



INTRODUCING THE NEW **PATIENT PORTAL**



Patient
Portal



Bluestone
Bridge

Bluestone now provides two different applications for patients and their families to take an active role in managing patient care: The **Bluestone Bridge** and the **Patient Portal**.

With the recent move to our new electronic health record system, patients and families have additional access to more information in their medical record through the **Patient Portal**.

If you have been using the Bluestone Bridge, you are familiar with it as the communication tool for exchanging messages with the Provider Teams. The new Patient Portal is a separate platform used to access pertinent health records. The differences in the Bluestone Bridge and the Patient Portal are described below:

Bluestone Bridge: Accessible to Patient and/or Registered Family Members

The Bridge is an easy-to-use, secure online communication tool allowing members of the patient's care team (family, nursing staff, Provider Team, etc.) to exchange medically relevant messages between regular visits. Registered family members receive a health update through the Bridge after every visit. Through the Bluestone Bridge, you are able to communicate directly with your provider team. Think of it as an ongoing conversation regarding patient care. Access to the Bridge is through the blue button in the upper right corner on the BluestoneMD.com website.

Patient Portal: Access available to Patient or patient's Designated Health Care Agent

The Patient Portal is a separate platform which allows additional access to personal health information. Think of the Patient Portal as access to past medical records. If you are the patient or the patient's designated health care agent you will be able to:

- Request prescription refills and referrals
- View your personal health record, including: Problem list, Medications, Allergies, Labs and Diagnostic test results, Health history, Visit summary
- Examine your current and past billing statements

Once you have been approved to access the Patient Portal, you will receive an email with log-in information. **Access to the Patient Portal is through the green button** in the upper right corner on the BluestoneMD.com website.

The form for registering for Bluestone Bridge and the Patient Portal can be found on our website www.BluestoneMD.com, under the Patients & Families tab > Bridge and Patient Portal.

If you have questions about using the Patient Portal or the Bluestone Bridge, please don't hesitate to call our desktop help number at 651-209-7761.

Bluestone Physician Services would like to welcome and introduce the following new providers to our teams



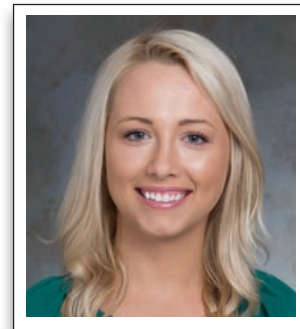
Dr. Laura Pattison

- Board-Certified, Family Medicine
- Family Practice Residency, University of Minnesota Medical Center, Minneapolis, MN
- Doctor of Medicine, University of Minnesota Medical School
- Bachelor of Arts, Carleton College, Northfield, MN

"It's important to me to take the time to build relationships with patients and their families. I strive to provide the kind of respectful, individualized, and compassionate care that I want for my own loved ones."

Sara Moehlenbrock, PMHNP, RN

- Certified Mental Health Nurse Practitioner
- Masters of Science, PMHNP, The College of St. Scholastica
- Bachelor of Science, Nursing, The College of St. Scholastica



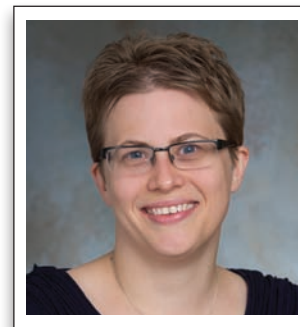
Vivian Akoh, CNP

- Certified Adult/Geriatric Nurse Practitioner
- Masters of Nursing, College of St. Catherine, Saint Paul, MN
- Bachelor of Science in Nursing, Metropolitan State University, MN

Stephanie Goese, CNP

- Certified Nurse Practitioner
- Doctorate of Nursing Practice Adult/Gerontological Nurse Practitioner, University of Minnesota
- Masters of Nursing Education, University of Minnesota
- Bachelor of Science in Nursing, Coe College, Cedar Rapids, IA

"I enjoy caring for patients and their families in their home environments. It allows me the ability to assess and treat each and every patient holistically."





Natalie Hinck, CNP

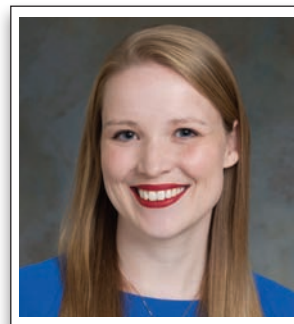
- Certified Nurse Practitioner
- Masters of Science in Adult/Gerontology Nurse Practitioner, University of Wisconsin-Eau Claire, Eau Claire, WI
- Bachelor of Science in Nursing, Edgewood College, Madison, WI

"I am privileged to provide residents with quality care in the comfort of their own homes. Also, I enjoy that the care model allows the voices of their family members to be heard and valued."

Carina Noecker, DNP CNP

- Certified Nurse Practitioner
- Doctorate of Nursing Practice Adult/Gerontological Nurse Practitioner, University of Minnesota
- Bachelor of Science in Nursing, University of Minnesota

"It is an honor to care for older adults and I enjoy hearing their stories. I strive to provide holistic care that promotes optimal health, independence, and overall quality of life."



A Message from the CEO...Dr. Stivland

Bluestone was started with the idea that if we could provide consistent, coordinated, high quality medical care to people where they lived, it would result in improved health for patients. After eight years, Medicare now agrees with that philosophy! Starting in January, Medicare is covering a program that recognizes the need for communication and organization of health care with its Chronic Care Management (CCM) program. The Bluestone model has always been to create a continual, collaborative care plan tailored to each patient's individual needs. With the federal CCM and Minnesota's Health Care (or Medical) Home programs, we will be able to offer an increase in services and communication options.

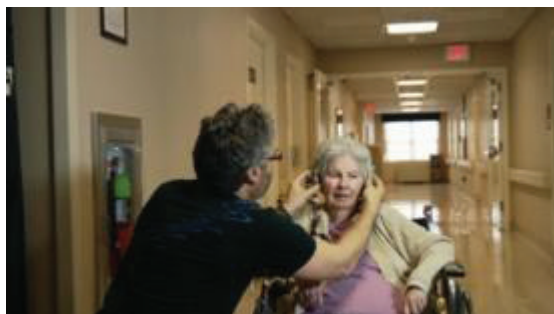
First, we have hired a Director of Clinical Services, Brenda Llambes, RN to lead our quality department; we will also be adding an LPN or CMA (certified medical assistant) to each provider team to further assist our patients and community staff with their needs.

Second, we are expanding our technology capacity. Families will soon have access to medical records and care plans on-line, and we are working hard to create direct interfaces with our communities' systems, lab results and hospital notes. You will be receiving more information on these programs, as they are launched. Please be sure to sign and return the needed consent forms. Feel free to call us with any questions. We are very excited about these projects as they will greatly aid us in providing the best possible care! Thank you for trusting us with the care of your family members and residents.

“ALIVE INSIDE”

Film Shows How Music Can Break Through the Fog of Dementia

Henry, a man living in an assisted living community, suffered from dementia for over a decade and rarely said a word to anyone—he barely even looked up from his lap, until Music & Memory set up an iPod program at his care facility. Henry’s joyful reaction to the music is amazing and moving. You can see the video clip of Henry at www.musicandmemory.org



Cohen says, “to allow them to express themselves, enjoy themselves and live again.” And he is determined to make this happen all over the country—he has already brought iPods into over 640 care communities in 45 states, and he aims to establish personalized music as a standard of care in all care facilities in the U.S.

Alive Inside, made in 2014 by filmmaker Michael Rossato-Bennett, documents the uncanny power of music to reawaken emotions and lost memories in people with dementia. Rossato-Bennett shadows Dan Cohen, a social worker and founder of the nonprofit Music & Memory, as he brings personalized music on iPods into nursing homes across the country. The transformation in emotion, awareness and memory shown in these elderly patients is quite amazing.

Music and memories become intertwined in our neural networks, according to Julene Johnson, a professor at the University of California, San Francisco’s Institute for Health and Aging. Movements, such as dancing, also often pair with our experience of music, which can facilitate memory formation. Even many years later, hearing the music can evoke memories of these long-past events.

As *Alive Inside* shows, music retains this power for many people with dementia. Researchers note that the brain areas that process and remember music are typically less damaged by dementia than other regions. It is speculated that this sparing may explain the dramatic phenomenon of people “coming back to life” while listening to music that had meaning for them in earlier years of their lives. In addition to reawakening memories, research and anecdotes have shown that music can soothe agitated patients and thus may avoid the need for antipsychotic drugs to help them calm down.

Dan Cohen, through Music & Memory, continues his mission of using music to help patients and their families and caregivers cope with dementia. “We need to use music to engage with people,”

Ecumen Parmly LifePointes in Chisago City, MN, one of the communities served by Bluestone, has been using personalized playlists with iPods for their residents with great response. Edsel’s Project started with help from Dianne Johnson, whose father Edsel lived at Parmly, and died in 2010 from Alzheimer’s dementia. Edsel was a wonderful tenor and loved music. Dianne saw the movie *ALIVE INSIDE: the story of music and memory* at the Sundance Film Festival in January 2014, inspiring her to donate \$2000.00 to get a music therapy program started at Parmly.

Caregiving staff at Parmly, as well as family caregivers, are trained in how to create and provide personalized playlists using iPods and related digital audio systems that enable those struggling with Alzheimer’s, dementia and other cognitive and physical challenges to reconnect with the world through music-triggered memories.

For more information on this type of program, visit www.musicandmemory.org.



What About Hospice Care?

By Dr. Logan



This question arises quite often during our daily rounds. Despite increased public awareness of hospice, many patients and families have questions about how hospice can be helpful, and when it is time to consider seeking out that additional support.

Hospice is a relatively new philosophy of care. British physician Dame Cicely Saunders created the modern hospice movement, opening St. Christopher's Hospice in London in 1967. In 1969, Dr. Elizabeth Kubler-Ross wrote "On Death and Dying", which became an international best-seller. In it, she advocates for patients and families to be involved in end of life discussions, and encourages support for dying in the peace of a home setting as opposed to in a hospital, somewhat radical suggestions at the time.

It wasn't until 1982 that the U.S. Congress approved legislation for the Medicare Hospice Benefit, providing formal insurance payment for services. Since that time, hospice has grown such that in 2007 30% of Medicare patients received hospice care and approximately 1.5 million Americans received hospice care in 2012.

So, what is hospice and what cares does it provide?

Hospice isn't a physical place; it is a philosophy of care. Hospice services can be provided in a private home setting, assisted living, nursing home, hospital or free-standing hospice house.

The goal of hospice is to provide quality, compassionate care for patients with life-limiting illness, within the framework of a multidisciplinary care team focused on pain management, emotional and spiritual support, not only for the patient, but for family and caregivers as well. The hospice team includes the hospice physician or hospice medical director, hospice nurse case manager, social worker, home health aide, chaplain, music/massage therapy and volunteers.

Aside from pain management and emotional support, hospice also provides any related medications, medical equipment and supplies, such as hospital beds and specialized wheelchairs.

Hospice staff make regular visits, often several times per week, and are available on-call 24/7. The Hospice acts as an additional layer of care, but are not a replacement for the existing care team. The patient's primary care providers and facility nursing staff can remain integrally involved.

So, when is it time for hospice?

There can be many signs that might indicate it is time to start thinking about hospice care. In the face of declining health with a diagnosis such as advancing dementia, heart disease or COPD/emphysema, it is important to consider the patient's goals of care. Many patients and families make a shift to comfort-focused goals, with a desire to avoid the hospital and aggressive treatments. Frequent ER visits and hospitalizations can be very stressful for patients and families and ultimately can cause more harm than good in the setting of advanced terminal illness. We think of hospice when we anticipate life expectancy might be less than 6 months, however, as none of us has a crystal ball, we must use our best medical judgment and, in truth, there is much variation on this prediction.

Your Bluestone team might look for signs of change including increased weakness, falls, weight loss, confusion, and other disease-specific symptoms to indicate it is time to discuss the benefits of hospice care.

If you and your Bluestone provider decide to consider hospice, an order for a "hospice consult" may be sent to the hospice agency of your choice, after which an appointment is set up to meet with you and the patient to discuss the hospice benefits and enrollment in hospice services.

Your Bluestone team will be happy to discuss any questions you might have regarding goals of care and the benefits of hospice care in your unique situation.

The medical world focusses many resources on bringing new life into the world; we ought to provide the same focus at the other end of life's journey. Hospice is the ideal way to achieve this with caring and compassion for everyone involved.

(Sources - National Hospice and Palliative Care Organization - : www.nhpco.org)

Fall Management

By Annette Fagerlee, Director of Care Coordination

Care Coordination can mean different things to different people. At Bluestone, we understand the meaning to be purposeful care delivery for the whole patient throughout the entire healthcare system. Care Coordinators work with families, provider teams, nursing staff, and community services to ensure that Bluestone patients have all their needs met.

One of the many areas Care Coordination helps is managing when falls occur. Studies show that more than one-third of people aged 65 and older fall each year, and those who fall once are two to three times more likely to fall again.

Monitoring people who have a likelihood of falls is a team effort. It takes efficient, regular communication between community staff and the provider teams to ensure the highest quality of care. Bluestone's preferred method to communicate between staff and providers is using the SBAR (situation, background, assessment, recommendation). It is a simple, concise way to effectively exchange information and needs. Using this standard process to communicate information regarding Bluestone patients, the provider can quickly see and respond to situations. Falls are a common example of a concern that can be addressed on the Bluestone Communication Bridge.

There may be multiple needs when a patient falls. Bluestone utilizes many different interventions based on the specific needs of the patient. The following are examples of interventions:

- A medication review to ensure medication lists are up to date and interactions and side effects are monitored;
- Ordering DME (Durable Medical Equipment) such as grab bars, walkers, etc.;
- Lab draws to look for changes in health;
- Physical or occupational therapy if indicated.

Bluestone offers training to ensure that nursing staff has a clear understanding of the communication guidelines. With multiple interventions and the help of the whole care team, falls may be better managed and avoided.

Resources: American Family physician: Falls in the Elderly www.aafp.org/afp/2000/0401/p2159.html
Centers for Disease Control and Prevention: Older adult falls, cost of falls among older adults. 2010. <http://www.cdc.gov/homeandrecreationsafety/falls/fallscost.html>.

Sudoku

Puzzle 1

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| | 4 | | | | 8 | 2 | 6 | 3 |
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| 1 | | | | 4 | | 5 | 8 | |
| 6 | 3 | 5 | 8 | 2 | | | | 7 |
| 2 | | | 5 | 9 | | 1 | | |
| 9 | 1 | | 7 | | | | 4 | |
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| 8 | | | 4 | | 3 | | 5 | |

Puzzle 2

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| 6 | | 8 | 3 | 1 | 5 | | | 2 | 9 |
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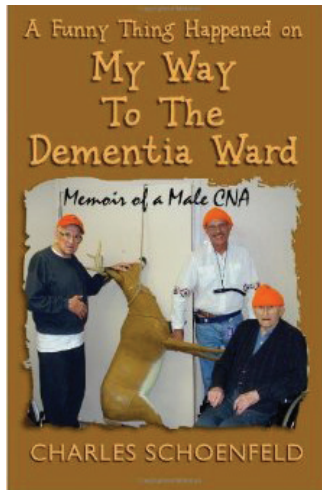
for solutions go to www.veryfreesudoku.com

Bluestone Book Review

A Funny Thing Happened On My Way to the Dementia Ward: Memoir of a Male CNA

By Charles Schoenfeld

Don't let the photo on the cover fool you--This is a serious AND seriously funny book, offering a compassionate and unique perspective from a professional caregiver working on a dementia ward in a nursing home in Wisconsin. In response to his mother's decline and dementia, Schoenfeld moves her to a nearby nursing home, where he begins to visit daily. He gets to know the residents and the caregivers and learns to enjoy the often chaotic, sad, but also funny and touching daily struggles they face. In fact, Schoenfeld, military veteran and UPS driver, was so moved that he changed careers at age 56 to become a CNA. (Certified Nursing Assistant)



working with patients in the dementia ward, but not in a way that ridicules or belittles them. His stories highlight the humour but also reflect the care and compassion - and love - he felt for these people as he helped them live and watched them die on his ward.

A Funny Thing Happened is a must-read for every family struggling with the idea of moving a loved one into a nursing home or assisted living facility. Schoenfeld reminds us that any person living with Alzheimer's is still a person with a rich history of interests, relationships and experiences. Alzheimer's disease may affect a person cognitively and physically, but it doesn't

Schoenfeld relates many humorous anecdotes about

diminish the person or the emotional connectedness they have with their loved ones.

Bluestone Disability Services



Bluestone is excited to be returning to their roots in the disability community. With new funding opportunities and a desire to serve individuals with disabilities, we are committed to providing the highest quality on-site medical care to help maintain independence and overall health within this community.

In August 2014, Team Steele expanded their practice into additional group homes and community settings through the program, Clinic Without Walls (CWOW). The group home model is very similar to our current geriatric practice while CWOW is an entirely new program, bringing extended primary care to individuals living in non-residential settings. Through partnerships with disability care providers and SNBC health plans, we are able to ensure integration and collaboration of care coordination and primary care services. We utilize a team approach to ensure patient's needs are met and to support the health and wellness of the patient. Both programs give access to personalized and preventative primary care with easy access to provider teams.

Bluestone expects to grow these programs throughout the Twin Cities and continue to serve the disability community.

Bluestone Giving Foundation Spreads Holiday Cheer

We are happy to report that Bluestone Giving Foundation (BFG) was able to use our funds (100% of which are donations from Bluestone employees) to help some of our patients have a cheerier and warmer holiday season.

Recent awards include: two gifts of financial aid to establish permanent housing, gift cards for several sets of winter coats/hats/mittens, gift cards for household needs and holiday gifts, financial assistance for emergency oral surgery, a gift card for a crib mattress and household supplies, and a gift card to offset cost of medical supplies. We will continue to grow our foundation and provide even more assistance in 2015.

BFG's vision is to provide timely assistance to those who find themselves in a moment of need. This aid is available to both primary care patients and care coordination members. The recipient is sponsored by a Bluestone staff member to receive aid from the foundation. The application is reviewed and eligibility determined. Assistance may be food, obtaining medication, emergency financial aid or other support to get through the urgent situation and help moving towards a permanent solution.

You can help - Anyone may donate to the foundation!

For questions about participating in the Bluestone Giving Foundation, email Giving@BluestoneMD.com or check out the information on our website and download a donation form at BluestoneMD.com