

Local health-care organizations readjust to better cater to patients

**[Patrick Garmoe](#) Duluth News Tribune
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Men and women slowly saunter into a small meeting room at Superior-Health Center's Proctor clinic.

The record player speaker crackles with big band tunes as exercises commence.

Every Tuesday and Friday morning, 12 seniors stop by to practice a series of exercises — from volleying balloons to holding up their feet while sitting — designed to strengthen muscles that help them balance.



Patricia Klitsch (from left), 63, of Proctor; Delores Senarighi, 74, of Hermantown; and Marge Youngren, 77, of Hermantown participate in a balance class at SuperiorHealth Center Clinic in Proctor. BELOW: Senarighi and Howard Jacobs, 87, of Duluth volley a balloon back and forth during the class, which is one of many initiatives of SuperiorHealth Center to make health care more patient-centered. [Clint Austin / News Tribune]


Most say they definitely have seen results.

“I had some bad falls,” said Ted Barker, 85, of Duluth. Since joining the year-old class, the lanky man's gait is straight and steady, and he hasn't fallen.

“I feel I'm much better off,” Barker said. “This is a great thing.”

The class is part of a grander shift at the clinic to become more patient-friendly.

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its Two Harbors clinic, though center officials say it will continue operating under new management.

In the past, these Duluth-area residents would have had to individually hire a physical therapist, or be given a worksheet and told to practice at home.

In addition to this class, over the summer and fall SuperiorHealth Center will move its Piedmont Avenue clinic to the Lakewalk building at 1500 London Road. It intends to sell

“We wanted to be a little more centrally located,” said Diane Holliday-Welsh, vice president of Care Delivery Operations for SuperiorHealth Center, which is owned by Duluth-based nonprofit FirstSolutions.

But the moves are about more than just location and space.

At the downtown Duluth and Proctor clinics, patients will have a □doctor-led care team to help walk them through a visit or procedure.

Instead of just seeing a physician, a patient might see multiple health professionals during one appointment.

“You might see a nurse practitioner. You might see a dietician,” Holliday-Welsh said. Sometimes an appointment might simply be with an occupational therapist, if that’s all that is needed.

In March SuperiorHealth Center launched a program for people coping with depression that, unlike traditional treatment, employs a team approach and care managers who regularly check up on patients.

Often discussed, rarely practiced:

SuperiorHealth Center wants to practice what health-care experts describe as patient-centered care. More narrowly defined, patient-centered care applies to health-care agencies where procedures include staff members meeting in teams with patients, increased tracking of patient progress between appointments, and working with patients to improve overall health instead of only the latest ailment.

While the concept is often bandied about, actual applications of it have lagged, experts say.

“This might be the first local clinic that’s actually implementing it, instead of talking about it,” said Jennifer Schultz, an associate professor of economics at the University of Minnesota Duluth.

Jill Klingner, assistant professor of health-care management at UMD, meanwhile, said the model is easier to adopt in chronic care situations, like for patients with multiple sclerosis, where generally everyone requires the same kind of treatment. With primary care, needs and ages vary radically, so it’s hard to adopt these ideas, Klingner said.

Other local hospitals and clinics are making inroads as well in the effort to become more patient-friendly.

Other efforts

At SMDC Health System, a pilot project began a month ago in the internal medicine department to have patients with chronic diseases, such as diabetes or heart disease, get their routine tests done in advance of their doctor’s visit.

Normally, a patient meets with the doctor, and then tests are conducted. So there often is no opportunity to discuss results with the doctor during the appointment.

“It’s a more valuable visit for the patient,” Dr. James Jorgenson, section chairman of the internal medicine department at the Duluth Clinic, said of the switch.

A new electronic medical records system that includes built-in scheduling functions makes it easier to track patient appointments and get lab work scheduled and done ahead of time, he said.

Hospitals also are opening small clinics in retail stores, like the one St. Luke's opened in Cub Foods in January, to make care convenient. Early reports from St. Luke's officials are that business there has been brisk.

Lifelong health

Officials at both SMDC Health System and SuperiorHealth Center said their new methods are built around the notion of working with patients to improve their overall health, as opposed to doctors simply issuing edicts to quit smoking or take a certain drug to overcome an ailment.

"It really is involving the patient so much more," Holliday-Welsh said.

The patient works with a health coach not just to recover from today's ailment but improve overall health.

The goal is to get people to view long-term health like they do financial planning for retirement, health care officials said.

"We want to talk to you about your goals," Holliday-Welsh said.

Profit motive

While in some ways this might take more staff time, considering potentially more meetings with patients, it should save money in the long run, Holliday-Welsh said, because of falls that don't happen, and people who don't get sick as often.

The savings from preventing a single fall that causes an arm fracture adds up to \$22,010, according to SuperiorHealth Center's figures. But providing the balancing class costs \$1,248 a year per person. In this initial pilot class, the clinic is not charging patients for the service.

In the short run, patient-centered care isn't necessarily going to prove more profitable, Schultz said. The payment system still is geared to function more on individual appointments to deal with specific problems, not a structure that encourages more frequent visits for lifelong care.

"The payment system has not caught up with the innovations," Schultz said. "If they're making their patients healthier, they don't get reimbursed for that," Schultz said.

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