About ICSI

The Institute for Clinical Systems Improvement (ICSI) is an independent, non-profit health care improvement organization of more than 50 member medical groups and hospitals, sponsored by three non-profit health plans: HealthPartners, Medica, and UCare. We tackle some of our region’s most complex health and health care system problems in pursuit of the Triple Aim – better care, better health, and lower cost. We believe this work requires dedicated collaboration to arrive at the best solutions. Our members, sponsors, and partners depend on us to scout the landscape, identify best practices, innovate, and act as a catalyst to help them prepare for what’s ahead – with the urgency such changes demand.

Who Should Attend

This conference will be beneficial for anyone interested in transforming health care and improving health in the community. Specifically:

- Stakeholders involved in transforming health care and improving health in the community
- Medical group and hospital senior executives, administrators and medical directors
- Clinicians, including primary and specialty care physicians, behavioral health specialists, nurses, care managers and others
- Quality improvement and quality assurance management staff
- HIT/EHR personnel
- Health plan executives
- Policymakers and health educators
- Community partners involved with patient transitions across the care continuum
- Other stakeholders in health care and health, including employers, public health officials, educators, patients, citizen advocacy groups and health care media

Objectives

At the conclusion of the Colloquium, participants should be able to:

- Assess the new and evolving teams and teamwork needed, both inside of health care and reaching outward beyond our walls, to meet the coming shift to value-based payment systems and achieve the Triple Aim of better care, better health, and lower costs.
- Recognize the importance of the community, including the central role of the patient, to achieving better health.
- Discuss the evolving value-based care and payment models, on both national and local levels, as well as the changing roles and essential new skills needed to prevent burnout and thrive as leaders in today’s challenging health care environment.
- Identify innovative approaches to the design and function of care teams, especially within primary care, that could be implemented in the attendee’s health care organization.

Stay Connected

ICSI offers a mobile app to make it easy for attendees to access session information and more on a variety of devices. A standard web version will also be available for those without mobile access. The app will be available shortly before the Colloquium for those who are registered; please watch your e-mail and ICSI’s website for download information.
**Pre-Conference Workshop**

**Transform Work Relationships Right Now! A Leadership Practice**

**Monday, May 8**  
1:00 – 4:30 p.m.

**Neil Baker, MD**

The highest financial, quality, and safety results depend on a team culture which fosters empowerment and learning.

But, even for the most experienced leaders, shaping such a culture in the midst of work can be quite challenging. No matter how successful an organization has been, the inherent stress and complexity of the health care environment inevitably evoke interpersonal tension and resistance. Leaders are faced with the difficult tasks of simultaneously managing their own reactions, standing firm on decisions, and engaging others with individual consideration.

The challenge for leaders in continuously shaping and sustaining the desired culture is not primarily about skills but about the way our brains are hard-wired to respond to stress. Everyone can fall into blind spots and reactions which inadvertently contribute to relational problems.

This workshop offers evidence-informed strategies to enhance self-awareness and tap into your highest skills and values when you most need them – right now! Case situations will be used to practice thinking through how to transform work relationships as you work toward results. While not easy, this practice enables more clarity, confidence, and agility in-the-moment.

Designed primarily for physician, administrative, nursing, and quality leaders, but open to all health care professionals.

The agenda will include:

- Why high quality work relationships are crucial for the best results – the evidence.
- Why relational problems are so common at work – the neuroscience.
- How to identify unproductive reactivity to stress in yourself and others in-the-moment.
- Strategies and tools to shift from reactivity to creativity.

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**Keynote Speakers**

**Transforming Lives: The Art of Person-Centered Care**

**Tuesday, May 9**  
8:50 – 9:55 a.m.

**Allison Massari**

Allison Massari will kick off the conference by taking us on a journey, offering tools to rise above any obstacle, and find peace, purpose, and happiness despite turbulent times. As the survivor of two life-threatening car accidents, Massari shares her story of absolute loss, to forgiveness and understanding. She illuminates how compassionate, patient-centered care can build an expansive, life-changing foundation for healing, for both patient and provider.

With sensitivity and compassion born from her experiences, Massari shines light on the provider’s immense value to a patient who is suffering, reinvigorating employees and helping heal health care burnout in the workplace. As an advocate for both patient and health care provider, Massari’s powerful understanding of the essential nature of patient-centered care fortifies audience members, offering applicable tools for managing change, adversity, and the everyday challenges of being human.

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**Revitalizing Primary Care through Relational Leadership**

**Wednesday, May 10**  
8:45 – 9:50 a.m.

**Andrew Morris-Singer, MD**

Dr. Andrew Morris-Singer, a primary care physician, advocate and founder of the nonprofit Primary Care Progress, will discuss strategies for achieving the true interdependent and high performing care teams that are increasingly necessary in our rapidly evolving health systems. Drawing on insights from both health care and grassroots organizing, Dr. Morris-Singer will highlight some of the key relational leadership practices essential to achieving both success of teams and satisfaction of team members, and how they can act as a powerful complement to the more structural and process interventions increasingly being utilized in contemporary quality improvement efforts.

Audience members will walk away inspired with a new set of ideas for how to transform care and revitalize themselves and colleagues at the same time.
**Tuesday, May 9**

**Schedule of Events**

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>7:30 - 8:30 a.m.</td>
<td>Continental Breakfast</td>
</tr>
<tr>
<td>8:30 - 8:50 a.m.</td>
<td>Welcome</td>
</tr>
<tr>
<td>8:50 - 9:55 a.m.</td>
<td>Keynote Address</td>
</tr>
<tr>
<td>9:55 - 10:15 a.m.</td>
<td>Break</td>
</tr>
<tr>
<td>10:15 - 11:10 a.m.</td>
<td>Breakout Session 1</td>
</tr>
</tbody>
</table>

**Transforming Lives: The Art of Person-Centered Care**

Allison Massari

**Team Approaches to Implementing Tobacco Health Systems Change**

Tammy Didion, BS, RD, Whittier Clinic Practice Manager, Hennepin County Medical Center, Minneapolis, MN; Jill Doberstein, BAS, MAPL, CTTS, Tobacco Treatment Integration Specialist, Essentia Health, Duluth, MN; and John Schmitz, MD, Medical Director for Behavioral Health Services, CentraCare Health, St. Cloud, MN

Health care provider organizations play a key role in addressing tobacco use by ensuring tobacco dependence treatment is fully integrated into health care delivery. Teams are essential to the success of this work. This presentation will highlight tobacco systems change initiatives funded by ClearWay MinnesotaSM. Panelists represent two large rural integrated health systems and a large urban health system. Each panelist will discuss their approach to systems change, including:

- Innovative ways teams undertook this work;
- Example work flows and standard operating procedures; and
- Electronic health record modifications.

By the end of this session, participants will be able to:

1) Identify systems change strategies to assess and address tobacco.

2) Identify ways to take a team approach to improve care delivery processes for addressing tobacco use.

**Community Engagement: The Power of Story– Part 1**

Dave Ellis, Founder/CEO, Dave Ellis Consulting, LLC, Minneapolis, MN

Join us in a conversation with community members who will share their stories of engagement with the health care community. We will explore the questions of:

1. Who are we and why are we really here?
2. What causes lack of follow-up with treatment?
3. New possibilities and opportunities for engagement.
4. Do my mental models get in the way?

**Roadmap to Provider Wellness**

Elizabeth Goelz, MD, Internal Medicine Physician; and Sara Poplau, BA, Assistant Director, Hennepin County Medical Center’s Office of Professional Worklife, Minneapolis, MN

This session will focus on practices that have worked at Hennepin County Medical Center and are being used across the country. We will provide background research on the subject, possible interventions and outcomes, and ways to partner for organizational change.

At the end of the session, participants will be able to:

1. List known methods to prevent burnout.
2. Identify ways to implement a wellness program at their institution.
3. Develop a network of like-minded wellness colleagues at their institution to support provider wellness.
Tuesday, May 9

11:20 a.m. - 12:15 p.m.  Breakout Session 2

**WHEN MORE IS MORE**
*Ilene Moore, MD, Medical Director; and Sara Zumbado, RN, Medical Clinic Manager, Southside Community Health Services, Minneapolis, MN*

The presenters discuss their clinic’s change to an all 30-minute appointment model for primary care medical visits, including the PDSA cycle they used as well as operational and quality outcomes. The presenters will highlight how organizational culture and leadership impacts change and quality improvement.

Learning objectives for the audience include:

- Identifying how a single appointment length increases efficiency in scheduling.
- Understanding how an extended appointment time can increase access to providers, resources, and enabling services.
- Understanding the operational and cultural commitment needed to implement organizational change.

**COMMUNITY ENGAGEMENT: THE POWER OF STORY—PART 2**
*Dave Ellis, Founder/CEO, Dave Ellis Consulting, LLC, Minneapolis, MN*

Join us in a conversation with community members who will share their stories of engagement with the health care community. Explore the questions of:

1. Who are we and why are we really here?
2. What causes lack of follow-up with treatment?
3. New possibilities and opportunities for engagement.
4. Do my mental models get in the way?

12:15 - 1:15 p.m.  Lunch

1:15 - 2:10 p.m.  Breakout Session 3

**POWER UP YOUR CARE MANAGEMENT**
*Tani Hemmila, MS, BSW, Project Manager/Health Care Consultant, Institute for Clinical Systems Improvement, Bloomington, MN; Todd Hinnenkamp, RN, Ambulatory Care RN Supervisor and Depression Care Management RN, Essentia Health, Hermantown, MN; and Jeyn Monkman, MA, BSN, NE-BC, Project Manager/Health Care Consultant, Institute for Clinical Systems Improvement, Bloomington, MN*

Minnesota health care systems have been practicing care management for years – now how can you better serve patients with complex needs, increasingly necessary as population outcomes become important for value-based payment? Drawing in part from COMPASS, DIAMOND, and various other care management experiences, we’ll discuss five key components to a highly effective care management program and share practical tips and tools.

**IMPACT OF LAY HEALTH CARE WORKERS IN PALLIATIVE CARE**
*Vivian Anugwom, MS, CHES, LifeCourse Program Manager; Paige Bingham, MBA, Director of LifeCourse, Allina Health, Minneapolis, MN; and Paul Erickson, MD, MPH, Medical Director, NorthPoint Health & Wellness Center, Minneapolis, MN*

A small portion of Medicare beneficiaries account for half of Medicare spending; 40% of this is attributable to persistent high spending on serious illness. These high costs are coupled with a shrinking supply of specialty-trained palliative clinicians.

LifeCourse is an innovative, upstream palliative care model that addresses this increased demand and workforce crisis by integrating lay health care workers into the care team. The learning objectives of this session are to:

(1) highlight the model’s impact on quality of life, experience and utilization outcomes and
(2) discuss the practical strategies for implementation within traditional health care delivery systems and urban community-based clinics.
**New Approaches to Measuring Quality for Complex Populations**
Erin Giovannetti, PhD, Senior Research Scientist, National Committee for Quality Assurance, Washington, DC

As the movement toward person-centered care grows, there is an increasing recognition of the need for measures which address what is important and of value to the recipients of care. This session will explore the innovative approaches being considered in addressing care for the complex elderly as part of the movement toward patient-reported outcomes.

2:10 - 2:30 p.m. Break

2:30 - 3:25 p.m. Breakout Session 4

**The Community Care Network:** Partnering for Success in Enhanced High-Risk Patient Care
Cassie Boddy, MSW, LGSW, CAPSW, Community Care Network Social Worker; and Paula Philipps, BSN, RN, Community Care Network RN, Winona Health, Winona, MN

A community panel presentation and dialogue on the why and how of successful community engagement.

**Connecting Health Care Providers and Community Based Organizations**
Laurence Gross, Chief Executive Officer, Southern Maine Agency on Aging, Scarborough, ME; and Ted Rooney, RN, MPH, Principal, Health and Work Outcomes, Brunswick, ME

Payment reform, evolving measurement, and increasing recognition of the social determinants of health are creating new opportunities for providers to deliver better care for seniors and those with chronic illness and disabilities.

Learning Objectives:

1. Understand how payment reform and recognition of social determinants of health are creating new opportunities for providers to successfully deliver better care.
2. Understand how evolving measurement will help further these efforts.
3. Learn how health care providers and community-based organizations are working together in Maine and elsewhere to improve care for communities.

**Multidisciplinary Approaches to Pain and Opioid Management**
Joseph Bianco, MD, Director of Primary Care, Essentia Health, Ely, MN; Charles Reznikoff, MD, Staff Doctor, Hennepin County Medical Center, Minneapolis, MN; and David Thorson, MD, Family Medicine Physician, Entira Family Physicians, White Bear Lake, MN

This panel of work group members for ICSI’s new Pain guideline will present examples of how they have incorporated a team approach within their settings to implement the ICSI guideline, *Pain: Assessment, Non-Opioid Treatment Approaches and Opioid Management*.

Learning Objectives:

1. Understand the components of effective non-opioid approaches to pain management in adults with non-cancer pain.
2. Learn the optimal use of a multidisciplinary team approach to management of patients with chronic pain.
3. Comprehend new approaches for managing a patient who is already on opioids for chronic pain.

3:35 - 4:30 p.m. Breakout Session 5

**Improving Health Outcomes through Trauma Informed Care**
Michael Thomas, PsyD, LP, Senior Clinical Psychologist, NorthPoint Health and Wellness Center, Minneapolis, MN

Psychological trauma is increasingly recognized as a widespread public health problem deeply impacting the wellness of those served by health professionals. While the Adverse Childhood Experiences (ACE) study has illuminated the prevalence and impact of adversity on health, providers struggle to use this information to inform clinical practice and improve patient health outcomes.

Participants attending this lively and thought-provoking presentation will:

1) Learn about the Adverse Childhood Experiences study.
2) Gain an in-depth understanding of the neurophysiology of traumatic stress.
3) Consider valuable strategies to implement trauma informed care practices to improve patient health outcomes.
The Buzz: Patients and Clinicians on the Same Team – Let’s Talk!

Panel Participants: Bill Adams, Lynn Everling, Foua-Choua Khang, Amanda Matchett, Valerie Overton, DNP, FNP-BC, and Marguerita Scott

Moderators: Rochelle Hayes, BA, Systems Improvement Coordinator; Jeyn Monkman, MA, BSN, NE-BC, Project Manager/Health Care Consultant; Jan Schuerman, BS, MBA, Senior Director, Institute for Clinical Systems Improvement, Bloomington, MN

Do you ever get the impression that patient and clinician communication wires are getting crossed? What do patients and clinicians want from each other, anyway? On “The Buzz,” the stage is set for a panel of patients and clinicians to truly listen to and learn from one another.

Learn how you can have transparency through honest conversations. Listen and observe what can happen when you include patients in everyday care processes. Join us and begin to see how your organization can embrace the role of the patient as central to your care team.

Learning Objectives:

1. Identify approaches that promote transparent conversations between patients and clinicians.
2. Learn new ways your organization can involve the patient as a central player on your care team.

Health Plan Promotion of Shared Decision-Making in California

Marcus Thygeson, MD, MPH, Senior Vice President, Chief Health Officer and Interim Chief Medical Officer, Care 1st Health Plan, Blue Shield of California, San Francisco, CA

Shared decision-making is an evidence-based method for helping providers and patients make preference-based medical decisions, but it has been very difficult to implement in practice. Dr. Thygeson will describe several initiatives implemented by Blue Shield of California to promote the adoption of shared decision-making using utilization management and measurement of decision process quality care.

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Priming the Pump: Activate the Team, Accelerate Improvement

Sarah Horst Evans, MA, Project Manager/Health Care Consultant; and Tani Hemmila, MS, BSW, Project Manager/Health Care Consultant, Institute for Clinical Systems Improvement, Bloomington, MN

Why do most quality improvement (QI) efforts fail? Too often, the importance of teaming with and engaging those affected by the change is dismissed or minimized. In the SIM Team QI Learning Community, led by the Institute for Clinical Systems Improvement, five rural organizations in West Central Minnesota revitalized change efforts by focusing first on teamwork skills and equipping everyone with simple QI tools that can be applied by anyone to any problem. This session will discuss lessons learned from this successful program and show you the tools participants used to infuse a spirit of collaboration into their work.

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Revitalizing Primary Care through Relational Leadership

Andrew Morris-Singer, MD

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Patient Centered Medical Homes and The Care of Older Adults

Robert Schreiber, MD, AGSF, Medical Director of Evidence-Based Programs, Hebrew SeniorLife, Roslindale, MA

This session will review a report developed by an interdisciplinary group of health care professionals outlining a roadmap for the way care for older adults can be delivered through the Patient Centered Medical Home (PCMH). It explains the gaps in the care for older adults, gives approaches for managing these gaps and highlights steps by which PCMHs can proceed to help transform the care provided to older adults. The role of community based organizations will be highlighted as they are integral to this process. The report provides a valuable perspective and good guidance for
practices that are looking to improve upon this coordination role for the older adult population.

Learning Objectives:

1. Discuss the White Paper and how to utilize this tool to develop approaches to meet the gaps in care for older adults.
2. Discuss the role of Community Based Organizations and the value they have to PCMHs in the improvement of care for older adults involving LTSS, care transitions and patient activation.
3. Discuss examples of how Area Agencies on Aging are working with PCMHs to improve the care delivered to older adults.

COMMUNITY TEAM: THE JOURNEY TO ‘FEELING GOOD MN’

Jodi Gertken, BS, Director of Wellness; George Morris, MD, Physician Vice President, Performance Excellence; and David Tilstra, MD, MBA, CPE, President, CentraCare Health, St. Cloud, MN

CentraCare Health is using the power of community to improve health and wellness in Central Minnesota. The efforts began over 10 years ago and have led to the development of Feeling Good MN and multiple community health efforts. Community focused policy, system and environment changes are a cost-effective, sustainable solution to help everyone live better. These initiatives can help people live healthier, be more productive, reduce health care costs, and are part of our strategic goals.

This presentation will provide an overview of the journey CentraCare Health has been leading to improve community health, reduce childhood obesity, and prevent tobacco use. Together with our community partners, CentraCare Health is creating healthier communities throughout Minnesota by collectively working to make healthy options automatic, affordable and accessible for everyone.

Learning Objectives:

1. Understand the basics of community engagement to advance health outcomes.
2. Recognize how to integrate a diverse group of partners to address complex community health issues.
3. Utilize examples/tools provided to apply lessons learned.

TRANSFORMING RELATIONAL BARRIERS TO CHANGE: A LEADERSHIP PRACTICE

Neil Baker, MD, Principal, Neil Baker Consulting and Coaching, Bainbridge Island, WA

High-performing teamwork depends on open, honest conversations with the safety to express concerns and disagreement. But, such conversations are very hard to sustain within the stress and complexity of health care. Even very successful leaders and teams can fall into problematic ways of relating and communicating. Participants will learn why this is so common, a personal practice for monitoring and transforming such reactions, and principles for effective conversations in tough situations. A condensed version of Monday’s workshop.

Learning Objectives:

- Describe the neuroscience behind problematic reactions to stress.
- Explain a practice to monitor oneself and move out of unproductive reactions.
- Identify principles to make conversations less vulnerable to stress.

11:15 a.m. - 12:10 p.m. Breakout Session 7

HOW ONE PRIMARY CARE PRACTICE IS TRANSFORMING HOW THEY WORK

Lara Lunde, MD, Chair of Family Medicine, Essentia Health – Moorhead Clinic, Moorhead, MN; and Julia Murphy, MSc, Director, Dissemination, Peterson Center on Healthcare, New York, NY

The Essentia Health-Moorhead Clinic is implementing a high-performance model of care with support from their health system leadership, the Peterson Center on Healthcare, the Institute for Clinical Systems Improvement, and a group of national experts in primary care.

Using an evidence-based curriculum developed by the Center, the practice is surfacing its own goals and learning how to apply improvement methodologies to transform how they work. The clinic is one of three practices participating in this initiative and is providing the Center with a better understanding of how to sequence and refine key elements of the model so that it is more efficient and adaptable to other practices.

Learning Objectives:

- Describe the process that engages the workforce in practice transformation.
- Identify ways to increase capacity and synergy among providers, care teams and system leadership.
- Share lessons learned from implementing foundational modules.
M Health Community Network: Implementing Coordinated Care for IPV Survivors

Lynne Fiscus, MD, Assistant Professor and Executive Medical Director of Ambulatory Care; Mary Logeais, MD, Assistant Professor, University of Minnesota School of Medicine, Minneapolis, MN; Lynette Renner, PhD, MSW, Associate Professor, University of Minnesota, St. Paul, MN; Lucille Rosario, MSW, LICSW, Clinical Director, MN CarePartner, St. Paul, MN; and Rebecca Shore, MSW, LICSW, Clinical Social Worker, Fairview Health Services, Minneapolis, MN

Intimate partner violence (IPV) is a significant public health concern with numerous health consequences. Recent clinical guidelines, as well as the Institute of Medicine’s focus on social determinants of health, suggest that health care providers should be routinely screening for IPV. This presentation will provide an overview of an organizational initiative to implement a community-coordinated approach to screening, response and referral across multi-specialty clinics for IPV survivors, with the aim of decreasing health care utilization, reducing victimization, improving health outcomes, and increasing provider knowledge – core tenants of the Triple Aim.

Learning Objectives:
- Better understand the background and scope of IPV and how it affects health.
- Gain insights about implementing large scale organizational quality initiatives focused on social determinants of health.
- Investigate new models of coordinated health care delivery with community-based partners.

Solving Wicked Problems Together

Laurie Bell, PT, MHA, Care Transformation Program Manager; Allyson Fortin, BAN, CCRN, PCCN, Charge RN; Jill Goring, APRN, CNS, Director of Nursing Practice, Education, and Research; Hilary Radtke, MBA, Senior Project Manager; and Cindy Tompkins, APRN, Critical Care APRN, Regions Hospital, St. Paul, MN

While dedicated innovation teams have become popular in health care, we are instead working to embed capacity for radical transformation across all roles in our organization. Interdisciplinary teams apply performance improvement for known best practice and utilize human-centered design to address more persistent challenges.

We propose that leveraging multidisciplinary expertise will result in more sustainable solutions to health care's wicked problems. This panel will discuss the shift from a culture of silos to empowered transformation. Attendees will learn why embedding process improvement and human-centered design strategies increases the ability to solve problems sustainably, anticipate challenges, and develop strategies for addressing them.

FUHN’s Journey with Minnesota’s Integrated Health Partnerships

Steven Knutson, Board Chair, Neighborhood FQHC Urban Health Network (FUHN), Minneapolis, MN; and Deanna Mills, MPH, Program Director, FQHC Urban Health Network (FUHN), Clearwater, MN

The Affordable Care Act put primary care in the center of health care reform. Federally Qualified Health Centers (FQHCs) comprise the nation’s largest primary care network, serving more than 24 million patients. In 2013, as the first safety net Accountable Care Organization (ACO) in the nation, Minnesota’s FQHC Urban Health Network (FUHN) had no blueprint to chart its course.

There is an incredible opportunity for FQHCs to improve care for vulnerable populations through data analytics, enhanced care coordination, and information technology conduits to other health care providers. Attendees will learn:
- Development of data analytics technology.
- Workforce training for team-based care and care coordination.
- Process improvement as a necessary component of clinical practice transformation.
- Patient engagement as a critical component, especially for those who experience health disparities.

An Emerging Network for Well-Care in Minnesota

Aaron Leppin, MD, MSc, Director, Healthcare Partnerships for the Healthy Living as You Age Initiative, Mayo Clinic, Rochester, MN; and Dawn Simonson, MPA, Executive Director, Metropolitan Area Agency on Aging, North St. Paul, MN

WellConnect implemented evidence-based practices across Minnesota using a community driven perspective.

Learning Objectives:
1. Be able to describe the outcome and cost benefits of evidence-based programs for disease management, falls prevention, and diabetes prevention.
2. Be familiar with a currently funded effort to organize a statewide, community-based network of these programs in Minnesota.
3. Know how to use this newly-developed, web-based technology to clinically integrate these programs and facilitate referrals.
Deep Community Engagement: Rapid City Collective Impact

Albert Linderman, PhD, CEO, Sagis Corporation, Rapid City, SD

Rapid City Collective Impact brings together nonprofits, government, business, faith communities, health care, and citizens to improve life and living in Rapid City. The city experiences many of the intractable problems communities everywhere face. We are addressing them using community based system dynamics. With our many stakeholders we created a dynamic model of key subsystems within the community. Action groups were formed and currently we are beginning several new initiatives. This session will:

1. Provide an overview of collective impact.
2. Describe our deep community engagement process.
3. Show how system dynamics models can be created.

2:05 - 2:15 p.m.    Break

2:15 - 3:10 p.m.    Closing Session

Alive & Kickin – Embrace the Power of Stories and Song

Closing the Colloquium like never before, experience the power of story, music and song with award-winning senior rock stars, Alive & Kickin. The group, 65-92 years young, exemplifies teamwork, and improving health beyond traditional walls. Prepare to be energized and inspired as you return to the important work of improving health in our communities!

3:10 - 3:30 p.m.    Gary’s Book Giveaway

Former ICSI staffer Gary Oftedahl’s annual list of must-read titles. You must be present to win!

Accreditation

This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint providership of HealthPartners Institute and the Institute for Clinical Systems Improvement. HealthPartners Institute is accredited by the ACCME to provide continuing medical education for physicians.

The Office of Continuing Medical Education, HealthPartners Institute, designates this live activity for a maximum of 14.75 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

American Academy of Family Physicians (AAFP)

Application for CME credit has been filed with the American Academy of Family Physicians. Determination of credit is pending.

Minnesota Board of Nursing

This program is designed to meet the Minnesota Board of Nursing requirements. It is the responsibility of each participant to determine if the program meets the criteria for licensure or recertification for their discipline.

Disclosure Policy

It is the policy of HealthPartners Institute to provide balance, independence, objectivity, and scientific rigor in all of its sponsored educational activities. All faculty, course directors, and planning committee members participating in sponsored programs and/or their spouse/partners are required to disclose to the audience any real or apparent conflict of interest related to the content of this activity. Disclosure information is reviewed in advance in order to manage and resolve any potential conflicts of interest, and shared with the audience prior to the activity's presentation.
GENERAL INFORMATION

COLLOQUIUM REGISTRATION
Includes access to all registration materials, sessions, continental breakfasts, lunches, and refreshment breaks. Onsite registration is available.

COLLOQUIUM REGISTRATION DESK HOURS
The Colloquium Registration Desk is located in the Northland Ballroom Pre-Function area.

Monday, May 8 .........................................................10:00 a.m. – 5:00 p.m.
Tuesday, May 9 .....................................................7:00 a.m. – 4:30 p.m.
Wednesday, May 10..............................................7:00 a.m. – 1:00 p.m.

CONTINENTAL BREAKFAST
A continental breakfast will be served in the Northland Ballroom Pre-Function area.

Tuesday, May 9 .....................................................7:30 a.m. – 8:30 a.m.
Wednesday, May 10..............................................7:00 a.m. – 8:30 a.m.

ACCOMMODATIONS
Minneapolis Marriott Northwest
7025 Northland Drive North
Brooklyn Park, MN 55428
(763) 536-8300

Discounted hotel rooms are available to ICSI attendees at the Minneapolis Marriott Northwest. A negotiated rate of $139 plus tax for a single/double room is available until April 17, 2017. Reservations received after April 17, 2017, will be accepted on a room and rate available basis.

Cancellations must be received 24 hours prior to arrival in order to avoid a charge for the first night's room and tax.

To make your reservations, click here or call (877) 303-1681.

PARKING
Complementary parking at the Minneapolis Marriott Northwest.

REGISTRATION CANCELLATIONS – DEADLINE: APRIL 22, 2017
Cancellations received after this date will not be honored.

There is no charge for transferring registration to another person at any time. Written notification of all registration transfers must be received by the Meeting Management Office.

TRAVEL
Travel arrangements, including air and ground, can be made through the Colloquium's Travel partner Travel One, at (952) 854-2551 or (800) 247-1311.

AIRPORT TRANSFER
Transportation to and from the Minneapolis/St. Paul Airport is available via Super Shuttle for approximately $33 per person each way with reservations. For reservations, book online at www.supershuttle.com or call (800) BLUEVAN.

ADA/DIETARY/SPECIAL REQUESTS
For equal and full enjoyment of the Colloquium, please specify any special requirements in the "Special Requests" area of the Colloquium registration form. Every effort will be made to accommodate your request.

RECOMMENDED ATTIRE
Business casual.

PROGRAM CHANGES
All information is subject to change without notice. Please utilize the conference mobile app to ensure you have the most current information.

For more information, visit the ICSI website at www.icsi.org or contact the ICSI Meeting Management Office at (952) 814-7060 or by e-mail at icsi@icsi.org.