Minneapolis SHIP Health Care Referral Intervention
Key Informant Interview Themes

This document outlines themes and responses from key informant interviews conducted with 13 community leaders and stakeholders from January to March 2010. The organizations represented in the interviews include cultural associations, community organizations serving diverse populations, health access and referral organizations, health care clinics and associations, and health plans.

Key informant interviews were conducted to solicit culturally relevant feedback on 1) needs and preferences for a referral resource system; 2) developing relationships among health care providers and community leaders to build partnerships for active referrals; and 3) community resource access, barriers, and needs.

Needs and Preferences for a Referral/Resource System

Format of Resource Collection
- Database is useful, but a paper list for clinics is necessary
- Should have a database that is accessible for everyone including patients
- Not recreate the wheel for a database, build on something that is already out there
- Must be simple and easy to integrate
- United Way 2-1-1 is a good source for both the clinic and the patient for referral information
- Minneapolis 3-1-1 can also provide useful information on county and city resources
- Searchable by zip code
- Need to work with community agencies to get info to residents in preferred format
- Collaboration building
- Even with one phone number to call, in a busy clinic the number may get lost and forgotten

Inclusion and Selection of Resources
- Narrow scope
- Include actual programs (not facilities) e.g. only include parks if they have a class etc.
- It is about understanding how people use the resources, not identifying the resources and referring
- Look at the potential of organizations, not just what they already have
- Involve the community in identifying resources
- Map out how to connect resources and build partnerships with accountability
- Include opportunities for exercise at faith communities
- Resources need to be up to date and streamlined
- Family and community based resources that are sensitive to culture and identity
- Residents want something located in their community or their housing unit

Resource Service Information to be included
- Ethnicity search– language, gender, culture
- Include info on program, activities, scholarship
- Need to have culturally appropriate materials and education
- Reimbursement
Using Tobacco as a Model for Obesity
• Great to get a phone line however, health plans pay for end service and phone service for tobacco
• For obesity and chronic disease, treatment may be tied to the patient diagnosis, which for tobacco cessation is not the case
• Need this type of model, but not sure what it looks like
• Tobacco model is excellent but not feasible, funding and health plan challenges are a problem
• Patients would like to work with a personal coach

Clinic Referral Process Recommendations
• Prescription pad for providers to make referrals and have patient contact referral agency
• Providers are not used to making referrals, so needs to be simple, no extra steps
• Involve clinic staff or other providers (MA, nurse, clinical pharmacist, patient educator, social worker, specialists) for referrals
• Have a person at the clinic responsible for connecting patients to the referrals
• Establish "Physician Clinic Champion"
• Use Epic for providers to refer patient to responsible referrals person
• Work with patients to capacity build to negotiate the system on their own.
• Ideally, need to take referrals out of hands of the clinic and look at other places to get referrals
• Need to educate providers on referral resources (x2)
• Collaboration with referrals with other organizations providing populations specific services
• Providers don’t want to ask the question if they don’t have a resource for it
• Need a health care navigator or care coordinator that can cross the boundaries of all the challenges a patient is facing (not just health) and have familiarity with culturally specific approaches
Key Informant Interview Themes

Cultural Recommendations on Resources and Referrals

- Provider training in cultural differences (relationships, trust) and how to get info from patients (storytelling) (x2)
  - SE Asians do not trust first but trust after develop a relationship
  - Inner (clan) is truth, but will try to please outsiders regardless of the truth
- Patient training on importance of medical care and giving the provider the right information (x3)
  - The general Korean American population may not go to the doctor regularly because they do not recognize the importance
  - Some cultures do not take care of the problem until they have to (no prevention) and do not believe other people can take care of the problem
  - SE Asian communities may not tell the truth about smoking because of losing faith
- Gender specific facilities (x2)
  - Women and men feel uncomfortable exercising around each other
  - Somali women want separate facilities than men
- Knowledge of what cultural communities prefer for types of physical activity
  - General Korean American population likes fitness facilities and is active in sports, golfing, and swimming
  - Somali are not used to the American type of exercise or exercise at home
  - Per the Allina Backyard Initiative, exercise does not happen outside of daily life and outside of the community
- Keeping in mind traditional cultural diets and how to incorporate into healthy eating (x2)
  - Most Korean Americans are health conscious, traditional diet is healthy
  - 75-80% of Native Americans are lactose intolerant, so keep that in mind with healthy eating and nutrition
- Have incentives for using resources (gift cards, food, etc.)
- The right people need to give the right translation or message to cultural communities
- Providers need to be sensitive to culture, identity, and generational differences
  - Values, communication and action is different across Cambodian populations (elders, bi-cultural, Americanized)
  - Elders prefer face to face, maybe phone
  - SE Asians think of the body as a whole, not parts that can be affected by tobacco
  - Must emphasize traditional tobacco use versus tobacco effects
- Community component is important – family, geographic, spiritual, etc.
  - Relationships with family are what helps people or keeps people from acting on healthy behaviors
  - Most residents turn for help to family, friends, and religious organizations
  - Need examples from people in the community leading by example
- Residents use different ways to get information than flyers and advertisements, they use word of mouth and other communication methods
Community Resource Access, Barriers, and Needs

Tobacco
- Tobacco use is a problem with African communities
- Language and transportation for tobacco cessation
- Cultural specific Tobacco Cessation programming (x2): American Indian and SE Asian
- Get a talking circle together to determine what would work well for a tobacco cessation program for American Indians

Nutritious Food
- Not many grocery stores
- People will use community gardens
- Fresh food access and expense
- Traditional food and fresh food at food shelves
- Native American run farmers market
- Not many accessible sources for food in North Minneapolis

Physical Activity
- Area not conducive to biking and walking
- Need physical activity programs geared toward adults
- Personal health coach would be helpful
- There is no real facility for exercise in North Minneapolis, try to create agreements with churches
- No safe places for independent exercise (parks, outside) (x2)
- Cannot afford fitness options

Other
- Community resources are not an issue, access to affordable insurance and health care is (x2)
- Scarcity of resources and free organized resources (x2)
- Quality of interpreters is an issue
- Resources to prevent diabetes and chronic disease
- Transportation to community resources is an issue (x2)
- Capacity to navigate the safety net system
- Difficult to develop long term relationships and trust with providers (x2)
- Policy level, presence of community and resources are marginal
- Assistance to make an appointment after being referred
- Incentives and reduced rates will help get people using resources
Inclusion / Exclusion Criteria

MinnesotaHelp.info is the State of Minnesota’s online access point for information about health and human service agencies and programs. Citizens can search the database any day or any time from the convenience of their own home. The services are organized by a geographic location and by topics. Consumers can locate general and in depth information for people of all ages.

The MinnesotaHelp.info web site was developed cooperatively by the Minnesota Board on Aging and the Department of Human Services. The development of the web site was based on recommendations from the Long-Term Care Task Force, a tri-partisan task force that developed a broad set of recommendations related to long-term care reform in Minnesota. As a result of those recommendations, the 2001 Minnesota legislature supported an improved information and assistance network to provide choices about long-term care options for older Minnesotans and their caregivers. In an effort to build upon existing systems and leverage additional resources, the Minnesota Board on Aging partnered with a wide-range of partners in effort to expand the scope of the resources in the database. Today, the database includes services designed to meet the needs of young and old Minnesotans and everyone in between. One of the major partners includes the 87 Minnesota human service agencies located in the counties.

The Minnesota Board on Aging (MBA) is the gateway to services for seniors and their families. MBA listens to senior concerns, researches solutions, and proposes policy to address the needs of older Minnesotans. In addition as the State Unit on Aging, MBA administers funds from the Older Americans Act that provides a spectrum of services to seniors, including Senior LinkAge Line® (SLL). The SLL is a free telephone information and assistance (I&A) service that makes it easy for seniors and their families to find community services. The MBA is also the designated State Health Insurance Assistance Program (SHIP).

First established in 1956, the MBA is one of the pioneers in the field of aging. It works closely with its Area Agencies on Aging, comprised of 7 regional agencies that provide direct Information & Assistance service through the Senior LinkAge Line™. The Governor appoints the Board’s 25 members. The Board is housed within the Department of Human Services and staff is part of the Aging Initiative-Continuing Care Administration.

The Department of Human Services including the Disability Services Division (DSD) in the Continuing Care Administration and Children and Family Services (CFS) is actively involved in the resources for persons with disabilities and families and children’s sites in MinnesotaHelp.info.

DSD defines and implements statewide policy to ensure that a range of services is available to Minnesotans with disabilities. A primary goal of DSD is to promote independent living for people with disabilities by funding or providing a broad range of residential care and social services close to home communities instead of in institutionalized settings. A key element to promoting independent living in communities is being able to access information about services.
available. The database will act as the foundation for development of integrated information and assistance networks for persons with disabilities. CFS helps keep children safe and provides families with supports to care for their children. It also helps families and individuals transition to work and economic stability.

The Minnesota counties are represented by Hennepin County Human Services and Public Health Department – Aging and Disability Services. Its mission is to connect senior citizens and persons with disabilities to resources that will help them live as independently as possible.

To provide a consumer friendly and useful database, criteria were developed to determine which agencies and programs could be included in the database. The inclusion/exclusion policy was developed using feedback from consumers, professionals, planners, experienced database managers, and policy makers.

**Inclusion**

In order to provide objective data to consumers to aid in making informed choices, the database will include agencies that provide assistance for the general public.

1. Government and not-for-profit agencies and programs that provide assistance for the general public. These include federal, state, and municipal governments as well as non-profits designated as 501c3 incorporations.
2. Agencies and programs that are tax-exempt or do not charge fees.
3. For-profit, commercial, or private organizations may be considered on an individual basis. Evaluation of inclusion is based on the following:
   a. Uniqueness of services; related to maintaining someone in their home and independent as commonly understood. This excludes for-profit services and case managers that do not provide long-term care services for the elderly and disabled.
   b. Lack of comparable services from not-for-profit
   c. Degree of need for the services
   d. Availability of referral sources through associations that are of a neutral nature and do not require providers to pay for basic and/or enhanced listings.
   e. The availability and comprehensive level of comparable data that is maintained by other state agencies.
   f. The decision on the part of the project management staff with input from the user community about the capacity and need to maintain a statewide data set about the provider group e.g. decision to maintain a listing of all MSHO Health Plans versus all health plans that service all Minnesotans.
   g. The status of the agency with regard to a license issued by the Departments of Human Services, Health, Commerce or other relevant state or local agency.
4. Housing and facility establishments, medical related agencies, home care providers, whether for-profit, commercial, private, governmental, or not-for-profit, not under investigation by regulatory entities.
5. Professional organizations and trade associations that do customized referral to private persons will be included. These include the Bar Association, the various State Boards that
license professionals (Medical Practice, Psychologists, Social Workers, Nurses, etc.), and other agencies that provide listings of private providers.

6. Agencies and providers certified to accept Medicaid (Medical Assistance), Medicare or any Medicaid waiver program.

7. Agencies and programs that are under a state or county contract to provide statewide services.

8. Agencies and programs that are an access point to gaining eligibility for or seeking assistance with public programs or a publicly funded service or public interest (e.g. employment).

9. National agencies and trade associations

Exclusion

1. The Minnesota Board on Aging reserves the right to exclude any agency.

2. In general private practitioners or medical doctors except as may be necessary under inclusion criteria, are excluded.

3. Any agency that knowingly or unknowingly discriminates or denies services based on age, gender, race, religion, disability, or sexual orientation as covered in the Minnesota Human Rights Act and enforced by the Minnesota Department of Human Rights.

4. Agencies that have been found in violation of municipal, state, or federal laws or regulations and have been excluded from providing service under the requisite licensure.

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<td>Yes</td>
<td>Yes/No</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Program, Cost per Unit</td>
<td>Program, Cost per Unit</td>
<td>Cost corresponding to cost of program</td>
<td>Yes</td>
<td>Yes/No</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Payment</td>
<td>Payment</td>
<td>Payment method or type of reimbursement for program</td>
<td>Yes</td>
<td>Yes/No</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Minneapolis Community Resource List

Physical Activity

- A variety of sports, swimming, classes for exercise and wellness, cooking, gardening, and family activities.
- To find current classes go to: [http://www.mplscommunityed.com/](http://www.mplscommunityed.com/) > Browse the Catalog > Health, Fitness & Sports
- Classes are 5 to 11 week sessions for a fee (approx $5-$60/session) located at public schools and community sites
- Discounts for 62 or older; enrollees of Social Security, Unemployment, or MFIP; MHP/UCare participants; youth

Minneapolis Community Education - 612-668-3939

- Offers some free and reduced cost classes, sports, and open facilities.
- Must pre-register for most activities and show a picture ID to enter.
- Register online or in person at any Recreation Center using cash, check or a credit card.

Minneapolis Community and Recreation Centers - 612 230-6400

- YMCA – Minneapolis
  - YWCA Downtown, 612-827-5401, 3335 Blaisdell Ave Mpls, MN 55408
    - Building Hours: Monday - Friday 5:30am-10:00pm, Saturday - Sunday 7:00am-8:00pm
  - YMCA Downtown, 612-371-8740, 30 South 9th Street, Mpls, MN 55402
    - Building Hours: Monday - Friday 5:30am-9:30pm, Saturday:7:00am-7:00pm, Sunday:8:00am-7:00pm
  - YMCA North Community (youth program site only), 612-588-9484, 1711 W Broadway Ave Mpls, MN 55411
  - YMCA Hiawatha, (program site only) 612-729-7397, 4100 28th Ave S Mpls, MN 55406

YMCA – Minneapolis – 612-230-9622, [www.ymcatwincities.org](http://www.ymcatwincities.org)

- Members have access to pools, open gym, weights, cardio machines, classes, etc.
- Free 3 day pass for non-members to check out facilities, free fitness consultation for new members
- Membership Rates (as of 8/6/10): Adults - $60/mo, Dual - $94/mo, Family - $110/mo. Joining Fee: $150
- Offers health plan discounts, personal pricing plans, and income-based sliding scale scholarship of 10-50% fee reduction
  - Fill out short application form: [http://www.ymcatwincities.org/assets/pdfs/p3_application_form.pdf](http://www.ymcatwincities.org/assets/pdfs/p3_application_form.pdf)
  - Provide verification: Current state-issued photo ID with home zip code and most recent Federal Tax Return or a Statement of Government Benefit Payment
- Minneapolis locations include:
  - YMCA Blaisdell, 612-827-5401, 3335 Blaisdell Ave Mpls, MN 55408
  - YMCA Downtown, 612-371-8740, 30 South 9th Street, Mpls, MN 55402
  - YMCA North Community (youth program site only), 612-588-9484, 1711 W Broadway Ave Mpls, MN 55411
  - YMCA Hiawatha, (program site only) 612-729-7397, 4100 28th Ave S Mpls, MN 55406

Minneapolis Park and Recreation Board - 612 230-6400

- YMCA Blaisdell, 612-827-5401, 3335 Blaisdell Ave Mpls, MN 55408
- YMCA Downtown, 612-371-8740, 30 South 9th Street, Mpls, MN 55402
- YMCA North Community (youth program site only), 612-588-9484, 1711 W Broadway Ave Mpls, MN 55411
- YMCA Hiawatha, (program site only) 612-729-7397, 4100 28th Ave S Mpls, MN 55406

YWCA – Minneapolis

- Members have access to pools, open gym, weights, cardio machines, classes, etc.
- Offers health plan discounts and scholarships
- Free Babysitting/Fit Kids Gym (Midtown and Uptown locations)
- Minneapolis locations include:
  - YMCA Midtown (co-ed), 612-215-4333, 2121 E Lake St Mpls, MN 55407
  - YMCA Downtown (co-ed), 612-332-0501, 1300 Nicollet Mall Mpls, MN 55403
  - YMCA Uptown (co-ed), 612-874-7131, 2808 Hennepin Ave S Mpls, MN 55408

PHD runs every 7 weeks throughout the school year at 19 YMCA locations: Register online or call 612-230-9622.


- Phisical, Healthy, and Driven - 612-230-9622
  - A Fun Health + Nutrition Program for kids (ages 5-10) that shows kids and families how to become more physically active and motivated while increasing their overall health.
  - Each 7 week session is 2 days/wk, 1 hr each day. Kids engage in fitness screening, exercise and nutrition lessons.
  - Cost: $50 for YMCA members, $66 for non-members. Parents receive free YMCA guest passes during program.
  - PHD runs every 7 weeks throughout the school year at 19 YMCA locations: Register online or call 612-230-9622.

YWCA Strong, Fit, Fast - 612-215-4367 (Native American Families) / 612-215-4373 (Latino Families)

- A 12-month health and fitness program for Latino and Native American youth and their families.
- Focuses on reducing childhood obesity and type II diabetes rates in the Latino and Native American communities.
- Youth meet 2x/wk for fun classes to develop fitness and nutrition habits that support healthy weight and wellness.
- Parents receive a free pass to use the fitness facilities while youth are in classes
- Call to register or for more info visit: [http://www.ywcampls.org/community-programs/girls-youth/strong-fast-fit.asp](http://www.ywcampls.org/community-programs/girls-youth/strong-fast-fit.asp)

Healthy Foods: Access

Fare For All - 1-800-582-4291

- Packages of fresh produce and frozen meat at 40% savings, packages from $10-$25 for pre-order or cash/carry
- Pick up 1x/month, several Mpls locations: [http://www.emergencyfoodshelf.org/ourfamilyofprograms/ffa/Index.aspx](http://www.emergencyfoodshelf.org/ourfamilyofprograms/ffa/Index.aspx)

Hennepin County Food Support Program - 612-596-1300

- Helps people with low income get access to nutritious food by using an electronic card to buy food at local stores
- Residents must apply for Food Support in the county where they live, there are 4 appointment locations in Minneapolis
- Applications are available by phone, in person, or online: [http://www.hennepin.us/portal/site/HennepinUS/](http://www.hennepin.us/portal/site/HennepinUS/)
Minneapolis Community Resource List

<table>
<thead>
<tr>
<th>Healthy Foods: Classes</th>
<th>Cooking Matters – 612-625-8284</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Healthy cooking and nutrition program offered 1 night/week for 6 weeks at community or clinic locations</td>
</tr>
<tr>
<td></td>
<td>Free to low-income (180% FPL) adults and families, offered in English and Spanish</td>
</tr>
<tr>
<td></td>
<td>Call to set-up a class for your patients. Classes are not ongoing, must be organized by clinic or community agency.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Tobacco Cessation</th>
<th>MN Clinic Fax Referral Program</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>A fax based or EMR based referral form completed by a clinic provider to refer patient to tobacco quitline services</td>
</tr>
<tr>
<td></td>
<td>Patient agrees to be called by a phone counselor to begin cessation process</td>
</tr>
<tr>
<td></td>
<td>To register your clinic go to: <a href="http://www.preventionminnesota.com">www.preventionminnesota.com</a> and click on the Call It Quits icon on the home page.</td>
</tr>
</tbody>
</table>

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<thead>
<tr>
<th>QUITPLAN Helpline - 1-888-354-PLAN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Professional phone counseling for All Minnesotans (may include Nicotine Replacement Therapy)</td>
</tr>
<tr>
<td>Callers are transferred to counseling service covered by their health plan, or to Clearway vendor if uninsured</td>
</tr>
<tr>
<td>Available to Spanish speakers and the hearing-impaired. Interpreter services are available for other languages.</td>
</tr>
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<tr>
<th>QUITPLAN Centers - 1-888-354-PLAN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinic based individual counseling and medication services (English only)</td>
</tr>
<tr>
<td>Some health plans do not cover all or a portion of services</td>
</tr>
<tr>
<td>Locations in Minneapolis include:</td>
</tr>
<tr>
<td>Park Nicollet Clinic – Minneapolis, 952-993-3636, 2001 Blaisdell Avenue South, Minneapolis, MN 55404</td>
</tr>
<tr>
<td>Smiley’s Family Medicine Clinic, 612-333-0770, 2020 East 28th Street, Minneapolis, MN 55407</td>
</tr>
<tr>
<td>Broadway Family Medicine Clinic, 612-802-8200, 1020 West Broadway, Minneapolis, MN 55411</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Freedom from Smoking (American Lung Association) - 800-586-4872 option 2</th>
<th>Nicotine Anonymous - 952-404-1488</th>
</tr>
</thead>
<tbody>
<tr>
<td>8 session behavior change approach online, at various locations, or train a trainer for classes at your clinic</td>
<td></td>
</tr>
<tr>
<td>Topics include health issues associated with tobacco use, coping skills needed to prevent relapse and group support to reinforce your decision to stop using tobacco.</td>
<td></td>
</tr>
<tr>
<td>Current series open to patients at Abbott Northwestern Hospital and Allina clinics, including Allina Medical Clinic, Aspen Medical Group and Quello Clinic locations. Also offered at United Hospitals, including Virginia Piper Cancer Institute, Mercy and Unity hospitals.</td>
<td></td>
</tr>
<tr>
<td>A free 12-step recovery program offered in a group setting; donations accepted.</td>
<td></td>
</tr>
<tr>
<td>Minneapolis area locations include:</td>
<td></td>
</tr>
<tr>
<td>Linden Hills Congregational Church, 612-927-4603, 4200 Upton Ave. S, Minneapolis, MN 55410</td>
<td></td>
</tr>
<tr>
<td>St. John the Baptist Episcopal Church, 42nd &amp; Sheridan Ave. S., Minneapolis, MN 55412</td>
<td></td>
</tr>
<tr>
<td>Or search for a meeting: <a href="https://www.nicotineanonymous.org/standard_search.php">https://www.nicotineanonymous.org/standard_search.php</a></td>
<td></td>
</tr>
</tbody>
</table>

Hennepin County Woman, Infants and Children (WIC) Program – 612-348-6100
- Provides vouchers for nutritious food, breastfeeding support, nutrition education, and referrals to social services for eligible pregnant women, infants and children. Gross income must fall at or below 185% FPG to be eligible. |
- Applicant must call the Hennepin County Health Department for an appointment at one of four Mpls locations

Minneapolis Farmer’s Markets – 3-1-1 (in Minneapolis only)
- Markets sell fresh fruits, vegetables, flowers, and other goods at various outdoor locations. |
- Markets are often open limited days/times per week and most are open Spring through Fall. |
- List and map of Minneapolis mini markets (5 vendors or less) and farmer’s markets locations can be found at: http://www.ci.minneapolis.mn.us/sustainability/MplsFarmersMarkets.asp or call 3-1-1 (in Minneapolis only) |
- Electronic Benefits Transfer (EBT) is now available at the following locations to purchase a variety of food items, including fruits and vegetables. For a limited time, there is a free match of up to $5 in coupons for EBT purchases. |
| Midtown Farmers Market, (612) 724-7457, 2225 East Lake Street Minneapolis, MN 55407, www.midtownfarmersmarket.org, Hours: Sat. 8 am-1 pm May-Oct, Tue. 3 pm-7 pm June-Oct |
| Minneapolis Farmers Market (Lyndale), (612) 333-1718, 312 East Lyndale Avenue North Minneapolis, MN 55405, www.mplsfarmersmarket.com, Hours: Mon.-Fri. 9am-12pm July-Nov, Sat.-Sun. 7am-1pm July-Nov |
| Northeast Farmers Market, 7th Avenue NE & University Avenue NE Minneapolis, MN 55413, www.nemplsfarmersmarket.com, Hours: Sat. 9 am-1 pm June-Oct |

NorthPoint Health and Wellness Produce Distribution - 612-767-9164
- Free distribution of produce to the public, every other Friday, May – September, 9am-noon |
- NorthPoint Parking lot, 1315 Penn Ave. North, Minneapolis, MN 55411

Healthy Foods: Classes

Cooking Matters – 612-625-8284
- Healthy cooking and nutrition program offered 1 night/week for 6 weeks at community or clinic locations |
- Free to low-income (180% FPL) adults and families, offered in English and Spanish |
- Call to set-up a class for your patients. Classes are not ongoing, must be organized by clinic or community agency. |

Simply Good Eating – 612-596-2125
- Participants will learn how to apply basic nutrition principles to their food choices, plan healthy meals on a limited budget, stretch their food dollar, and cook with an emphasis on safe food practices. |
- Free to low-income (180% FPL) adults and families, offered in English and Spanish |
- Call to set-up a class for your patients. Classes are not ongoing, must be organized by clinic or community agency. |

Tobacco Cessation

MN Clinic Fax Referral Program
- A fax based or EMR based referral form completed by a clinic provider to refer patient to tobacco quitline services |
- Patient agrees to be called by a phone counselor to begin cessation process |
- To register your clinic go to: www.preventionminnesota.com and click on the Call It Quits icon on the home page. |

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| St. John the Baptist Episcopal Church, 42nd & Sheridan Ave. S., Minneapolis, MN 55412 |
- Or search for a meeting: https://www.nicotineanonymous.org/standard_search.php
### Alcohol Dependency Support

**Alcoholics Anonymous Greater Minneapolis** – 952-922-0880  
- 12 step program, support group meetings, free and open to anyone  
- To find a meeting time and location in MN call or go to: [http://www.aaminneapolis.org/pages/meeting/LocationIndex.asp](http://www.aaminneapolis.org/pages/meeting/LocationIndex.asp)

### Rule 25 Chemical Health Assessments

- **African American Family Services** – 612-871-7878, 2616 Nicollet Ave South  
  Hours: Mon-Thurs, opens @ 8am, 9 rule 25 per day  
- **Hennepin County Chemical Health Services** – 612-879-3501, 1800 Chicago Ave South  
  Hours: Tues-Thurs 7am, 25 rule 25 per day, also offers public assistance

### Weight Management

**Overeaters Anonymous** - (888) 540-1212  
- A 12 step program to help individuals abstain from compulsive eating,. Support groups are free and open to everyone  
- For help finding a meeting in the Minneapolis leave a message at: (888) 540-1212 or search online: [http://www.overeaters.org/localmeetings.html](http://www.overeaters.org/localmeetings.html)

**Weight Watchers** - 800-651-6000  
- Support for losing and maintaining weight through tools for healthy food choices  
- Fees for program enrollment apply, meetings through employers are often free  
- Offered at various Minneapolis community locations, including some YMCA and YWCA locations  

### Evidence Based Community Programs

**Chronic Disease Self-Management Program** – demonstrated increase in physical activity and healthy eating  
- A program to help adults identify their health risks related to their chronic conditions, such as arthritis, diabetes and heart disease, and develop action plans to manage those risks  
- The curriculum is usually one 2 hour session/week for 6 weeks  
- Locations in or near Minneapolis:  
  - **Living in Balance - Native American Community Center**, Franklin Ave Safety Center, 1201 East Franklin Ave  
    Tuesdays, 5:00pm – 7:00pm - Call to register, 612-872-8086 Ext. 116  
  - **Pathways to Better Health – HealthEast System**  
    Offered at various locations, call or logon for time and location 651-326-5061, [http://www.healtheast.org/wellness/pathways/classes.html](http://www.healtheast.org/wellness/pathways/classes.html)  
  - **Normandale Center for Healing & Wholeness**, 6100 Normandale Road, Edina, MN 55436  
    Date, time, and room varies - Call To Register - (952) 929-1697  
    [http://healing.normluth.org/News/headlines/healing_wholeness_calendar.html](http://healing.normluth.org/News/headlines/healing_wholeness_calendar.html)

**Diabetes Prevention Program (Lifestyle Balance programs)** – modest (5-10%) weight loss by increased physical fitness, improved diet, increased self-monitoring and self-care  
- **I CAN Prevent Diabetes** in MN (including Minneapolis)  
  - 16 Week Class Curriculum helps prediabetics lose weight, eat healthier and increase physical activity  
  - Times and location vary, for class schedule contact Rita Mays, rita.mays@state.mn.us  
- **YMCA Diabetes Prevention Program (Y-DPP)** – [www.ydpp.org](http://www.ydpp.org)  
  - Nutrition, physical activity and behavior modification for pre-diabetics facilitated by trained Lifestyle Coach.  
  - Cost of class may be covered by some UnitedHealth Group or Medica Insurance providers.  
  - Cost for a full year (16 weekly core sessions plus 8 monthly sessions maintenance): $249 member/$320 non-member.  
  - For more information or to register contact Sheryl Grover at (612)465-0489 or Sheryl.Grover@ymcatwincities.org  
  - Classes are held throughout the Greater Twin Cities: [http://www.ymcatwincities.org/assets/pdfs/ypd_schedule.pdf](http://www.ymcatwincities.org/assets/pdfs/ypd_schedule.pdf)

**The YWCA Coach Approach Program** - 612-230-9622, [www.ymcatwincities.org](http://www.ymcatwincities.org)  
- Literature supported exercise adherence and behavior change counseling program designed to help non exercisers  
- Free to YWCA members that meet screening guidelines (exercise less than 2 days per week for last six months)  
- Program starting Winter 2010

**Matter of Balance** – demonstrated increase in physical activity, geared toward older adults  
- Reduce fear of falling, increase self-management skills in preventing falls including goal setting, problem solving and increasing balance, flexibility and lower body strength  
- Eight two-hour sessions for a small group led by a trained facilitator.  
- Program originally designed for seniors but some programs are open to anyone concerned about falls or simply interested in improving balance, flexibility and strength.  
- Classes in Minneapolis:  
  - **Normandale Center for Healing & Wholeness**, 6100 Normandale Road, Edina, MN 55436  
    Call To Register - (952) 929-1697 - Date, time, and room varies  
    [http://healing.normluth.org/News/headlines/healing_wholeness_calendar.html](http://healing.normluth.org/News/headlines/healing_wholeness_calendar.html)  
  - **Volunteers Of America, Southwest Center**, 3612 Bryant Avenue South, Minneapolis, Minnesota 55409
## Minneapolis Community Resource List

### Call for registration and information
612-822-3194, (ages 55 and greater only)
[http://www.voamn.org/Services/SeniorServices/SouthwestCenter/tabid/3013/Default.aspx](http://www.voamn.org/Services/SeniorServices/SouthwestCenter/tabid/3013/Default.aspx)

### Enhance Fitness – increased physical activity
- Exercise program for older adults to improve functional ability including flexibility, joint range of motion, strength, balance, endurance
- Minneapolis locations include:
  - **Volunteers Of America, Southwest Center**, 3612 Bryant Avenue South, Minneapolis, Minnesota 55409. Call for registration and information 612-822-3194, (ages 55 and greater only)
    [http://www.voamn.org/Services/SeniorServices/SouthwestCenter/tabid/3013/Default.aspx](http://www.voamn.org/Services/SeniorServices/SouthwestCenter/tabid/3013/Default.aspx)
  - Other community sites in MN: [http://www.projectenhance.org/locations_minnesota.html](http://www.projectenhance.org/locations_minnesota.html)

### Disease Management

#### Health Plan Resources
- Most health plans have phone based disease management or health coaching available to some members
- Insured patients can call the customer service number on the back of their health insurance card to inquire about health and wellness services available to them
  - **Medica** – 1-866-905-7430, available to most members (some self-insured employer groups may not have this benefit)
  - **HealthPartners** – 952-883-5469, eligible members may have access to disease management programs and phone-based health coaching (employer purchased programs only)
  - **Preferred One** – 763-847-4477 (or, 1-800-997-1750), eligible members may have access to disease management programs.
  - **Blue Cross/Blue Shield** – [http://www.bluecrossblueshield.com/mn](http://www.bluecrossblueshield.com/mn)
  - **DHS** – (651) 431-2478, Medicaid (651) 431-2678; GAMC (651) 431-2317.
  - **MHP** – (651) 431-2478
  - **UCare** – 612-676-3600 (for Medicare beneficiaries) or 612-676-3200 (for state program beneficiaries), members may contact Amy Bender at 612-676-3351 for health promotion programs.

#### Databases and Directories of Resources
- United Way 2-1-1
  - Call 2-1-1 for 24/7 (Multilingual lines available) information on food shelves, food service, food distribution programs, inpatient and outpatient services for tobacco and alcohol cessation, fitness and community centers.
- **Minnesota Help. Info**
  - Directory of services especially rich in resources for seniors, people with disabilities, veterans, parents and families, and low income people
  - Includes information on programs for food assistance and meals, alcohol dependency, tobacco cessation, physical activity and weight related support groups.
  - Can be accessed online at [http://minnesotahelp.info](http://minnesotahelp.info) or by phone 1-800-333-2433.
- **Minneapolis 3-1-1**
  - Three digit phone number for information on Minneapolis services and phone numbers from 7 a.m. to 7 p.m. or search for services online: [http://www.ci.minneapolis.mn.us/311/](http://www.ci.minneapolis.mn.us/311/)
- **www.Walkscore.com**
  - Type in an address to search for a variety of resources that are within walking distance from the address
  - Includes restaurants, groceries, parks, and more. “Customize” the map to search for additional resources such as “fitness”
  - Can’t find what you are looking for? Add resources by clicking on “Something missing?”

#### Online Resources
- **FitnessConnect** – 1-800-999-4332
  - Web-based directory of certified personal trainers, group fitness instructors, fitness directors:
    [http://www.idea.com/fitnessconnect](http://www.idea.com/fitnessconnect)

## Other – Can’t find what you’re looking for?

### Fitness Centers
- Locate private health clubs, community fitness, churches, etc. near your clinic

### Open access facilities
- Locate malls, skyways and other public venues for exercise near your clinic

### Clinical Group visits

### Group support
- Develop clinic-based classes on nutrition, physical activity, weight management led by volunteers or health professional interns.

### Individual in-person counseling
- Expand volunteer or contracts for Dietetic services at your clinic
Resource and Referral Network Aggregate Baseline Assessment Findings

Nine Minneapolis clinics participated in baseline assessment activities. The clinics serve an estimated 9200 patients per month who are largely low-income, uninsured, and limited-English proficient.

Provider/Staff and Patient Survey Results

This section includes data from:

- Patient surveys: 9 clinics, 327 respondents, 56% female, 24% male, 21% no response. Primary language: English (51%), followed by Spanish (18%) and Somali (8%).
- Provider/staff surveys: 4 clinics, 78 respondents, 28 providers (MD, NP, PA), and 50 staff (RN, MA, etc.)

<table>
<thead>
<tr>
<th>Provider/Staff Referrals and Resources for Obesity Prevention and Tobacco Cessation</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Only 7% of providers and 14% of staff refer all or most at-risk patients to obesity and nutrition resources</td>
</tr>
<tr>
<td>• 44% of providers refer all or most at-risk patients to clinic-based tobacco programs, 8% to community-based programs, and 0% to MN Clinic Fax Referral program</td>
</tr>
<tr>
<td>• Referrals to clinic and community resources are low, but clinic-based referrals are used more often.</td>
</tr>
<tr>
<td>• Lack of awareness of community-based resources is of key concern.</td>
</tr>
<tr>
<td>• Clinics are interested in increasing resources on site to receive referrals.</td>
</tr>
</tbody>
</table>

Types of resources to be included in a referral system

<table>
<thead>
<tr>
<th>Providers and Staff say:</th>
<th>Patients say:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Types</td>
<td></td>
</tr>
<tr>
<td>Free or minimum cost (74%)</td>
<td>Convenient hours (39%); Free or minimal cost (37%); reimbursable by insurance (32%)</td>
</tr>
<tr>
<td>Community-based (65%)</td>
<td>Trails (43%), parks (38%), fitness center (membership required) (36%), public recreation center or fitness center (no-membership) (35%)</td>
</tr>
<tr>
<td>Clinic-based (62%)</td>
<td>Group exercise classes (49%), walking, jogging and running (46%), and exercise machines (36%)</td>
</tr>
<tr>
<td>Info to Include</td>
<td>Individual exercise coaching (38%), personal trainer (37%), and health support group (36%)</td>
</tr>
<tr>
<td>Cost (77%)</td>
<td>Classes on healthy eating (34%), farmers markets (33%), and meet with diet expert (31%)</td>
</tr>
<tr>
<td>Location (77%)</td>
<td>Face-to-face tobacco counseling (49%)</td>
</tr>
<tr>
<td>Brief description (76%)</td>
<td>Clinic-based resources could include: group classes (29%), diet/nutrition counseling (29%), weight loss program (27%), farmers market (27%)</td>
</tr>
<tr>
<td>Languages (68%)</td>
<td></td>
</tr>
<tr>
<td>Criteria</td>
<td></td>
</tr>
<tr>
<td>Reputation of program (53%)</td>
<td></td>
</tr>
<tr>
<td>Evidence-based (32%)</td>
<td></td>
</tr>
<tr>
<td>Supported by literature (23%)</td>
<td></td>
</tr>
</tbody>
</table>

What is needed or wanted in a referral system

<table>
<thead>
<tr>
<th>Providers and Staff say:</th>
<th>Patients say:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Systems Support</td>
<td>Talk about resources offered (29%)</td>
</tr>
<tr>
<td>A referral system or mechanism (71%)</td>
<td>Help select the referral resource (28%)</td>
</tr>
<tr>
<td>Patient/family interest and cooperation (49%)</td>
<td>Provide a list of resources to take home with me (26%)</td>
</tr>
<tr>
<td>A follow-up system or mechanism (44%)</td>
<td>Check-in after appointment (24%)</td>
</tr>
<tr>
<td>Resources</td>
<td>Phone number to community resource directory (23%)</td>
</tr>
<tr>
<td>Information on available resources (62%)</td>
<td></td>
</tr>
<tr>
<td>Easy to use referral forms (60%)</td>
<td></td>
</tr>
<tr>
<td>Resources that meet patients’ needs (51%)</td>
<td></td>
</tr>
<tr>
<td>How many resources?</td>
<td></td>
</tr>
<tr>
<td>3-5 resources the patient can choose (42%)</td>
<td></td>
</tr>
<tr>
<td>I want to refer the patient to another person at my clinic who can help patient to choose resources (14%)</td>
<td></td>
</tr>
<tr>
<td>Only one resource (8%); a searchable web database (1%); a phone line for the patient to call (1%)</td>
<td></td>
</tr>
</tbody>
</table>
Barriers to making and completing referrals

<table>
<thead>
<tr>
<th>Providers and Staff say:</th>
<th>Patients say:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Unaware or unfamiliar with programs and services available (63%)</td>
<td>• High cost (35%)</td>
</tr>
<tr>
<td>• Lack of patient/family interest (36%)</td>
<td>• No insurance (21%)</td>
</tr>
<tr>
<td>• Lack of a database or directory of resources (31%)</td>
<td>• Inconvenient hours (19%)</td>
</tr>
<tr>
<td></td>
<td>• No Childcare (17%)</td>
</tr>
</tbody>
</table>

Focus Group Results
This section includes data from focus groups at 7 clinics with 49 provider and staff participants.

Focus Groups: Ideal Elements to a Referral System or Mechanism

- Referral information integrated with Electronic Medical Records
- Allows for in-clinic and out-of-clinic referrals
- Ability to schedule referrals on the same day or before the patient leaves
- Provider can type information into the EMR and send electronically to a designated referral coordinator
- Providers and staff can access resource information and available appointment times, print out program brochures and educational materials in appropriate languages, and conduct readiness assessments, assess risks and stages of change and attach notes. Having the referral organization handle scheduling the appointment with the patient might be more appropriate for some clinics.
- Referral Coordinator can group patients together as needed in order to optimize interpreter resources
- System tracks the referrals and outcomes and reports back to the clinic/provider
- System includes a book, sheet or list of referral resources in the area
- Adaptable for different people and learning styles as it relates to technology, texting, social networks

Focus Groups: More About…Provider Barriers to Making Referrals

Lack of Awareness: All focus groups identified lack of awareness related to: where to refer for nutrition, physical activity, and tobacco; how to refer to organizations other than clinics and hospitals; building relationships with referral resources; selecting appropriate resources; cost, eligibility criteria and insurance requirements for resources; and how to advise specific cultures about healthy foods and physical activity.

Insufficient Systems Support: 4 of 7 focus groups identified systems concerns: lack of a standard referral process; lack of a system for referral follow-up or referral outcome reporting; lack of a responsible clinic referral coordinator; and lack of computer system compatibility at different organizations.

Lack of Referral Resources in the Clinic and Community: 6 of 7 focus groups would prefer to build their clinic’s capacity for on-site referrals (e.g. to nutritionist/dietician, physical therapy, mental health). 4 of 7 focus groups mentioned lack of nutrition, physical activity and tobacco resources (e.g. programs, classes) in surrounding neighborhoods.

Insufficient Communication and Language Barriers: 6 of 7 focus groups indentified communication and linguistic access concerns: lack of provider communication with patients about physical activity; lack of patient communication with providers/staff; ensuring interpreter access and quality at referral organizations; and interpreters offered through insurance plans change too much.

Lack of Time: 6 of 7 focus groups indentified concerns: lack of time to schedule appointments before patient leaves clinic; internal and external referrals difficult to schedule; time consuming fax and phone communication with referral resources; and inconsistent hours of operation for clinic and referral organizations.

Focus Groups: More About…Patient Barriers to Referrals

Cost: All focus groups identified concerns of insufficient income and lack of insurance, in particular: patient inability to pay out-of-pocket for referrals, internet access, weight scales, and child care.

Time: Time concerns identified in 6 of 7 focus groups included: competing priorities, work schedules, cultural understandings of “time” and long waits for insurance verification.

Language barriers and insufficient linguistic access concerns were identified in 4 of 7 focus groups.

Transportation: Identified as a patient barrier in 5 of 7 focus groups.

Patients’ lack of follow-through on referrals: Providers and staff suggested this was influenced by: lack of awareness of obesity as an urgent problem; patients with co-morbidities being overwhelmed by referrals; violence and safety concerns in the community; lack of programs located in the community and losing paper referral forms sent home with them.
Clinic Referral Assessment Results
This section includes data from 9 clinics, completed by clinic administrators, medical directors, and staff.

Clinic Referral Policies and Systems Overview

- Clinics’ policies and systems cover clinic-based referrals for BMI, physical activity and nutrition; few cover clinic-based referrals for tobacco. Five clinics have designated staff to handle these referrals.
- Most clinics’ policies and systems cover community-based referrals for tobacco; most do not cover community-based referrals for BMI, physical activity and nutrition. Four clinics have designated staff to handle these referrals.
- Most clinics need policies and systems for follow-up on nutrition and physical activity referrals.

Examples of where patients are referred and how

<table>
<thead>
<tr>
<th>Referrals for:</th>
<th>In-clinic:</th>
<th>Community:</th>
</tr>
</thead>
<tbody>
<tr>
<td>BMI and Nutrition</td>
<td>Physicians, Dieticians, Mental Health</td>
<td>NorthPoint, HCMC, Simply Good Eating Program, Weight Management Center at University of Minnesota</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Food shelves: Sabathani, Salvation Army, South Waite House</td>
</tr>
<tr>
<td>Physical Activity</td>
<td>Physicians, Physical Therapists, Fit Force, Stroke Prevention</td>
<td>Bethesda Physical Therapy, Indian Health Board, Pillsbury House, YMCA/YWCA, Minneapolis Parks and Recreation, Community Education</td>
</tr>
<tr>
<td>Tobacco</td>
<td>Physicians or Mental Health</td>
<td>Quit Plan, Minnesota’s Tobacco Helpline, University of Minnesota Tobacco studies</td>
</tr>
</tbody>
</table>

Clinics have varying capacities for locating, making and tracking referrals:
- Most have simple resource lists of established referral relationships or programs, but many are unable to spend time locating new resources for each patient.
- Some use United Way 2-1-1 or 489 Care for referrals, none use the tobacco clinic fax referral program.
- Provider referrals are generally verbal/paper orders that are scheduled/arranged by clinic staff.
- Patient information is exchanged via telephone/fax and documentation is filed in the medical record.
- Most clinics arrange referral and provide patient with information to complete referral independently.
- Follow-up on referrals is low; clinic staff is often unaware of outcome unless referral organization sends confirmation/appointment results. Clinics have more control over in-house referrals.

Where to focus future efforts

- Increase clinic and staff capacity to make, receive and follow-up on referrals.
- Develop a more effective referral network and follow-up tracking system.
- Provide more information about referral resources available.
- Making electronic and printable health education materials available (multiple languages) during appointment.
- Educate staff on identification of at-risk patients and protocols for serving them.

Key Informant Interview Results
This section includes data from interviews conducted with 13 community leaders and stakeholders as well as feedback from the Health Care Work Group participants.

Needs and Preferences for a Referral/Resource System

- There is a lack of consensus on format, process, and scope of a resource/referral system.
- Areas of consensus: accessible by multiple audiences; integration into EMR; interest in tobacco model; care coordination; inclusion of clinic staff, community and family in process; reimbursement for services.

Cultural and Community Specific Needs

- There are cultural specific and community specific needs for resources around physical activity, healthy eating, and tobacco cessation.
- Some identified needs are: cultural specific resources for tobacco; access and affordability of healthy foods; safety, affordability, and more venues for physical activity.

Patient and Provider Technical Assistance

- There is a need to improve how providers work with patients of diverse cultural backgrounds when counseling and referring for risk factors around physical activity, healthy eating, and tobacco cessation.
- Some examples include: culturally-appropriate ways to interview/screen patients; patient awareness on how to communicate effectively with providers; provider knowledge of what cultural communities prefer for types of physical activity and foods; provider sensitivity to culture, identity, and generational differences; and methods to involve community, family, friends, and religious organizations.
HOW TO SEARCH BY KEYWORD TO FIND NEW RESOURCES IN MNHelp.Info


2. Enter your username and password. Username: XXX Password: XXX

3. To search for new resources, go to the Search By Keyword tab near the top left of the page.

4. Enter Keywords: Enter words in the Keyword(s) text box for the resource you would like to find such as YMCA or physical fitness. The more words you enter, the narrower the search filter will be.
   a. Match phrases: Designate the words you enter in the Keyword(s) text box that will be used in the search by selecting the following options: all of the words, any of the words, exact phrase. You can also include forms of the words. For example select “exact phrase” if you want to search for physical fitness as a phrase.
   b. Select Search Fields: Allows you to search for with a word or phrase in the: provider name, service name, service description, service feature, taxonomy term, or all of these fields.

5. Enter a Location: Choose one of the geographic options to narrow your search further: statewide, county (dropdown list), city, zip or address.
6. **Select a Target Group:** Select from one of the target groups to narrow your results further: everyone, seniors, youth, people with disabilities or families and children.

7. **Start a Search** by clicking the blue button and view the results of your search.

8. You can then **Map, Email, or Print** the results.

9. You can also click on the **Service Name** to see more detailed information about each entry or on the **Provider Name** to see a list of all of the services provided by that agency.

10. Each listing contains agency **contact information**, description of service, eligibility, application instructions, fees, business hours, area served, website, and date the listing was last updated in the column to the right. Agency **locations** offering the service are listed in the column to the left.

11. You can click **Return to Results** above the service details to view your search results again or the **Search By Keyword** tab towards the upper left of the page to start a new search.
HOW TO ACCESS CLINIC-SPECIFIC RESOURCE LISTS OR “SAVED PLANS” IN MNHelp.Info


2. Enter your username and password. **Username: XXX**  **Password: XXX**

3. Click on the **My MinnesotaHelp.Info** tab near the top of the page.

4. Look under **Saved Plans** to find the corresponding resource lists for Physical Activity, Healthy Eating, Tobacco Cessation, Substance Abuse and Weight Management.

5. Click on the **magnifying glass icon** to view the resources in each Saved Plan by category.
6. You can then Map, Email, or Print the results.

7. You can also click on the Service Name to see more detailed information about each entry or on the Provider Name to see a list of all of the services provided by that agency.

8. Each listing contains agency contact information, description of service, eligibility, application instructions, fees, business hours, area served, website, and date the listing was last updated in the column to the right. Agency locations offering the service are listed in the column to the left.

9. You can click Return to Results or the My MinnesotaHelp.Info tab to return to the Saved Plan.
What is MinnesotaHelp.info®?

- Service of the MN Board on Aging on behalf of State of Minnesota
- 1999 legislative mandate for a long-term care database that grew into a larger initiative
- Online at www.minnesotahelp.info since 2003
- A Web-based means of finding information about health and human services in Minnesota
What’s in MinnesotaHelp.info?

- Comprehensive health and human service info for:
  - Seniors and their caregivers
  - People with disabilities and their caregivers
  - Parents and families
  - Youth
  - Veterans
  - People with low income
What’s in MinnesotaHelp.info?

- More than 31,500 services
- Nearly 12,000 providers
- Over 22,500 locations
- Data is maintained regularly
  - Average age of the data is about half a year
Provider Portal

• Section of the Web site that is for use by agencies and service providers only
• Area where you can add, change or delete information about your agency that is stored in the MinnesotaHelp.info database
• Allows you to view reports about how often your information is viewed
MinnesotaHelp.info Provider Portal

- Located on the MinnesotaHelp.info homepage
Provider Portal Welcome Screen

Three Main Actions:
1. Sign in as an existing agency
2. Request your password
3. Request to join MinnesotaHelp.info
Provider Portal’s Home Page

- Offers brief explanations of the Provider Portal menu tabs
Content Tab

Update information on your agency:

- Master Record
- Service Record
- Location Record
- Features
- Area Served
Master Record

- High level information about your agency
- Contact information for the individual who reviews/updates the agency profile
Service Record
Important Service Record Fields

- **Description** – extensive details about the service
- **Short Description** – a short one or two sentence summary of the service
- **Application Instructions** – how to apply and begin receiving the service
- **Eligibility** – who is allowed to receive the service
- **Fees** – how much it costs to receive the service or accepted payment sources
- **Weblink** – webpage that highlights information about the specific service
Creating a Service Description

• **Who:**
  – Who do you want to use your services (Everyone, targeted clients, etc.)

• **What:**
  – Describe your services
  – What minimum services will a client receive from your agency
  – What does a typical day’s services include for participants
  – Special certification or licensure
  – Provide any additional information that may be of interest to prospective clients
Creating a Service Description (cont.)

- **When:**
  - When is your service offered
  - Service availability
  - Length of time service is offered

- **Where:**
  - Describe where the service is offered
  - What areas do you serve

- **How:**
  - How is your service accessed
  - How is your service offered
  - How are your services paid for
Location Record

YMCA of Metropolitan Minneapolis

To add an existing Location, click on the Location Name in the list. To delete a Location, place a check in the associated box and click the Delete button. To add a new Location, click Add New.

Main Site: YMCA of Metropolitan Minneapolis
- Northeast Branch
- Hornsby House NE Branch
- North Metro North Branch
- University Branch
- Hamline Branch
- Dinkytown Branch
- Minneapolis Valley Branch
- Ridgeline Branch
- Southside Branch
- North Community Youth &Teen Development Center
- Downtown YMCA
- Adventure Community Center
- Midtown YMCA
- River Valley YMCA
- YMCA Career Services

YMCA of Metropolitan Minneapolis

Use this form to edit the Location record. When you are done, click OK to save your changes or Cancel to go back to the Location list.

NOTE: For optimum readability, please do not enter your information in all caps.

The Location data is divided into three categories. You can switch between the categories by clicking on the links provided.

Location:
YMCA of Minneapolis

Address:
4100 26th Ave S

City:
Minneapolis
State: MN
Zip:
55405

Hide Address:
No

Home Address (if different from above):

Address:
4300 28th Ave N

City:
Minneapolis
State: MN

www.MinnesotaHelp.info
Navigate Minnesota's Land of Over 10,000 Helping Agencies
Area Served
Mailbox Tab

- This function is not currently activated. The general public is not able to email an agency through this Mailbox.
Reports Tab

- Provides statistics on the number of times searches from the Website have included your program (service) and when users have clicked to view more detailed information in your profile.
Settings Tab

- Where you can change your password
Sign Out Tab

• Clicking on the ‘Sign Out’ tab logs you out of Provider Portal
Contact Information
MnHelpData@tcaging.org
Phone: (651) 917-4655
Fax: (651) 641-8618
What is MinnesotaHelp.info®?

• Service of the MN Board on Aging on behalf of State of Minnesota
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  - People with disabilities and their caregivers
  - Parents and families
  - Youth
  - Veterans
  - People with low income
What’s in MinnesotaHelp.info?

- Recent addition to Special Topics for Senior Link; Disability Link; Adults, Families and Children; and Refugees to support the Statewide Health Improvement Project Initiative
  - Wellness Section
    - Body Image/Weight Management
    - General Health Education
    - Nutrition
    - Physical Activity
    - Tobacco Cessation
  - Adults, Families and Children Special Topics
    - Formerly titled Our Families and Children
What’s in MinnesotaHelp.info?

• More than 31,500 services
• Nearly 12,000 providers
• Over 22,500 locations
• Data is maintained regularly
  – Average age of the data is about half a year
MinnesotaHelp.info Power User Version

Located on the MinnesotaHelp.info homepage
Power User Searching Options

Keyword Search:
1. Match phrases
2. Fields
3. Locations
4. Target groups
5. Advanced keyword search
Search Results

Sample keyword search for ‘Smoking Cessation’ limited by Hennepin County:
1. 13 services physically located in Hennepin County
2. 11 services physically located outside of Hennepin County but available to Hennepin County Residents
Power User Searching Options

Topic Search:
- Use AIRS/INFO LINE Terms
  - Glossary of terms
Power User Searching Options

Topic Search (cont.):

- Searching by taxonomy code definitions
- “See Also” terms
Search Results

Sample Search for ‘Smoking Cessation’ limited by Hennepin County:
1. 5 services physically located in Hennepin County
2. 6 services physically located outside of Hennepin County but available to Hennepin County Residents
Narrowing Your Search Results

- Group your results
- Search within your results
- Search by feature
Using Your Search Results

- Map the locations of the service sites
- Email the results
- Basic printing option
- Export them to an Excel spreadsheet
- Create a directory
- Create a plan
Using Your Search Results

Mapping:
Using Your Search Results

Email:
Using Your Search Results

Basic Printing:
Using Your Search Results

Create an Excel Spreadsheet:
Using Your Search Results

Directories:

• Create and print a directory of your search results
• Save the directory to be reprinted at a later date
Using Your Search Results

Create a directory (cont.):
- Directory format
- Indexing
- Cover page
- Font size
Using Your Search Results

Create a plan:
- Allows you to save different types of resources and consolidate them into one area. (Example: Saving resources related to smoking cessation, transportation to medical appointments, and peer support groups.)
Saving Your Search

• Allows you to save all of your search criteria that brought you to your search results
My MinnesotaHelp.info Tab

Allows you to find your:
- Saved Plans
- Saved Searches
- Saved Directories
- And more
Search Tips

• Clicking the ‘Help’ link will bring you to several other help subjects to assist with using MinnesotaHelp.info

Power User
Contact Information
MnHelpData@tcaging.org
Phone: (651) 917-4655
Fax: (651) 641-8618
### Statewide Health Improvement Programs for [www.MinnesotaHelp](www.MinnesotaHelp)

<table>
<thead>
<tr>
<th>AgencyName</th>
<th>AgencyPhone</th>
<th>AgencyAddress</th>
<th>AgencyCity</th>
<th>AgencyZipcode</th>
<th>AgencyURL</th>
<th>Service URL if available</th>
</tr>
</thead>
</table>


<table>
<thead>
<tr>
<th>HIP service</th>
<th>LocationAddress</th>
<th>LocationCity</th>
<th>LocationZipcode</th>
<th>LocationPhone</th>
<th>Area Served</th>
<th>Verification Contact Name</th>
<th>Verification Contact Phone</th>
<th>Verification Contact Email</th>
</tr>
</thead>
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<tr>
<td></td>
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</tr>
</tbody>
</table>
MinnesotaHelp.info®

The Minnesota Department of Health’s Statewide Health Improvement Program (SHIP) has partnered with MinnesotaHelp.Info (MNHelp.Info) to establish a state-wide resource to support the access and maintenance of health and wellness resources for SHIP grantees, health care clinics and providers, and community organizations.

What is MinnesotaHelp.info®?
- A searchable online database (www.MinnesotaHelp.Info) of health and human services in Minnesota for seniors, people with disabilities, parents and families, veterans, youth, and people with low-income
- Expanded through the Statewide Health Improvement Program (SHIP) to include health and wellness resources for nutrition, physical activity, weight management and tobacco cessation
- A service of the MN Board on Aging that has full-time data management staff

How can clinics use MNHelp.Info?
- Use the Power User Version to easily search, save, print, export, email, and map resources
- Narrow search results by location, zipcode, language, and target group
- Create customized printable clinic resource directories
- Link a customized version directly to a website or EMR Clinics

How can community agencies use MNHelp.Info?
- Use the Provider Portal to easily add and update program and service information
- To keep community partners informed on programs

Contact Information
- For more information on SHIP and MNHelp.Info contact Kristen Godfrey at kristen.godfrey@ci.minneapolis.mn.us or 612-673-2075
- For all other inquiries regarding MNHelp.Info contact: MnHelpData@tcaging.org or 651-917-4655
Evidence–based Community Interventions for Self-management of Health Behaviors
(Updated 12-12-11)

1. **Chronic Disease Self-Management Program** - demonstrated increase in physical activity and healthy eating
   - Helps older adults identify their health risks related to their chronic conditions and develop action plans to manage those risks through a 6 week course.
   - Individual clinics or community organizations can become certified to conduct classes.
   - Program implemented in MN as:
     - Living Well with Chronic Conditions (MDH license and Merit Care license),
     - Living in Balance (Native Am Community Clinic license), and
     - Pathways to Better Health (Health East license).
   - For a list of current class offerings in MN go here: [http://www.mnhealthyaging.org/](http://www.mnhealthyaging.org/)

2. **Lifestyle Balance programs** (Diabetes Prevention Program, I CAN Prevent Diabetes) – modest 5-10% weight loss by increased physical fitness, improved diet, increased self-monitoring and self-care
   - An Evidence-Based 16 Week Class Curriculum helps people with pre-diabetes lose weight, eat healthier and increase physical activity.
   - More information on the program in MN can be found at: [http://icanpreventdiabetes.org/index.html](http://icanpreventdiabetes.org/index.html)
   - An updated schedule of classes in MN can be found at: [http://icanpreventdiabetes.org/groups.html](http://icanpreventdiabetes.org/groups.html)
   - Minnesota 2010: I CAN Prevent Diabetes and other Diabetes Prevention Program Sites

3. **Arthritis Self-Management Program** - demonstrated increase in physical activity and healthy eating
   - Improve functional ability for adults with arthritis through hourly group classes in community setting.

4. **Matter of Balance** – demonstrated increase in physical activity
   - Managing concerns about falls for seniors in eight two-hour sessions for a small group led by a trained facilitator. Discover more about the program at: [http://www.mnhealthyaging.org/en/FallsPrevention/MatterBalance.aspx](http://www.mnhealthyaging.org/en/FallsPrevention/MatterBalance.aspx)
   - To find a connection in your community: [http://www.mnhealthyaging.org/en/FallsPrevention/~media/HealthyAging/MatterBalance/MOB%20Healthy%20Aging%20Contacts.ashx](http://www.mnhealthyaging.org/en/FallsPrevention/~media/HealthyAging/MatterBalance/MOB%20Healthy%20Aging%20Contacts.ashx)
Minneapolis SHIP Clinic to Community Organization
Warm Hand-off Process Map

Clinic
- Patient risk factors and readiness assessed
- Patient goals and resources identified
- Patient referral and consent form completed
- Referral form transmitted to community organization
- First contact via phone or in person
- Patient directly connected to responsible referral person. Assistance with service/program: selection, orientation, registration, scholarship/financing

Community Organization
- Enrollment and participation in program or service
- Feedback to provider
- Info and communication on programs and services

Patient
- Follow-up
- Communication on referrals and program/service needs