asked the programmer to look into reducing the column size, but it turned out that would be expensive to program. Instead, the order the columns are in can be changed so that the most important information appears first.

Existing Order	Proposed Order
1. ID	1. ID
2. Decision	2. Decision
3. Status	3. Status
4. Req Type	4. School
5. School	5. Req Type
6. Program	6. Rotation
7. Syst/Area	7. Unit
8. Term	8. St Date
9. Year	9. Ed Date
10. Clinical Site	10. Day of Wk
11. Unit	...
12. Exp Type	
13. Rotation	

The group agreed that would be very helpful for the clinical partners, because many of them aren't familiar with Excel, so they are less likely to export their data than the education partners.

It was asked whether the white space at the bottom of the screen could be reduced so that more request rows are visible. Biel will check with the programmer to see if that's an easy change to make.

The group agreed that they would like to go ahead with the column re-organization. Biel will send an email to the clinical partners with the new column order to make sure it looks right to them.

V. TCCP Transition Plan

Question from Biel: When there's a big change such as a partner dropping out, the fees will change. For example, if a school does not have placements at Children's next year, their fees will drop. Should they pay for the last year's approvals, or what they will be next year? Which level will they be in?

Discussion:

TCCP has to pick a date and charge everyone according to that date. If they have fewer placements next year, their next bill will be lower.

A partner can submit a request in writing if they think they should have an exception. Then the steering committee can make a decision on their request.

Another factor is, if they lose placements at one hospital, won't they try to replace those placements at other clinical sites? So their number of placements may not drop as much as expected.

The question was asked whether partners are paying in advance for next year, or paying for the previous year ("services rendered"). If a program closes next year, do they get charged for what happened this year? The institution would still have to pay even if the program no longer existed.

The contracts have specific dates of service that should answer the question. It was brought up that in the future a clause could be added to the effect of "If your circumstances change dramatically, the fees will be based on..."

Budget

Biel presented budget information:

Currently, we expect to bring in \$289,800.

Staffing is different from expected. We have 1.5 people instead of 2 full time people. Costs have decreased.

We need to add more to the technology budget for next year. StudentLink maintenance and enhancements cost more than expected.

For the Advanced Practice Providers, the website was budgeted for \$50,000, but it will cost \$75,000. In the future, we need to allocate more money to that area.

As TCCP grows, more staff will need to be added, especially if a new type of program comes online.

There is a possibility for a new grant; the TAACCCT Grant. This would provide funding for a staff person to build Older Adult Services (OAS) into TCCP. We'll know in September if it will be awarded. This would cover for OAS partners for three years. Some of the funds would go to TCCP because the group will have to do part of the work.

The portion of the grant going to TCCP would not just be community college students – it would be anyone in OAS.

In the next meeting, the group will do strategic planning – whether to add new areas, new partners.

Future expansions:

Mayo and Essentia are planned expansions and we're working on Regions.

Question from Biel – are there any other people we should be talking to? Answers: VA Hospital, Gillette, Winona Health and Northfield.

VI. Advanced Practice Providers TCCP Workgroup

Biel presented the Advanced Practice Providers Workgroup's progress.

The Advanced Practice Providers will have a new software application and a new informational/promotional website.

It became clear that having a separate site for them was too confusing, so there will be one TCCP website with an arm for the Advanced Practice Providers. The workgroup and TCCP staff are developing the content, and then will set up the organization of the site and build it.

Two models were looked at: American Medical Systems (<http://www.americanmedicalsystems.com>), and Kaiser (kaiserpermanente.org). AMS has good "buckets" for information.

The current TCCP site was looked at to see which pages are used the most, and what needs to be added. This information will be included in the new site outline.

It was suggested that in the Organization Partners area, instructions for what you do once you become a new partner should be added. (How to let your educational partners know you've joined, etc. – perhaps a simple checklist.)

Toolbox area:

Biel asked about what the new software program should be named; should it also be called 'StudentLink?' The names could be, for example, 'StudentLink – Advanced Practice Providers' and 'StudentLink – pre-licensure.'

The group agreed that it would be a good idea to use the StudentLink name for all the software, with the group names following afterward.

It was discussed what the group names should be, and it was decided they would be 'StudentLink – Advanced Practice Providers' and 'StudentLink – Nursing.'

The group names can be changed later if new kinds of programs join TCCP and it is decided that they'll use one of the existing software programs.

Clinical Preparation area:

This is the area for orientation/informational materials for students and faculty. Most of the information will be the same for both, but faculty may have addition information or details.

It was suggested that the headings be the same for the different systems so there is consistency.

Preceptors area:

There will be some pre-licensure information in this section but it will mostly be for Advanced Practice Providers.

This section will include a lot of general and Best Practices information. There will be links to existing sites and existing information.

There will be a “promotional resources” section with information for recruiting new preceptors.

There will be a data collection section – if someone is interested in being a preceptor, they can put the information here, and we can send that information out to the partners.

Schools area:

This area will mostly be links to the school sites.

For the pre-licensure area there will be a new subgroup to talk about what content should be included.

Content for the site will be collected while E. Biel is on maternity leave. The site will go up during the spring of 2014.

New Advanced Practice Provider Scheduling Software

The new Advanced Practice Provider software will start at a homepage then the Search page will be a pop-up window, because that will load faster. There will be an Administrator home for administrative functions. The programmers are currently working on the Administrator page. After that is completed, the web developer will begin working on making a new placement request, which is the most difficult part of the programming. When Biel returns from maternity leave, she will have a draft of the request procedure to look at.

Education partners will be entering most of the data/requests. In the new software they will be able to enter multiple new requests at one time instead of doing them one at a time.

The question was asked: can schools put in all of their placements, not just the ones for TCCP clinical partners? The answer is “yes.” The new system can track all of their students. There will be a separate “tracking feature” and “request feature.” When the new software launches, the only clinical partners will likely use the scheduling features will be Essentia and Fairview, because they already have their procedures organized. More partners will be added this effort moves forward.

Timeline:

November 12th, there will be a final draft review with the Advanced Practice Providers workgroup. At that meeting the website content will be finalized. There will be an advanced draft of the software to look at before it goes live.

It still has to be decided who will test the new software, and how the testing will be done. The goal is to have the software go live in January, 2014. At first, the system will mostly track placements.

The new software will be password protected. Because of FERPA regulations, the TCCP administrators will not know the passwords for the new Advanced Practice Provider software. Their rules say that there can't be a master list of passwords for systems that contain student identifying information. The passwords for the two different StudentLink systems will be separate.

The Physician Assistants requested membership in the Advisory Committee and the Chair Committee.

The group discussed, and agreed it makes sense to have Physician Assistant representation on the Advisory Committee.

For the Chair Committee, the group agreed that new members shouldn't be added every time TCCP adds a new program or the committee would get too large. Right now it's two clinical partners and two education partners, which ensures equal representation. The current goal of the makeup of the Chair Committee is to have both schools and clinics represented and to include the largest systems. This committee only does initial vetting so that the Advisory Committee doesn't have to address every single issue that might come up. Any partner can ask to have anything added to the Advisory Committee agenda – the Chair group doesn't decide what will be addressed exclusively. The Chair representatives are also elected by the Advisory group. It was agreed that an additional Physician Assistant (PA) representative should not be added to the Chair Committee. Being on the Advisory Committee will give them full representation.

The question was asked: Who is invited to the Advisory Committee meetings?

Two members have left, a PA representative will be added, and the MACN representative will be changing. Jeanine Gangeness will be the new MACN representative.

The group also decided to invite a Minnesota Hospital Association member to the meetings for the purposes of sharing TCCP information with industry.

The Advisory Committee also strives to have representatives from all different areas of the organization: private/public, large/small, metro/out state, etc.

The committee membership will have to be addressed regularly as the makeup of TCCP changes.

It was suggested that since Bethel and St. Kate's already have representatives in the committee, that the new PA representative should be invited from Augsburg. It would also be helpful to have Augsburg represent the PAs since they have the most long-standing program.

Something TCCP will have to address: How to start getting the clinical sites to use StudentLink for Advanced Practice Providers.

How will we find out that preceptor experiences are happening? At Fairview, the process is centralized. There is one person who says "approved/denied." This isn't the case at other clinical sites. For example, a doctor could agree to precept a student, and no one else would know that it was happening. Some schools tell their students to go out and find their own placements.

Currently, the plan is to build it, and then figure out exactly how to use it. When we have some of the schools' requests in the system, and can see where their students are, it will be the first step towards closing the information gap. Working with the Minnesota Hospital Association may help with this process.

Biel asked that members continue to think about other ways to address this issue.

VII. Wrap-Up

Upcoming meetings:

October 29th: Chair Strategic Planning meeting.

November 12th: Advanced Practice Providers meeting.

The next Advisory Committee meeting will be scheduled in early December, possibly the week of December 2nd - 6th.

During November, TCCP will work on expansions to Essentia/Mayo/HealthPartners/Winona Health/Northfield

VIII. Adjourn

Minutes Prepared By: Judith Mitchell, TCCP Assistant

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