

Faculty Biographies

Consistent with the IHI's policy, faculty for this conference are expected to disclose at the beginning of their presentation(s), any economic or other personal interests that create, or may be perceived as creating, a conflict related to the material discussed. The intent of this disclosure is not to prevent a speaker with a significant financial or other relationship from making a presentation, but rather to provide listeners with information on which they can make their own judgments.

Unless otherwise noted below, each presenter provided full disclosure information, does not intend to discuss an unapproved/investigative use of a commercial product or device, and has no significant financial relationship(s) to disclose. If unapproved uses of products are discussed, presenters are expected to disclose this to participants.

Chanda Aloysius, MBA, Vice President, Behavioral Services Division, Southcentral Foundation, was raised in a small, Deg Hit'an Athabascan community and began her career with Southcentral Foundation (SCF) in 1990. After years of implementing and sustaining important changes in the delivery of care within the SCF Behavioral Services Division, she assumed the role of its vice president in 2008. She holds bachelor's and master's degrees in business administration.

Kristen Andrews, Regional Proactive Care Group Lead, Kaiser Permanente's Southern California Permanente Medical Group, manages a team of consultants focused on Proactive Panel Management, Proactive Office Encounter (outpatient visits), Proactive Inpatient Encounter (inpatient visits), Proactive Office Support, as well as condition management leads for Diabetes, Asthma, Hypertension, HIV, and CKD. She has been with Kaiser Permanente for 20 years.

Jean M. Antonucci, MD, is a solo family practice physician in rural Farmington, Maine. She is a member of the Ideal Medical Practices collaborative, and a graduate of Bard College and Temple University School of Medicine. She trained at the Maine Dartmouth Family Practice Residency, and did a fellowship in academic family practice at the University of North Carolina at Chapel Hill.

Bruce Bagley, MD, Medical Director for Quality Improvement, American Academy of Family Physicians (AAFP), is the liaison with other national organizations in the quality arena and he actively participates in the development, deployment, and implementation of performance measures. Previously he served as AAFP President and Board Chair and was a Baldrige National Quality Award examiner for several years. During his 28-year practice career, Dr. Bagley provided a full range of family medicine services in a single specialty family medicine group practice. Under his leadership, the 10-physician group was a well-known pioneer in adapting to the challenges of managed care, quality improvement, informatics, and patient-centered care. He has spoken extensively on the topics of performance measurement, medical home, office redesign, electronic health records, and leadership.

Mark Bai, MD, is Assistant Medical Director of the Kaiser Permanente Fontana and Ontario Medical Centers, with particular interests in primary care back office workflows/staffing and population care management. He is a graduate of the Keck School of Medicine at the University of Southern California, and completed his residency program in Family Medicine at Kaiser Permanente in Fontana, California.

Neil Baker, MD, Principal, Neil Baker Coaching and Consulting LLC, serves organizational leaders and change agents as a coach and consultant. He helps them sustain resilience and effectiveness in response to difficult interpersonal, team, and organizational issues that interfere with change. His experience includes management, senior leadership, and quality improvement consultation and he has a background in psychiatry.

Dr. Baker has worked for clients in a wide variety of health care organizations in the US and Canada and he has served for seven years with the Institute for Healthcare Improvement as faculty and Improvement Advisor on multiple initiatives. Prior to his current work, he was Medical Director for Clinical Improvement and Education at Group Health Cooperative in Seattle, and he was an Associate Professor of Psychiatry at the University of Colorado Health Sciences Center in Denver.

Richard B. Balaban, MD, Associate Chief of Hospital Medicine, Cambridge Health Alliance, has held clinical and administrative positions in both inpatient and outpatient settings, which has informed his work in care transitions. Dr. Balaban has served as both a participant and a faculty member of the STAAR project. He is currently evaluating cost-effective strategies to improve care transitions and to reduce readmissions through the use of community health workers. He attended medical school at The George Washington University School of Medicine, and completed his residency in Internal Medicine at the Deaconess Hospital in Boston.

Rolando Barrios, MD, Senior Medical Director, Vancouver Community Health Services, is also Assistant Director at the British Columbia Centre for Excellence in HIV/AIDS. He is an experienced HIV clinician working with marginalized populations in Vancouver. Dr. Barrios' interests include facilitating access to quality and safe care, delivering patient-centred care, and closing the gaps between science and practice. He is currently the lead of the Provincial HIV Collaborative in British Columbia.

Amanda Bednar, MA, is the Manager of Public Relations at the Multiple Sclerosis Association of America with responsibilities across mission programs, donation campaigns, and mobile outreach. She is also an active teaching professor in Public Relations and Business Communications. Ms. Bednar has a strong background in community engagement, event planning, and business development. A graduate of Seton Hall University, she holds both a BA and MA from the school.

Eleanor Benterud, RN, BN, MN, is Director of Health Promotion and Research for the South Calgary Primary Care Network. Her practical nursing experience includes specializing in primary care, population health, operating room, emergency, acute care, and flight nursing in both urban and rural centers. She has held a variety of roles, including management, nursing education, research, consulting, facilitation, program development, and project management. She received her undergraduate and graduate nursing degrees from the University of Calgary.

Mary Ellen Benzik, MD, Medical Director, Integrated Health Partners PHO, also co-directs the Calhoun County Pathways to Health, a multistakeholder community initiative to address the transformation of care delivery. She continues clinical practice in family medicine, and volunteers as faculty at Kalamazoo Center for Medical Studies Family Medicine Residency.

Donald M. Berwick, MD, MPP, FRCP, is the former President and CEO of the Institute for Healthcare Improvement, an organization that he co-founded and led for over 20 years. In July 2010, President Obama appointed Dr. Berwick to the position of Administrator of the Centers for Medicare & Medicaid Services, a position he held until December 2011. A pediatrician by background, Dr. Berwick has served on the faculty of the Harvard Medical School and Harvard School of Public Health, and on the staffs of Boston's Children's Hospital Medical Center, Massachusetts General Hospital, and the Brigham and Women's Hospital. He has also served as Vice Chair of the US Preventive Services Task Force, the first "Independent Member" of the American Hospital Association Board of Trustees, and Chair of the National Advisory Council of the Agency for Healthcare Research and Quality. He served two terms on the Institute of Medicine's (IOM's) governing Council,

was a member of the IOM's Global Health Board, and served on President Clinton's Advisory Commission on Consumer Protection and Quality in the Healthcare Industry. Recognized as a leading authority on health care quality and improvement, Dr. Berwick has received numerous awards for his contributions. In 2005, he was appointed "Honorary Knight Commander of the British Empire" by the Queen of England in recognition of his work with the British National Health Service. Dr. Berwick is the author or co-author of over 150 scientific articles and four books.

Catherine Besthoff, RN, MHA, CPHQ, Director of Program Evaluation, Krasnoff Quality Management Institute, North Shore-Long Island Jewish Health System, has held both clinical and leadership positions in adult critical care nursing, nursing administration, clinical information services, and quality management. Her expertise and skills facilitate evaluation of clinical services, development of quality and performance improvement systems, and providing recommendations for improvement to senior administrative and clinical leadership. Ms. Besthoff serves in an active role in the International Society for Quality in Health Care. She is a founding member of the New York State Gold STAMP Steering Committee and Co-Chair of its Data Management Subcommittee. She is currently pursuing studies for a doctorate degree in Public Health at the Graduate Center of the City University of New York.

Maureen Bisognano, President and CEO, Institute for Healthcare Improvement (IHI), previously served as IHI's Executive Vice President and COO for 15 years. She is a prominent authority on improving health care systems, whose expertise has been recognized by her elected membership to the Institute of Medicine and by her appointment to the Commonwealth Fund's Commission on a High Performance Health System, among other distinctions. Ms. Bisognano advises health care leaders around the world, is a frequent speaker at major health care conferences on quality improvement, and is a tireless advocate for change. She is also an Instructor of Medicine at Harvard Medical School, a Research Associate in the Brigham and Women's Hospital Division of Social Medicine and Health Inequalities, and serves on the boards of The Commonwealth Fund, ThedaCare Center for Healthcare Value, and Mayo Clinic Health System―Eau Claire. Prior to joining IHI, she served as CEO of the Massachusetts Respiratory Hospital and Senior Vice President of The Juran Institute.

Julie Blumgart, RN, RM, BSc (Hons), Associate Director of Clinical Governance and Patient Safety, NHS South West, England, has led the South West Venous Thromboembolism (VTE) Initiative, delivering improvements in VTE risk assessment from 51% in June 2010 to 88% in July 2011. She is also Programme Director for the South West Quality and Patient Safety Improvement Programme aimed at reducing mortality and adverse events across a population of 5.2 million in acute, community, and mental health providers. In 2009, she was appointed as an Improvement Fellow with the Institute for Innovation and Improvement. Previously, Ms. Blumgart was Head of Clinical Governance and Risk at Taunton and Somerset NHS Foundation Trust, serving as the lead for the Safer Patient Initiative Phase 2 Programme, where the successful implementation and spread of evidenced-based clinical interventions across the organization led to a 15% reduction in mortality that has been sustained to date.

Karen M. Boudreau, MD, FAAFP, Senior Vice President, Institute for Healthcare Improvement (IHI), is Medical Director for the IHI Continuum Portfolio, which addresses the patient journey in health and chronic disease care. She oversees national and international work on the IHI Triple Aim (optimizing health, patient experience and per capita health care costs), transitions in care, and strengthening and redesigning primary care. Board certified in Family Medicine, she was previously Medical Director for Healthcare Quality Improvement at Blue Cross Blue Shield of Massachusetts, and Medical Director at Valley Medical Group, P.C. in Western Massachusetts, where she practiced for 15 years. Dr. Boudreau has extensive experience as an improvement

advisor at the health plan, medical group and hospital level, including primary care practice redesign, population management, guideline development and implementation, patient safety, and medication error prevention. In addition to her work at IHI, she practices Family Medicine one half-day per week at Boston Medical Center, where she also is a Clinical Instructor.

Belinda Boyd, Leader, Community Engagement (CE)Team, Vancouver Coastal Health Authority (VCHA), is a practitioner of patient/public engagement. In this role, she works to involve patients and members of the public at all levels of the organization's planning and service delivery. As a "People First" organization, VCHA is committed to involving the public in visioning a sustainable health care system that delivers quality care. Ms. Boyd and her CE colleagues work to build the capacity of VCHA to increase involvement and realize better health outcomes for the communities served.

Elizabeth E. Boyle, MD, Medical Director, Baystate Medical Center, leads clinic redesign projects for improving access and efficiency and the development of a patient-centered medical home at Baystate Mason Square Neighborhood Health Center, where she formerly served as a clinician educator in the Medicine-Pediatrics Residency Program. She is also the Director of Baystate Health Center's Combined Medicine-Pediatrics Residency Program ambulatory curriculum and an Assistant Professor of Medicine and Pediatrics at Tufts University School of Medicine. Previously, she served as the physician champion for clinic redesign at Baystate Health in conjunction with the Institute for Healthcare Improvement Redesigning the Office Practice Innovation Community.

John Brady, MD, Family Physician, has worked at his solo, independent office, The Village Doctor, in Newport News, Virginia, for the past nine years. He also serves as an Assistant Professor in the Department of Family and Community Medicine at Eastern Virginia Medical School. Dr. Brady has worked with the Ideal Medical Practices Organization since its founding and is currently serving as the Secretary of the Organization. He serves on the Virginia Academy of Family Physicians Board of Directors. For his work, Dr. Brady has received numerous recognitions, including the 2008 Virginia Family Physician of the Year. He received his Doctor of Medicine degree from the Medical University of South Carolina and completed a residency in Family Medicine at Greenville Hospital Systems in South Carolina.

Kristi Brenock-Leduc, Director of Learning and Development (L&D), Southcentral Foundation (SCF), leads a 20-person team that is responsible for organization-wide workforce L&D. The team includes L&D instructional designers, clinical specialists, career specialists, trainers, and an operational support and management team who, together, comprise SCF's Development Center (DC)—the DC provides SCF's workforce with a holistic, comprehensive approach to workforce readiness and continued development through its On-boarding Programs, Departments of Learning, Educational Assistance and Scholarship Program, Leadership Development System, and more. Ms. Brenock-Leduc's career with SCF began in 2003 as an external L&D consultant; she transitioned to an internal consultant and became director in 2009. Before coming to SCF, she was a senior associate at one of Alaska's leading organizational consulting firms.

Deborah Burgett, RN, MHSA, is Senior Project Manager at Virginia Commonwealth University (VCU). After accumulating over a decade of clinical experience, she discovered her passion for creating an electronic medical record that belongs to the patient. It was a natural fit for her to take on the role of Director of Implementation for the Ambulatory EMR. To date Ms. Burgett and her team have implemented documentation and electronic prescribing in approximately 90 percent of VCU clinics. She earned her BSN from University of Virginia and her MSHA at VCU. She has also enjoyed VCU leadership training, and mentoring MHA students.

Eleni A. Carr MBA, LICSW, Chief of Medical Social Work, Cambridge Health Alliance, has leadership experience in the field of behavioral health and medical social work that spans the inpatient, residential, and community-based continuum. For seven years, she served as the Director of the Children's Collaborative program in Massachusetts, where she and her team expanded service delivery options for seriously emotionally troubled urban youth and their families utilizing a comprehensive, patient-centered wraparound approach to care. She is a board member of the National Association of Social Workers and a commissioner on the Massachusetts Commission on Gay, Lesbian, Bisexual, and Transgender Youth.

Beulah Casey, MA, EMT, MA, RN, Manager, Patient Safety, HealthTexas Provider Network (HTPN), has been working at HTPN since its inception in 1994, first as a clinical nurse (with 22 years of clinical experience) and now at the corporate level since 2007. It was here at the physician-led organization that she developed and managed a Clinical Skills department designed to ensure and test the 500+ clinical employees' skill levels. In 2009, she moved to Manager, Patient Safety, to build upon an already active Patient Safety program and outreach to the 150+ clinics in HTPN.

Aimee Chevalier, RN, BSN, MHR, Clinical Manager of Union Square Family Health Center, Cambridge Health Alliance, provides direction and supports and oversees one of five clinics in Cambridge Health Alliance that is participating in the Medical Home initiative. Prior to coming to Cambridge Health Alliance, she served in the US Navy Nurse Corp from 1999 to 2008, overseeing Ambulatory and Family Practice clinics. Ms. Chevalier has a bachelor's of science degree in Nursing from Norwich University and a master's degree in Human Relations from the University of Oklahoma.

Ruth E. Clark, RN, BSN, MPA, Executive Director, Integrated Health Partners (IHP), has been a part of the organization since 1995 and in her current role since 1999. Since 2006, she has co-led Calhoun County Pathways to Health, a community-wide initiative coordinated by IHP to improve the health status of chronically ill individuals in the county that includes physicians and other health care providers, employers, health plans, and consumers. She is actively involved on the board of Community HealthCare Connections, the county's merged indigent care plan and homeless clinic, and serves on other community health councils and committees. Prior to joining IHP, she held a management position with a local health plan.

Christina Clarke, MHA, is a Quality Improvement Advisor at Impact BC, an organization that supports patients, providers, and decision makers in health system improvement in and across the province of British Columbia (BC), Canada. She is also Project Director to the Seek and Treat for Optimal Prevention of HIV/AIDS Structured Learning Collaborative, an initiative led by the BC Centre for Excellence in HIV/AIDS and supported by Impact BC. Previously, Ms. Clarke completed an administrative residency with the Provincial Health Services Authority in Vancouver and worked as a research laboratory manager at Dalhousie University.

Kathryn C. Corrigan, MD, National Lead in Primary Care for Telehealth, James A. Haley Veterans' Hospital, works closely with the Office of Primary Care and the Office of Telehealth Services to promote telehealth use. She is nationally involved in VA's implementation of the Patient Aligned Care Team (PACT) (the VA's brand of the Medical Home model) and serves as Co-Director of the Southeast region PACT Collaborative. Dr. Corrigan is board certified by the American Board of Internal Medicine, and the American Board Pulmonary Medicine with added qualifications in Geriatric Medicine. She has served as the Associate Chief of Staff of Ambulatory Care at the James A. Haley Veterans Hospital in Tampa, Florida, and has been an active primary care provider. She has extensive experience in implementation of the VA's EHR and has given multiple presentations over the

past 15 years to local, regional, and national VA audiences on a wide variety of topics, including PACT, clinical informatics, performance measures, and on linking the use of metrics to practice improvement.

Neil Cowie, MD, is a practicing anesthesiologist with an appointment in Medical Simulation with the College of Medicine at the University of Saskatchewan, Saskatoon, Canada. He is actively engaged in undergraduate and postgraduate specialty training in simulation. His research interests are presently focused on development of web-based education programs in acute care communication and teamwork. Dr. Cowie is Chair of the Quality Assurance Committee of the Department of Anesthesiology and in charge of the Chronic Pain Management Clinic. His BSc (Biochemistry), MSc (Physiology), and MD degrees were obtained in Saskatoon.

Donna M. Daniel, PhD, is the Director of Technical Assistance for Safety Net Medical Home Initiative and Senior QI Principal for Qualis Health. She serves as the initiative's technical assistance lead, supporting the Medical Home Facilitators from the five regional coordinating centers. Previously, Dr. Daniel served as corporate director for quality measurement and improvement at a large, multi-hospital health care system in New Jersey and served as improvement director and technical advisor for several state and national IHI-like Breakthrough Series Collaboratives in a variety of clinical topics and health care settings. Dr. Daniel also serves as faculty for the AAFP's Performance Enhancement Program. She received a bachelor's of science degree, magna cum laude, in mathematics and statistics from Old Dominion University and her doctorate in biometry and epidemiology from Medical University of South Carolina.

Connie Davis, MN, ARNP, serves as faculty on a variety of outpatient quality improvement efforts in Canada and the US. In British Columbia, she leads the Patients As Partners QI team. She also works as a nurse practitioner and is a member of the Motivational Interviewing Network of Trainers. She was formerly the Associate Director for Clinical Improvement of Improving Chronic Illness Care, based at the MacColl Institute and Group Health Cooperative's Center for Health Studies in Seattle. Ms. Davis has held a variety of positions in health care, including long-term care, subacute care, community agencies, home care, retirement housing, outpatient clinics, research, and quality improvement. She is a frequent speaker and co-author of publications on care of the older adult, quality improvement, chronic illness care, patient- and family-centered care, and self-management support. She has a special interest in improvement in rural and remote locations.

Nicole Deaner, MSW, Residency Project Program Manager, HealthTeamWorks, works with the family medicine residency practices on embedding patient-centered medical home principles through practice redesign, NCQA recognition, and curricular redesign. Previously, she was the Interim Executive Director of Home Care at HouseWorks elder care agency in Massachusetts. During her tenure at HouseWorks, she worked closely with clients and their families to assist them in navigating their way through the complex health care system. Prior to joining HouseWorks, Ms. Deaner was the Information and Referral Coordinator for the National MS Society, where she provided resource information, guidance, and short-term care management services for more than 100 clients per month. Previous to her graduate-level work, she provided mental health counseling and case management services for at-risk women and teens in the Denver area and was awarded the Colorado Child Care Worker of the Year Award in recognition of her work. She has also served as an ombudsman in assisted living facilities, helping residents and their families resolve concerns about living conditions.

Gregory Delozier, RN, is the Nurse Manager of Mason Square Health Center, Baystate Medical Center. He has worked extensively in health center redesign to improve access and efficiency at Mason Square through the IHI Redesigning the Office Practice Learning Community and more recently through the Massachusetts Patient-Centered Medical Home initiative.

Kim DeRoche, MD, Physician, Fairview Medical Group, has been in practice for 11 years, providing a full spectrum of outpatient family medicine, including prenatal care. She also provides medical leadership for two of Fairview's 44 clinical outpatient sites and has served in leadership roles for the past five years. Dr. DeRoche co-leads one of the four clinical groups that initiated Fairview's health care transformation work, which includes transforming the care team model and creating "packages" of disease state care. This work has dramatically shifted primary care delivery at Fairview, pushing all staff to work at the top of their skill sets and leveling the hierarchy across the clinic to allow each staff person to successfully and rewardingly use their skills to best serve patients and allow staff to problem solve together.

Joel Dickerman, DO, is a graduate of Chicago College of Osteopathic medicine. He is board certified in Family Practice and has a Certificate of Added Qualifications in both Geriatrics and Sports Medicine. In 2003, he completed a two-year fellowship in Primary Care Research at the University of Colorado Health Sciences Center. Dr. Dickerman serves as the Medical Director for the Rocky Mountain PACE program in Colorado Springs, and as the Senior Medical Director for Primary Care at Memorial Hospital in Colorado Springs. He serves on the Colorado Foundation for Medical Care Board of Directors and as Chair of the National Board Of Osteopathic Medical Examiners Taskforce on Continued Fitness to Practice.

Perry Dickinson, MD, Professor, Department of Family Medicine, University of Colorado School of Medicine, is the Immediate Past-President of the Society of Teachers of Family Medicine and recently served as President of the North American Primary Care Research Group, Chair of the Council of Academic Family Medicine, and President of the Board of Directors of the Annals of Family Medicine. He has worked on multiple studies investigating the process of practice improvement and redesign, particularly focusing on the impact of practice organizational features on practice change efforts, the use of elements of the Chronic Care Model in primary care practices, and the Patient Centered Medical Home (PCMH). He is Co-PI on the NIDDK-and NIMH-funded EPIC project and is PI for the Colorado Family Medicine Residency PCMH Project, which assists all ten residency programs in Colorado in implementing the PCMH model in their practices and curricula. He also is involved in projects related to mental and behavioral health issues in primary care and developing health information technology tools to support patient self-management support and health behavior change.

Marguerite Duane, MD, MHA, FAAFP, Medical Director of the Spanish Catholic Center, Catholic Charities, provides leadership and oversight for two medical and two dental clinics, as well as a network of 200 volunteer specialists who serve uninsured patients. Her prior experience includes director of planning for a community hospital, a locum tenens physician at several facilities, and Associate Professor in the Department of Family Medicine at Georgetown University. She is currently a board member for the DC Academy of Family Physicians and a former board member of the American Academy of Family Physicians and the Family Medicine Education Consortium of the Society of Teachers of Family Medicine. Dr. Duane has been the recipient of several research grants focused on chronic care and prevention and the delivery of maternal and child health care services. She is a frequent presenter and has also published numerous peer-reviewed journal articles. In her brief career, Dr. Duane has received several leadership and academic awards, including the Pisacano Leadership Award, a Charles W. Bair Family Practice Research Award, Georgetown University's Outstanding Inpatient/OB Teacher Award, and the Outstanding Recent Graduate Award from Stony Brook University School of Medicine.

Barbara Ducharme, MBA, EdM, Director of Training and Program Quality, Reach Out and Read, Inc., has been instrumental to the design, development, and deployment of the innovative QI project that has dramatically improved care delivery in participating pediatric practices by combining online access for data entry and

analysis with scheduled group webinars/conference calls and ad hoc coaching. The project also offers Prescribed CME credits and credit toward Maintenance of Certification with both the American Board of Pediatrics and the American Board of Family Medicine. Ms. Ducharme has been engaged in QI in health care for more than two decades, and holds an MBA from Simmons College and an EdM from Harvard University.

Douglas Eby, MD, MPH, is Vice President of Medical Services for Southcentral Foundation (SCF) at the Alaska Native Medical Center. The customer-owned, Alaska-Native-led SCF primary care redesign has gained national and international recognition. Dr. Eby presents frequently about the SCF work and its potential for broad transforming applicability elsewhere.

Susan Edgman-Levitan, PA, Executive Director, John D. Stoeckle Center for Primary Care Innovation, Massachusetts General Hospital (MGH), is a lecturer in the MGH Department of Medicine and an Associate in Health Policy at Harvard Medical School. Before joining MGH, she was the founding President of the Picker Institute. A constant advocate of understanding the patient's perspective on health care, Ms. Edgman-Levitan has been the co-principal investigator on the Harvard Consumer Assessment of Health Plans Study (CAHPS) study from 1995 to the present. She has served as chair of the Institute for Healthcare Improvement's (IHI) Breakthrough Series Collaborative on Improving Service Quality, and is the IHI Fellow for Patient- and Family-Centered Care. She is an editor of the book *Through the Patient's Eyes*, *The CAHPS Improvement Guide*, and has authored many papers and publications on patient-centered care. She is co-author of the Institute of Medicine 2006 report, *The Future of Drug Safety: Promoting and Protecting the Health of the Public*.

Mark Faron, MD, EHR Medical Director, St. John's Mercy Medical Group, has been a practicing internist since 1985 and a member of the multispecialty medical group since 1995. He has served in his current role since 2003.

Frank A. Federico, RPh, Executive Director, Strategic Partners, Institute for Healthcare Improvement (IHI), works in the areas of patient safety, application of reliability principles in health care, preventing surgical complications, and improving perinatal care. He is faculty for the IHI Patient Safety Executive Training Program and co-chaired a number of Patient Safety Collaboratives. Prior to joining IHI, Mr. Federico was the Program Director of the Office Practice Evaluation Program and a Loss Prevention/Patient Safety Specialist at Risk Management Foundation of the Harvard Affiliated Institutions, and Director of Pharmacy at Children's Hospital, Boston. He has authored numerous patient safety articles, co-authored a book chapter in *Achieving Safe and Reliable Healthcare: Strategies and Solutions*, and is an Executive Producer of "First, Do No Harm, Part 2: Taking the Lead." Mr. Federico serves as Vice Chair of the National Coordinating Council for Medication Error Reporting and Prevention (NCC-MERP). He coaches teams and lectures extensively, nationally and internationally, on patient safety.

Chris Felton, BSN, RN, Director of Clinical Performance Excellence, HealthTexas Provider Network (HTPN), is responsible for patient safety, clinical skills orientation/verification, and quality improvement. She began working for HTPN at the corporate level since its inception in 1994, with varying responsibilities over the years. Previously, she worked for 20 years at the organization's flagship hospital as a clinical nurse and nurse manager in the surgical cardiovascular service line.

Robert Fortini, Chief Clinical Officer, Bon Secours Medical Group, is responsible for facilitating provider

adoption of the electronic medical record, coordinating clinical transformation to a patient-centered medical home (PCMH) care delivery model, and facilitating participation in available pay for performance initiatives and in physician advocacy and affairs. He has extensive experience in operations and clinical policy development, workflow re-engineering, and continuous quality improvement in ambulatory care. Previously, he served as Chief Medical Affairs Officer at Queens Long Island Medical Group, where engaged in quality and health information technology adoption and successfully applied for the first Level 3 NCQA recognized PCMH in New York State. Prior to that, at Community Care Physicians Medical Group, Mr. Fortini participated in the successful launch of the Bridges to Excellence Collaborative in Upstate New York.

Marie Frazzitta, DNP, CDE, MBA, Clinical Director, North Shore Center for Diabetes in Pregnancy, develops the diabetes policy, procedures, and quality assurance projects for the Center. She is also Co-Chair of the North Shore—Long Island Jewish Health System Diabetes Task Force. She has been a certified diabetes educator for more than 15 years and is a clinical specialist on insulin pump therapy. Dr. Frazzitta shares her extensive experience in gestational diabetes through education programs for nursing staff and at community outreach programs. As a certified family nurse practitioner and psychiatric nurse practitioner, her specialty is working with the psychosocial aspects of diabetes and empowering patients to make healthier lifestyle changes.

Robert A. Gabbay, MD, PhD, Director, Penn State Institute for Diabetes and Obesity, is also Professor of Medicine at Penn State University College of Medicine. He has been clinical investigator on a variety of important trials on innovative approaches to diabetes management in primary care, with numerous publications in this area. Dr. Gabbay serves on several editorial boards and grant review study sections. As a practicing endocrinologist, he has received National Committee for Quality Assurance Provider Recognition and is listed in Best Doctors in America.

Tejal Gandhi, MD, Chief Quality and Safety Officer, Partners Healthcare, is helping to lead the efforts to standardize and implement patient safety best practices across all of Partners Health Care. Previously, she was the Executive Director of Quality and Safety at Brigham and Women's Hospital for 10 years, where she worked to redesign systems to reduce medical errors and improve quality. Her research interests focus on patient safety and reducing error using information systems. Dr. Gandhi won the 2009 John Eisenberg award for her contributions to understanding the epidemiology and possible prevention strategies for medical errors in the outpatient setting. She is a board-certified internist, Director of Patient Safety at Partners Healthcare, and Associate Professor of Medicine at Harvard Medical School.

David N. Gans, MSHA, FACMPE, Vice President of Innovation and Research, Medical Group Management Association (MGMA), administers research and development for both MGMA and its research affiliate, the MGMA Center for Research. His current research projects focus on four areas of interest: patient safety and quality; administrative simplification, cost efficiency, and the dissemination of best practices; the use of information technology by physicians; and preparing physician practices for health care reform legislation and a transformed health delivery system.

Amireh Ghorob, MPH, Director of Training at the Center for Excellence in Primary Care, University of California, San Francisco, has over 10 years of experience working with underserved and vulnerable populations in both public health and secondary education. In her current role, she has developed curriculum in practice facilitation, health coaching, panel management, and complex care management. She utilizes this material to coach primary care clinics in the San Francisco safety net, the Greater Los Angeles VA, and in clinics throughout the nation to transform their model of care to a team-based, population-focused model she has

coined "Share the Care." She has also trained hundreds of health coaches and panel managers in the US and Canada. She previously managed a landmark randomized control trial at UCSF that found peers who were trained as health coaches can clinically and significantly improve HbA1c in patients with diabetes. Her prior work experience includes developing health toolkits for urban adolescents, conducting policy research around insurance coverage, and working as a consultant for the Environmental Protection Agency.

Jill Gillies, Programme Manager for the Patient Safety in Primary Care Programme, Healthcare Improvement Scotland, manages the development and implementation of two pilot projects focused on safety improvement in primary care and across the interface. She is also supporting the development of aims, goals, and change packages for the program. Previously, she spent two years as a Senior Project Officer within the National Coordinating Team for the Scottish Patient Safety Programme. Ms. Gillies graduated from the University of Edinburgh with a Master of Arts (Honours) in Sociology.

Marjorie M. Godfrey, MS, RN, Instructor, The Dartmouth Institute for Health Policy and Clinical Practice, Dartmouth Medical School, is a national leader of designing and implementing improvement strategies that target clinical microsystems. She is also Associate Director of Improvement with the Cystic Fibrosis Foundation, Improvement Leader with the Vermont Oxford Network, an Institute for Healthcare Improvement faculty member, and formerly a Visiting Assistant Professor at Fairfield University School of Nursing in Connecticut. Ms. Godfrey has worked with health care systems worldwide, collaborating with senior leaders to support innovation and transformation using clinical microsystem processes and frameworks. She co-leads the International Clinical Microsystem Network with Sweden. She is a frequent contributor to improvement journals and presents widely nationally and internationally on microsystem fundamentals, with a focus on development and advancement of front-line staff and system outcomes.

Ellen Goodman is founder of The Conversation Project, a collaboration with the Institute for Healthcare Improvement on a grassroots effort to encourage every person to have a conversation about their wishes for care at the end-of-life. Ms. Goodman is a Pulitzer Prize-winning columnist, author, speaker, and commentator who refuses to call herself a pundit. She has long been a chronicler of social change in America, especially the women's movement and its effects on our public and private lives. One of the first women to open up the op-ed pages to women's voices, she became, according to Media Watch, the most widely syndicated progressive columnist in the country. From her observation post, Ms. Goodman continues to work as a writer, speaker, and commentator. In addition to the Pulitzer Prize for Distinguished Commentary in 1980, she has been recognized by the American Society of Newspaper Editors, the Leadership Conference on Civil Rights, the National Women's Political Caucus, the Women's Research & Education Institute, and the National Society of Newspaper columnists.

Allyson Gottsman, Executive Vice President, HealthTeamWorks, has spent her entire career in health care management, mainly working with primary care practices. In addition to years of experience managing collaborative ventures and field agents working with ambulatory care practices, she brings considerable fundraising and business development skills to HealthTeamWorks. She established and built the Systems Transformation Services Team, which provides coaching to medical practices to create patient-centered medical homes. Ms. Gottsman has spoken about the patient-centered medical home and quality-driven care transformation at the Institute for Healthcare Improvement's Annual International Summit in 2010 and 2011.

Chase Gray, RN, Project Manager, HealthTeamWorks, manages members of the coaching team and patient-

centered medical home improvement activity programs. She supports team members who coach medical practices as they work to become patient-centered medical practice homes using HealthTeamWorks programmatic methodology. She began her professional career doing international development work for a USAID contractor, American International Health Alliance, where she was responsible for planning, implementing, and monitoring a variety of health programs throughout the former Soviet Union and Eastern Europe that focused on transitioning health care systems. She has nursing experience in a variety of health care settings, including adolescent mental health, clinical research, developmental disabilities, and as a quality-improvement coordinator for a home health agency.

Lisa Gualtieri, PhD, ScM, Assistant Professor, Department of Public Health and Community Medicine, Tufts University School of Medicine, teaches courses on Online Consumer Health, Social Media and Health, and Digital Strategies for Health Communication. She was awarded a grant to study the use of social media in medical school courses at Tufts. Dr. Gualtieri consults with health care organizations to improve their use of technology to reach health care consumers. A frequent conference speaker, she presented at the 2011 Annual Conference of the American Public Health Association, the 2011 Mid-Atlantic Medical Library Association Conference, and at the Foundation of the NIH mHealth Summit. She writes a blog about health at <http://lisagualtieri.com> and is on Twitter at @lisagualtieri. Dr. Gualtieri earned a PhD in computer science from Harvard University.

Damara Gutnick, MD, Clinical Assistant Professor of Medicine and Psychiatry, NYU School of Medicine, is also a general internist at Bellevue Hospital, where she is dedicated to providing quality care to an underserved population. She is a corporate-wide leader in depression care for the NYC Health and Hospital Corporation. Her depression related accomplishments include successful implementation of a depression screening and care management program that helped her hospital qualify as a Medical Home for Depression; development of an interactive, web-based training module designed to teach primary care providers how to effectively utilize collaborative care to screen for and manage depression; and development of the HHC Depression Pocket Guide. Her current projects include implementation of standardized suicide screening protocols and integration of psychiatric and primary care services. Dr. Gutnick also has expertise in motivational interviewing, self-management support, and interviewing and providing care for "Survivors of Torture." She is currently collaborating with Dr. Steven Cole, Connie Davis, and Mary Raju Cole to develop a series of web-based teaching modules designed to teach basic and advanced Comprehensive Motivational Interventions.

Joanne Gutowsky, MHA, CMQ, QA, CSSBB, Lean Coach and Quality Management Specialist, IPIP Project, is a skilled quality coach, process engineer, facilitator, and educator. As the Vice President and co-owner of CJ Systems, Inc., her experience in implementation of quality tools and techniques and innovation in client operations has touched over 150 different business operations within health care, advertising/marketing, service, automotive, and other industries to achieve their goals through successful quality improvement programs, achieving worldwide quality certifications and business transformation. Ms. Gutowsky's work with Lean, 5S, and Six Sigma projects has been recognized with awards achievement and speaking engagements. Along with holding the title of State Director of IPIP Michigan (a program funded by the Robert Wood Johnson Foundation) and past president of Southeastern Michigan Health Executives Forum, she is also working with the Practice Transformation Institute as an instructor for quality improvement and with the Greater Detroit Area Health Council as a Project Specialist in Lean and Quality Management Systems. Ms. Gutowsky serves as a member of the AHRQ Quality Improvement Panel, the American Society of Quality, the Midwest Healthcare Executives Groups and Associates, the American College of Healthcare Executives, the Michigan Primary Care Consortium, and AF4Q.

Byron L. Haney, MD, is a family physician and President of Family Health Care of Ellensburg in Washington State, a three-physician, full-service obstetrics and rural family medicine group. The group's philosophy of care is to provide a "Family Medical Home" environment in which preventive medicine is a high priority and is valued. This philosophy, combined with an electronic medical record system that has been in operation for the past 12 years, the group has won the hearts of patients and received insurance company awards and recognition for excellence, including having been granted a significant reduction in administrative burdens by the local HMO.

Marjie Harbrecht, MD, Chief Executive Officer, HealthTeamWorks, has led the organization since 1999, which is now focusing efforts on helping practices and communities transform health care delivery through multiple activities, including the Colorado Multi-Stakeholder, Multi-State Patient-Centered Medical Home Pilot. Dr. Harbrecht serves on multiple boards and committees both at a local and national level, including the Patient-Centered Primary Care Collaborative Payment Reform Taskforce and the NCQA PCMH Advisory Committee. She received an award from the Colorado Patient Safety Coalition in 2007 for her work and lectures nationally about health systems change, quality improvement, payment reform, and patient safety. She also serves as an Assistant Clinical Professor in Family Medicine at the University of Colorado Health Sciences Center.

Caryl Harper, BA, RN, BScN (Dist), MSN (Cand), Senior Manager, Vancouver Island Health Authority, is responsible for a portfolio of work that includes Public Participation and Collaborative Systems Development in Primary Health Care, Chronic Disease Management, and Rural Health Services. This work involves engaging communities, patients, families, and caregivers as partners in primary health care transformation to create a culture of shared stewardship for health and well being, improve the quality of health decisions and services within the region, and engage in decision-making about health care. She has worked with community-based services and business organizations as well as with government agencies for over 20 years, giving her a clear understanding of the often complex, highly politicized issues involved in public engagement, prevention, health promotion, and healthy public policy. Ms. Harper has presented at local, provincial, national, and international conferences and symposiums.

Beth Heinz, MSW, MHA, Vice President of Operations and Chief Quality Officer, Regions Hospital, is responsible for Quality, Care Management, Best Care Best Experience, Guest Experience, Care Management, Human Resources, Palliative Care, Data and Measurement, Utilization Management, Chaplaincy, Complementary Care, Compliant Documentation Programs and Patient Relations. She leads change and improvements in achieving the "triple aim" in health care, driving significant results in optimum patient experience, excellent quality, and lower costs. Ms. Heinz provides overall human resource and organizational cultural vision and strategy leadership in her current role. She has extensive experience in strategic management, care management, palliative care and physician management with proven sustainable outcomes. She also has expertise in project management; planning, implementation/execution, and accountability fundamentals; and she is trained in Lean and Six Sigma methodologies.

AnnMarie R. Hess, MSN, MS, President, Clinical Performance Management, Inc., provides performance improvement, idealized design, and clinical microsystem assessment support for health care organizations. She was formerly the Senior Analyst for Measurement for the IHI Idealized Design of Clinical Office Practices prototype initiative. Ms. Hess has practiced as a clinical specialist and nurse practitioner in outpatient and inpatient settings. She is a graduate of the Center for Clinical Evaluative Sciences at Dartmouth Medical School.

Rick Hilger, MD, SFHM, Medical Director of Care Management, HealthPartners, has been a staff hospitalist at Regions Hospital for 10 years, where he is also the Director of Resident Education for Hospital Medicine. In this role he created one of the first Hospital Medicine Pathways for residents, which provides extra training in quality improvement, physician leadership, and cost-effective health care to residents going into Hospital Medicine as a career. Dr. Hilger has been actively involved in the Society of Hospital Medicine, and was named a Senior Fellow in Hospital Medicine in the inaugural class in 2010 for his multiple leadership roles in resident and staff education, care management, and advocating for evidence-based medicine on a local and national level.

Mike Hindmarsh, MA, President, Hindsight Healthcare Strategies, is former Associate Director of Clinical Improvement at the MacColl Institute for Healthcare Innovation at Group Health Cooperative of Puget Sound. During his 17 years with Group Health, he managed federally funded research studies and directed various internal clinical improvement efforts, including the creation of one of the country's first electronic registries for chronic disease. Along with Dr. Ed Wagner and colleagues, Mr. Hindmarsh is co-creator of the Chronic Care Model, a system redesign strategy to improve the care for chronically ill patients. His current work involves design and development of a dissemination strategy for implementing the Chronic Care Model in the US, Canada, and the UK.

Katie Holley-Carlson, MHA, is the Clinic Administrator for the Fairview Eagan Clinic, Eagan Urgent Care, and Rosemount Clinic. For the past several years she has been involved in facilitating radical change in clinic operations, through the care model innovation work within the Fairview Medical Group. She has 20 years of experience working in various health care delivery systems. She is a graduate of the University of Minnesota, where she received undergraduate degrees in Business/Economics and German and her Master's in Healthcare Administration.

Neil Houston, MBChB, FRCGP, has worked as a family physician in a small, semi-rural practice in Central Scotland for 19 years. He has been involved in quality improvement throughout his career in a variety of roles. He is a Patient Safety Fellow and the National Clinical Lead with Healthcare Improvement Scotland, with responsibility for developing and implementing a Patient Safety Programme in Primary Care across NHS Scotland.

Cindy Hupke, BSN, MBA, Director, Institute for Healthcare Improvement (IHI), currently supports the strategic partner relationship with the Indian Health Service as a Director of the Improving Patient Care initiative. She previously served as the National Director of the HRSA Health Disparities Collaborative for eight years, running six chronic care Collaboratives; co-directed an IHI Innovation Community in Planned Care; and served as a Director for six innovation pilots on prevention, diabetes prevention, cancer screening and follow-up, finance and redesign, perinatal and patient safety, and chronic disease. These initiatives have reached more than 800 health centers and clinics. Ms. Hupke also leads IHI's health disparities and equity work, and she is a key participant in developing the IHI Continuum portfolio of work.

Helena Hvitfeldt Forsberg has a MSc in Medical Informatics and is currently a PhD student at Karolinska Institute at the Medical Management Center. Her thesis work concerns improvements in chronic care, mostly with the focus on using informatics, from making patients a stronger part of their own care to improving processes of access to care. She is also certified from The Dartmouth Institute in coaching health care improvement teams.

Hollie James, BS, HRM, Clinic Administrator, Fairview Health Services, has over 20 years of experience working with front-line staff, with 16 years in leadership. She is a long-term member of the Minnesota Medical Group Management Association. She is passionate about patient care and how each of team role affects the outcome for the patient. Selecting and training staff while building a top notch team that excel in their roles is key to a sustainable care model.

Brent Jaster, MD, is a family physician and consultant for JasterHealth inc., University of Colorado School of Medicine. He works with John Scott, MD, creator of the Cooperative Health Care Clinic model of shared medical appointments (SMAs), and has experience with SMAs in clinical research and family medicine clinics. Dr. Jaster has helped clinics throughout North America implement successful SMA programs, and he modifies SMAs for the corporate and community settings.

Scott A. Johnson, Senior Health Care Analyst, Blue Cross Blue Shield of Michigan (BCBSM), is a senior member of the Field Operations division of Value Partnership for the Patient Centered Medical Home (PCMH) program. BCBSM has the largest PCMH program in the nation with over 2,500 PCMH designated physicians in 776 practices. Mr. Johnson collaborates with physician organizations throughout Michigan to boost practice transformation. He is also the lead developer for the practice site visit design for PCMH program year 2012. Before joining BCBSM, Mr. Johnson worked for a pharmaceutical company as a representative, focusing on disease awareness and product launches.

Craig A. Jones, MD, is Director of the Vermont Blueprint for Health, a program to guide statewide transformation of the way that health care and health services are delivered in Vermont. He serves on several committees and workgroups, including the Institute of Medicine's Consensus Committee on the Learning Healthcare System in America, and the Roundtable on Value and Science Driven Healthcare. Previously, he was an Assistant Professor in the Department of Pediatrics at the Keck School of Medicine at the University of Southern California, and Director of the Division of Allergy/Immunology and Director of the Allergy/Immunology Residency Training Program in the Department of Pediatrics at the Los Angeles County + University of Southern California (LAC+USC) Medical Center. He was Director (in charge of the design, implementation, and management) of the Breathmobile Program of mobile clinics that delivered ongoing care to inner city children in their schools and at Los Angeles county clinics. This program evolved from community outreach to a more fully integrated Pediatric Disease Management Program for the Los Angeles County Department of Health Services, and has spread to several other communities across the country. Dr. Jones has served as a board member and past president for the California Chapter of the Asthma & Allergy Foundation of America, the Los Angeles Society of Allergy Asthma & Immunology, and the California Society of Allergy Asthma & Immunology.

Judy Jones is the Pennsylvania REACH East HIT Facilitator with the Pennsylvania Academy of Family Physicians, working with physician practices that are trying to achieve meaningful use and are interested in working towards patient-centered "homeness" at the same time. She has experience with the National Committee for Quality Assurance Patient Centered Medical Home process and the Accreditation Association for Ambulatory Health Care (Medical Home On-site Certification Process). Her previous experience includes Clinical Coordinator, Cardiovascular Surgical Institute, Surgical Heart Team Member, and Operating Team Member.

Bonnie Jortberg, PhD, RD, CDE, Assistant Professor, Department of Family Medicine, University of Colorado School of Medicine (CU-SOM), teaches nutrition and preventive health courses in the CU-SOM Medical School, provides project management and develops curriculum for Colorado Family Medicine Patient Centered Medical

Home Project, and is the Principle Investigator for a pediatric obesity grant. She is the lead author for the American Dietetic Association's Level 2 Certificate of Weight Management program, and has lectured around the country about obesity prevention and treatment. She holds a PhD in Human Nutrition, and is a registered dietitian and certified diabetes educator. Dr. Jortberg has been at CU-SOM since 1995, starting in the Department of Preventive Medicine as one of the study coordinators for the Diabetes Prevention Program. She then moved to the Center for Human Nutrition, where she was the Program Director for the Colorado Weigh, a community-based weight management program.

Elsbeth Kalenderian, DDS, MPH, Chair, Oral Health Policy and Chief of Quality, Harvard School of Dental Medicine, is currently a Principal Investigator in research focused on dental diagnostic terminology in the electronic health record, and she received an American Dental Association award for educational research. Dr. Kalenderian is actively involved in teaching first-year students in the longitudinal Medical History taking course, oral and maxillofacial surgery classes for third-year students, and she is the Course Director for the Oral Health Leadership course and the Dentist as Leader course. She has over 20 years of experience in the health care, human services, and the public health field. Her prior positions at Harvard School of Dental Medicine include Assistant Professor in Oral Health Policy and Epidemiology, and Assistant Dean for Clinical Affairs. Previously, she served as Senior Vice President for Health Strategies for the American Heart Association (AHA) Heritage affiliate in New York City, Vice President for Quality Improvement Initiatives at the AHA Northeast affiliate, and held senior management roles at a Massachusetts human services organization and at North Shore Medical Center.

Fred Kampe, MBA, is the Operations Coordinator for eight primary care clinics within Community Health Services at Denver Health, a safety net institution in Denver, Colorado. Previously, he held the role of Senior Lean Facilitator within the Lean Systems Improvement Department at Denver Health. He has an operations background in manufacturing with expertise in Lean/Six Sigma and industrial engineering.

Michael Kanter, MD, Medical Director, Quality and Clinical Analysis, Southern California Permanente Medical Group (SCPMG), is responsible for the regional coordination and support of medical care programs, quality assessment and improvement, utilization management, technology assessment, clinical practice guideline development, population care management, member health education, continuing and graduate medical education, and clinical research activities. He joined SCPMG as a pathologist at Woodland Hills Medical Center, where he later served as Assistant to the Area of Associate Medical Director.

Wendi A. Knapp, MD, MA, FACP, Hospitalist, Palo Alto Foundation Medical Group, is also the Associate Medical Director for the Variation Reduction Project. She has worked in Community and Graduate Medical Education as well as in grant writing and, prior to a career in medicine, she taught high school. Dr. Knapp studied medicine at the University of Kansas School of Medicine. She completed Internal Medicine Residency and Chief Residency at the University of California, Davis in Sacramento. Initially she practiced in rural Kansas, where she was clinical faculty for KU and then worked as Associate Program Director for the Internal Medicine Residency at Kaiser Permanente in Sacramento.

Sally Kraft, MD, MPH, Medical Director of Quality, Safety and Innovation Department, University of Wisconsin Hospital and Clinics, is also a Clinical Associate Professor of Medicine at the UW School of Medicine and Public Health. She earned her medical degree from the University of Michigan Medical School and holds a MPH from the University of Michigan School of Public Health, Health Management and Policy. Dr. Kraft completed clinical training in internal medicine, followed by fellowships in critical care medicine and pulmonary medicine at Stanford University. She worked at the Palo Alto Medical Clinic and as clinical faculty at Stanford University.

After moving to Madison in 1993, she practiced clinical pulmonary and critical care in Wisconsin, returning to Palo Alto in 2006 to complete a fellowship in Quality Improvement and Health Services at Palo Alto Medical Foundation Research Institute.

Lisa Leary, MS, is an Associate with the Microsystem Academy, Center for Leadership Improvement at The Dartmouth Institute for Health Policy and Clinical Practice. She coaches and advises health care practices using applied Clinical Microsystems theory to improve patient outcomes, streamline clinical processes, and empower staff to "do the work and improve the work." Her special interests include primary care and designing measurement into daily improvement. She has a master's from The Dartmouth Institute with a background of health care research and improvement.

Jay Lee, MD, is the Physician Team Leader at the Westwood Family Health Center in West Denver, Colorado. As Assistant Professor, he also works with the family medicine residents from the University of Colorado. He also practices on the L&D and medicine wards and at the Lowry and AFW Family Medicine Clinics.

Ann Lefebvre, MSW, CPHQ, Associate Director, North Carolina Area Health Education Centers Program, University of North Carolina at Chapel Hill, oversees statewide quality improvement efforts. Her responsibilities include serving as executive director of the North Carolina regional extension center and directing the Improving Performance in Practice Program for the state, which is part of the North Carolina Healthcare Quality Alliance. In this role, Ms. Lefebvre has developed a program to train and support over 40 staff to perform as consultants in primary care practices across the state, to assist in the adoption and use of technology to improve the provision of quality health care in the primary care setting. She has an adjunct faculty appointment in the Department of Family Medicine at UNC Chapel Hill and serves as faculty for the Institute for Healthcare Improvement on the Primary Care Practice Coach Professional Development Program. Her experience includes working in a variety of ambulatory care settings to help providers and staff use technology and quality improvement techniques to improve clinical outcomes as well as patient and staff satisfaction.

Ann M. Lewis, Executive Director, CareSouth Carolina, Inc., has led this non-profit community health center from its inception in 1980 with a small staff of four serving a rural community of 800, to its current configuration of ten clinical offices staffed by over 265 employees that serves over 35,000 patients annually. Over the past seven years, she has served on the faculty for IHI Breakthrough Series Collaboratives and IMPACT Communities, and for the Bureau of Primary Health Care (BPHC) Health Disparities Collaboratives, providing training for senior leadership and the Care Model. From 2002-2004 she co-chaired a pilot Health Disparities Redesign/Finance Collaborative, and in 2005 she co-chaired the IHI National Forum. Ms. Lewis has served as advisor to the BPHC and American Psychological Association Task Force on Integration of Mental Health and Primary Care in Community Health Center Settings. Currently, she is faculty for the IHI/Department of Health and Human Services pilot collaborative, Innovations in Planned Care, for the Indian Health System.

Judy Ling, BA, Improvement Advisor, PROMISES, graduated from Wellesley College with a BA and worked in several consulting firms, including Arthur D. Little, prior to joining Blue Cross Blue Shield of Massachusetts. At Blue Cross, she was the project manager of the Benefits Administrations Committee, comprising over a dozen operating groups responsible for benefit changes and bringing new products to market. She later joined Partners, where she worked in the High Performing Medicine division and served as project manager on several improvement projects, including decreasing the inpatient length of stay for congestive heart failure admissions, and decreasing turnaround time for surgery.

Gregory Long, MD, Chief Medical Officer, ThedaCare, provides clinical and administrative leadership in order to improve safety and clinical and service quality throughout ThedaCare, an integrated health system in Northeast Wisconsin. Dr. Long is a family physician who has practiced for 15 years at ThedaCare Physicians in Kimberly and Oshkosh. In addition, he was a physician leader at both practices, leading clinic redesign, including EMR implementation and embedding advanced access. He received his undergraduate degree from Graceland University in Iowa and his medical degree from Southern Illinois University School of Medicine. He completed his residency in family medicine at Memorial Hospital of South Bend in Indiana.

Lucy W. Loomis, MD, MSPH, Associate Professor of Family Medicine at the University of Colorado Denver School of Medicine, is also director of Family Medicine at Denver Health, where she has been a leader in practice redesign for Denver Community Health Services, their network of federally qualified community health centers. She has over six years of training and experience in use of Lean systems analysis in the clinic setting to improve both operational efficiency and clinical quality, and a tool to transform the practices to patient-centered medical homes. She has presented on this work in multiple national venues. In 2011, Denver Health received The Shingo Prize Bronze Medallion for Operational Excellence for their work in Community Health, the first health care organization to be so recognized. Dr. Loomis has also worked in health center-based residency training as the founding director of the Denver Health track of the University of Colorado Family Medicine Residency, which was awarded a HRSA Primary Care residency expansion grant.

Jennifer Lord, Meaningful Use Project Manager, University of North Carolina Health Care System, works with the Practice Quality and Innovation team to achieve Meaningful Use of the EHR for UNC's approximately 750 Eligible Professionals. She has been working with UNC's outpatient clinics to improve care delivery since 2005. With the Patient Access and Efficiency initiative, she facilitated practice-based QI teams to increase access to care and optimize clinic efficiency. As UNC's Medical Home Project Manager, she was responsible for achieving Level III PCMH recognition through NCQA for UNC's primary care practices. Prior to joining UNC, Ms. Lord designed curricula for medical schools in physician-patient relationship skills, and in 2003 founded Participatient® workshops and tools to help patients navigate the health care system and interact more effectively with their providers.

John Loughnane, MD, Medical Director, Boston's Community Medical Group, is also Medical Director of Palliative Care and Hospice at Commonwealth Care Alliance. He has pioneered innovative approaches focused on a normative care model of end-of-life care and advance care planning, specifically in a disability population. Dr. Loughnane also serves as the Medical Director of the Commonwealth Care Alliance Inpatient Service at Boston Medical Center, integrating outpatient care models with inpatient care for at risk populations. He previously served as Chief of Hospitalists at Quincy Medical Center, where he co-founded Life Choices: A Palliative Care and Hospice Program that was honored by Beacon Hospice in 2009 with an Excellence in End-of-Life Care. He is board certified in Family Medicine and Palliative Care and Hospice Medicine.

Gary Lucking, Senior Associate, NHS Institute for Innovation and Improvement, first joined the NHS Institute in 2005 with responsibility for the Priority Programme looking at the delivery of care outside hospital. Since that time he has been involved with a number of programs, including supporting NHS commissioners, and more recently he has been extensively involved in delivering the NHS Institute's Healthy Places Healthy Lives Programme in his capacity as a Senior Fellow. Previously, he was an Executive Director of South Cheshire Health Authority, where he was responsible for the wider development of community-based services and initiatives such as GP Fundholding and Total Purchasing, and later he moved to the Cheshire and Merseyside

Strategic Health Authority, retaining responsibilities associated with primary care in addition to serving as the Strategic Lead for improving the management of long-term conditions.

Robb Malone, PharmD, Vice President of Practice Quality and Innovation, University of North Carolina (UNC) Health System, works with physicians and ambulatory care service areas to improve patient experience and outcomes, operational processes, and business performance. He has appointments as an Associate Professor of Medicine and Pharmacy and has held several positions within UNC Health Care and School of Medicine. He is a clinical pharmacist practitioner with experience in quality improvement and design, implementation, and evaluation of planned care programs for vulnerable patients, particularly those with diabetes.

David Margolius, MD, is an internal medicine resident in the San Francisco Primary Care Track at the University of California, San Francisco (UCSF). During medical school, he was a research fellow at the Center for Excellence in Primary Care at UCSF. He coordinated a study at the Family Health Center at San Francisco General Hospital evaluating the effectiveness of health coaching, home-blood pressure monitoring, and home-titration of medications in treating hypertension. Additionally, he worked with the management and staff at community health centers in San Francisco to improve access and clinical outcomes, and to facilitate team building. His main interest is to increase access to quality primary care.

Elizabeth Martz, Manager, Southcentral Foundation (SCF), has worked at the SCF Development Center for five years. Her journey with SCF began as an Administrative Support through the ASTP. Over the years, she has been actively progressing in title and responsibilities, all the while learning about improvement, workforce development, and organizational learning. Her years of experience allow her to serve as the L&D Manager and as an L&D generalist, as it pertains to learning and workforce development for SCF.

Pranav Mehta, MD, MBA, FACHE, Vice President, Ambulatory Network Services, North Shore–Long Island Jewish Healthcare System, is an examiner for the prestigious National Malcolm Baldrige Performance Excellence Program. He is board certified in Internal Medicine and Pediatrics. Dr. Mehta is an Assistant Professor of Medicine and Pediatrics at the Hofstra North Shore–LIJ School of Medicine. He received his Physician Executive MBA from the University of Tennessee.

Victor M. Montori, MD, MSc, Professor of Medicine, Mayo Clinic, is also the lead investigator of the Knowledge and Evaluation Research Unit. He serves as Director of the Healthcare Delivery Research Program at the Mayo Clinic Center for the Science of Healthcare Delivery. A diabetologist and health services researcher, he is interested in health care delivery and outcomes for patients with chronic disease. Dr. Montori serves on the editorial board of the *Annals of Internal Medicine* and has authored more than 300 peer-reviewed publications on his areas of interest.

Nelson Nauss, Applications Development Manager, University of North Carolina Health Care (UNCH), recently served as Senior Project Manager for UNCH in their successful achievement of the Office of the National Coordinator's Authorized Testing and Certification Body 2011/2012 compliance for both EH and EP. He also serves as liaison to the Practice Quality and Innovation team for the design and implementation of meaningful use requirements.

Anette Nilsson, Project Leader, Qulturum, County Council of Jönköping in Sweden, focuses on innovation and learning within health care mostly with team and leadership programs and improvement work. She has built an innovative unit within health care, certified by Investors In People. Ms. Nilsson has experience with

improvement work in many different contexts, both in health care systems and in private companies.

Laura K. Noonan, MD, Director, Center for Advancing Pediatric Excellence, Department of Pediatrics, Levine Children's Hospital (LCH) at Carolinas Medical Center, is also a Charlotte AHEC Senior Improvement Advisor at Carolinas Medical Center. Her areas of interest and expertise include health care quality improvement methodology and framework both as an author, instructor, and principal investigator. Her most recent publication is as a contributor to the textbook "Pediatric Clinics of North America." She chairs the Carolinas Healthcare System's Health Literacy Initiative, implementing health literacy strategies throughout the system. Prior to joining the Carolinas Healthcare System in 1994, Dr. Noonan practiced in the greater Charlotte area, and was a Clinical Instructor in the Department of Pediatrics at the University of North Carolina, Chapel Hill. Dr. Noonan currently chairs the LCH Pediatric Quality Assurance/Improvement Committee and the Pediatric Education committee, and is a member of the American Academy of Pediatrics and the North Carolina Pediatric Society.

Leslie Norris, DNP, Nurse Practitioner, Riverview Medical Associates, has been a nurse practitioner for 12 years with experience in family practice, urgent care, long-term care, and internal medicine. She is an adjunct faculty member at Western Carolina University and at the University of Alabama Birmingham. Dr. Norris obtained her BSN from Western Carolina University, her MSN from Clemson University, and her DNP from the University of Alabama Birmingham. She is a frequent speaker at local, state, and national conferences, with her most recent presentations at the Tennessee PA FallFest and SpringFest, the Georgia PA Association Summer Conference, and the NPACE Primary Care Conference.

Elizabeth Oyekan, PharmD, Pharmacy Quality and Medication Safety Leader, Kaiser Permanente, is also the Southern California co-leader for the outpatient pharmacy clinical services and the Medication Adherence Steering Committee. She has contributed to the advancement of appropriate medication use and adherence in patients with chronic conditions within and outside Kaiser Permanente and is the author of the BSMART Handbook, provider guide, and interactive modules – provider tools used to optimize medication adherence and appropriate medication use in patients with chronic conditions. Dr. Oyekan has served as a board member for the California Society of Health-System Pharmacists and is a member of the Academy of Managed Care Pharmacy and the Care Management Society of America. As an active member of the community, she is involved in local and international medical missions and on community youth orchestras.

Lydia Paull-Flores, MA, is the Senior Manager of the California Quality Collaborative, a health care improvement initiative by the Pacific Business Group on Health. Previously, she was the Project Manager for the Quality, Risk, and Safety Department at the Palo Alto Medical Foundation (PAMF), working with multidisciplinary teams to develop Lean process improvement and supporting clinical variation reduction projects. She provided Lean training throughout PAMF as both a facilitator of Lean projects and a trainer of Lean methodology. She focused on patient care in the areas of medication administration, chronic pain, and hypertension. In 2011 she attended the IHI Summer Immersion Program.

Kathryn Phillips, MPH, is the Director of the Safety Net Medical Home Initiative (SNMHI) at Qualis Health. The SNMHI is a national demonstration project that aims to improve clinical quality, patient experience, provider/staff satisfaction, and operational efficiency, and develop a replicable model for patient-centered medical home transformation in the safety net. Ms. Phillips directs the overall initiative activities, coordinates dissemination efforts, and supports the project team. She also has responsibility for regional policy activation and works with regional leaders to enhance the sustainability of practice transformation efforts through

payment reform, workforce development, and community engagement. Prior to joining Qualis Health, Ms. Phillips managed grant programs for the Center for Prevention and Health Services at the National Business Group on Health with responsibility for the Maternal and Family Health Initiative and Clinical Preventive Services Translation Project. She managed advisory boards and expert panels; developed purchasing guidelines; conducted evidence reviews; and authored and edited toolkits, issue briefs, and white papers on a wide range of topics.

Jennifer Powell is an improvement advisor specializing in broad-scale implementation of quality improvement initiatives across health care settings and communities. In 2002, she served as Director for the IHI IMPACT Leadership Community, leading programs and innovation communities for senior leaders. She directed the Patient Access and Efficiency Initiative, a QI initiative to improve access across 60 outpatient clinics at UNC Health Care System utilizing practice coaches. Currently, Ms. Powell is a technical advisor for the Aligning Forces For Quality (AF4Q) Initiative and a QI Coach for four Chapter Leadership Teams of the American Academy of Pediatrics that are leading asthma collaboratives across their regions.

Valerie P. Pracilio, MPH, is a Project Director for Quality Improvement in the Jefferson School of Population Health at Thomas Jefferson University, where she is responsible for organizing efforts on various research projects related to health care quality and patient safety improvement, organizational culture, and teamwork. She served as managing editor and author of two texts, *Governance for Health Care Providers: The Call to Leadership* and *Population Health: Creating a Culture of Wellness*. She is also a graduate of the American Hospital Association Patient Safety Leadership Fellowship.

Lee Radosh, MD, Director of the Family Medicine Residency Program, Reading Hospital and Medical Center, is also an Associate Professor in the Department of Family and Community Medicine at the Temple University School of Medicine, and a Clinical Assistant Professor in the Departments of Family and Community Medicine at the Drexel University College of Medicine and the Penn State College of Medicine. He currently leads several projects at his residency program; his office was selected to participate in the Governor's Office of Healthcare Reform Chronic Care Initiative for the South Central Region, and was awarded level 3 PCMH recognition from the NCQA. Dr. Radosh has many professional interests, including medical student education, research, medical informatics, medicine and the media, and practice management. He is a peer-reviewer for several journals and recently served on the editorial board of *Family Medicine*. He hosts a monthly live, call-in cable television show called "Medicine in the News." He has several publications and has lectured extensively on the patient-centered medical home and practice transformation. He is currently on faculty of an IPIP-sponsored collaborative in Pennsylvania to assist over 20 residency-associated practices in transformation.

Brenda Reiss-Brennan, MS, APRN, CS, Mental Health Integration Director, Intermountain Healthcare, is a psychiatric nurse practitioner practicing in primary care for over 30 years. As a principal investigator, she is leading Intermountain's adoption and diffusion of clinical integration for mental health and primary care. The evidence and quality of the Mental Health Integration (MHI) program has spread rapidly in over 70 medical group clinics, including uninsured, rural, and 20 non-Intermountain community clinics. She holds a longstanding faculty appointment at the University of Utah College of Nursing and is currently a doctoral candidate in Medical Anthropology. She serves as a local and national consultant for MHI implementation and research.

Cheryl Rivard is the Patients as Partners Coordinator for Vancouver Coastal Health (VCH). She has worked in primary health care for the 12 years in various roles; the last few years her work has been focused on practice

and health care system redesign. Her current position at VCH focuses on patient and public engagement for primary health care, working with the Practice Support Program and Integrated Primary and Community Care team. She has participated in quality improved projects such as the Institute for Healthcare Improvement Reducing Avoidable Emergency Department Visits, the Provincial Health Literacy project, and the "How's Your Health" Prototype for British Columbia.

Regina Roberson is Quality Improvement Program Manager at Reach Out and Read, Inc., whose quality improvement experience began in 1990 while employed by Manor Healthcare. She was responsible for the development and management of quality improvement programs at several long-term care facilities, where she was the administrator and later oversaw quality improvement programs at multiple sites as Regional Director for Southeast Florida. In 1999 she joined Atria Healthcare as Regional Director and then in 2001 moved to Arbor Oaks, where she was responsible for oversight of their quality improvement programs. In 2008, Ms. Roberson assisted in developing and running a Quality Improvement Pilot Project for Reach Out and Read that now serves as the template for a national online and interactive QI initiative in pediatric literacy promotion.

David Roll, MD, is a primary care internist and pediatrician at Revere Family Health, a clinic of the Cambridge Health Alliance. He has been active in his site's pilot team for medical home development and is a member of the CHA IRB. In collaboration with addiction psychiatry, he started a program to treat opiate addiction with suboxone in a group visit format in the primary care site. He is a Primary Care Innovation Fellow at Harvard Medical School, working on improving systems for the management of chronic pain in primary care.

Jackie Ross, BS, is the Project Manager for Medical Home with Legacy Health in Portland, Oregon. She began working with the medical home model in 2007 and came to Legacy in 2010 to assist with the transition of their 17 Primary Care Clinics to the medical home model. She recently submitted surveys and received Tier 3 recognition for Legacy's 13 Oregon Clinics for Oregon Patient Centered Primary Care Home Certification. Ms. Ross assisted the Legacy sites with process improvement projects, data analysis, and work flow development. She has presented to a number of audiences on Legacy's medical home transition and assisted in educational presentations for local payers.

Amy Roy, RN, BSN, CCM, is the Manager of Clinical Integration at Baycare Health Partners, where she has worked for over 10 years. She is responsible for leading the development, implementation, and evaluation of an overall strategy for the clinical integration and care and case management activities at Baycare, as well as leading the development and implementation of Baycare activities to assist practices in achieving NCQA Patient Centered Medical Home recognition. Her additional responsibilities include researching and participating in developing and implementing outpatient clinical guidelines and care models that support clinical integration initiatives. Ms Roy is currently pursuing a Master's of Science in Nursing degree.

Diane Russell, RN, MBA, is the Director of Medical Management and Quality for the Baystate Medical Practice group of Baystate Health and has held this position for 10 years. She is responsible for fostering high-quality, cost-effective care throughout the Baystate Medical Practices, and she is accountable for defining and implementing strategies for managing population-specific patient care initiatives to ensure high-quality care and service is provided throughout the medical practices. Through her work she has helped lead multiple primary care practices in transforming to patient-centered medical homes. Ms. Russell has a BS in Nursing from Salem State College and an MBA with a Health Care Concentration from Western New England College.

Patricia A. Rutherford, RN, MS, Vice President, Institute for Healthcare Improvement (IHI), is responsible for leading innovation work in IHI's clinical office practice redesign, improving access and flow in specialty practices, optimizing care coordination and transitions in care, and the Transforming Care at the Bedside initiative. She is also the co-investigator for the STate Action on Avoidable Rehospitalizations (STAAR) initiative. Her skills include knowledge of process improvement, innovation, and idealized design; coaching clinicians, staff, and senior leaders on process improvement; and managing all aspects of large-scale performance improvement initiatives.

Barbara Sappah has been with Southcentral Foundation for six years, beginning in the Administrative Support Training Program and now serving as an Improvement Specialist with an emphasis in workforce development. While working at Southcentral Foundation, she earned her bachelor's degree in Business Administration and Management from Alaska Pacific University, a master's in Organizational Leadership from Gonzaga University, and Professional in Human Resources certification.

Marie W. Schall, MA, Senior Director, Institute for Healthcare Improvement (IHI), leads innovation and improvement projects including the STate Action on Avoidable Rehospitalizations (STAAR) initiative. She also serves as senior faculty for IHI's Breakthrough Series College and is a frequent speaker on IHI's spread methodology. Prior to joining IHI in 1995, Ms. Schall designed and led improvement projects for PRONJ (the New Jersey Quality Improvement Organization) and was Director of Research for the Health Research and Educational Trust of New Jersey, a non-profit affiliate of the New Jersey Hospital Association.

Amy Schwartz, PhD, Healthcare Lead, IDEO, is a cognitive psychologist, founder of IDEO Chicago's User Research Group, and senior thought-leader in the company's Health and Wellness domain. She has over 25 years of professional experience in research, design, and innovation and has worked with a diverse set of clients. She has contributed her innovative research methodologies and human insights to award-winning projects ranging from the design of surgical instruments and consumer health products to adherence strategies for the treatment of chronic illnesses, new services for retail-based health clinics, and the design of a medical simulation center for a major medical school. She excels in helping clients frame problems in new ways to inspire innovative design solutions. Her current challenge is how to bring human-centered design thinking to big, systemic health and wellness problems in the era of health care reform. Ms. Schwartz is a frequent presenter on strategies for transforming health care, empowering both patients and care teams, design research, health trends, and behavior change and adherence.

Colleen M. Schwartz, RN, Patient Centered Medical Home Initiative Director, Pennsylvania Academy of Family Physicians (PAFP), has served in a variety of roles at PAFP, including as coach and quality improvement technical coordinator. In her current role she assists physician members and their practices in becoming patient-centered medical homes. Her experience includes working at a Federally Qualified Health Care Center, where she learned the Chronic Care Model, serving as surgical services director for a wound care center, and working on an online media-based health care publication and database. Ms. Schwartz is a diploma nurse who graduated from Lancaster General Hospital School of Nursing, she has a Pennsylvania RN license, and she graduated from Penn State with a bachelor's in Business Administration with a minor in Health Care Management.

Andrew Scott-Clark, MRPharmS, MSC, HonFPH, Deputy Director of Public Health, Eastern and Coastal Kent Primary Care Trust, UK, leads the Thanet district's Triple Aim project that aims to reduce health inequalities between the two most deprived wards and the least deprived wards through specific and focused

commissioning. He has worked in the National Health Service for over 23 years in both the primary and secondary care sectors, and he has over 16 years of experience in various health commissioning organizations in southeast England. He currently leads the Public Health Directorate of NHS Eastern and Coastal Kent and ensures that strategic direction and commissioning meets the needs of the population, is consistent with partner organizations, and is based on good information.

Cory Sevin, RN, MSN, NP, Director, Institute for Healthcare Improvement, has 30 years of experience working with both individuals and health care organizations in supporting change for improvement, including 20 years as a nurse practitioner working with adolescents and their families in the areas of health risk behavior change, and working with adults with chronic conditions. She also led primary care practice transformation as Vice President of Operations at Clinica Campesina Family Health Services. Ms. Sevin received her BSN in 1976 from the University of Michigan and her MSN in 1980 from the University of Cincinnati.

Joanne Shear, MS, FNP-BC, National Primary Care Clinical Program Manager, Department of Veterans Affairs, is a national leader involved in the development and implementation of the Veteran Health Administration's (VHA) patient-centered medical home model. VHA is the largest integrated health care organization in the US, serving over 8 million veterans, with a network of 152 medical centers and over 750 community-based practices. Ms. Shear serves VHA as a clinical resource in planning, designing, integrating, implementing, modifying, administering, and evaluating clinical care and national health care policy. She is a consultant to key management officials regarding the collection and analysis of system-wide health care data and trends, including the integration of measures and models for assessing health care trends, care delivery systems, quality, risk, and utilization of resources throughout the nation.

Tracey Sherin, MSc, is a Senior Researcher at the Health Quality Council in Saskatchewan, Canada. In her role, she specializes in mentoring and coaching improvement teams, with a focus on developing and using measures for improvement. She has contributed her expertise to improvement initiatives in drug management in long-term care, chronic disease management, Clinical Practice Redesign⁸⁴⁸², and leadership for improvement. She is currently a faculty member and coach for the Health Quality Council's Quality Improvement Consultant Program.

Jack Silversin, DMD, DrPH, President, Amicus, Inc., is a health care consultant with 30 years of experience working with physician organizations, hospitals, and health systems to improve their ability to implement change. He helps organizations develop shared vision, strengthen leadership and governance, and improve administration-physician relationships. Dr. Silversin is the thought leader for physician compacts in health care – informal expectations that have the power to support or derail change efforts. He has worked with many of the most successful, innovative health care organizations in the US, Canada, and the UK. He co-authored the book, *Leading Physicians Through Change*, and serves on the Harvard University Faculty of Medicine.

Christine Sinsky, MD, is a general internist at Medical Associates Clinic and Health Plans in Iowa. She is a Director on the American Board of Internal Medicine, serves on the physician advisory panel for the National Committee for Quality Assurance physician recognition programs, and is a member of the Society of General Internal Medicine's Patient Centered Medical Home (PCMH) working group. Dr. Sinsky is a frequent invited lecturer on practice innovation, redesign, and the PCMH, including for the American College of Physicians, the Institute for Healthcare Improvement, the Patient Centered Primary Care Collaborative as well as private and academic medical centers.

Thomas Sinsky, MD practices internal medicine at Medical Associates Clinic and Health Plans, Iowa's oldest multi-specialty group practice medical clinic, consisting of over 100 physicians, and located in Dubuque, Iowa. He is a member of the Society for General Internal Medicine. Dr. Sinsky has presented workshops on practice redesign in the US and Canada.

Mina Sisodiya, RN, MSN, is the Director of Clinical Services for South Calgary Primary Care Network. She is responsible for collaborating with family physicians to address the primary care health needs of the population living in south Calgary. Her main focus is developing, implementing, and evaluating clinical programs aimed at improving access to primary care services. Her nursing career spans over 23 years and includes a background in public health, population health, research, and policy development.

Elaine M. Skoch, MN, EMBA, Practice Metrics Manager, TransforMED, has worked to improve services for the chronically mentally ill, including empowering people to participate in their care by partnering with providers, improving the quality and efficiency of care with a focus on prevention and wellness, and improving access to care. For the past 15 years she has served in administrative and leadership positions in both public and private health care settings. Ms. Skoch has experience in performing major systems analysis and reorganization, organizational development, long range planning, marketing, change management, budgetary oversight, and program evaluation through continuous quality improvement initiatives. Her clinical nursing experience includes the ICU and telemetry, and providing services for indigent and homeless clients in the inner city.

Sally Sobolewski, RN, MSN, Director of Practice Improvement, Visiting Nurse Service of New York, works with leaders and front-line clinicians in designing, testing, and implementing ideas and practices to achieve, exceed, and sustain quality measures and improve patient care, satisfaction, and safety. She has extensive experience in conducting internal Learning Collaboratives, based on the Institute for Healthcare Improvement Breakthrough Collaborative design, in critical areas for home care, including wound management, home health aide partnering, patient satisfaction, and transitional care. Over the last year, she has worked with home care clinicians and administrators in partnering with several local hospitals in cross-collaboration to improve care transitions. Ms. Sobolewski has held a variety of positions in home care since 1978, including an extended tenure at the Visiting Nurse Association of Southeast Michigan and positions in education, including Clinical Instructor at Columbia University School of Nursing from 1991-1993.

Donald Spencer, MD, Medical Director and Vice President of Ambulatory Care, University of North Carolina (UNC) Health Care, has more than 30 years of experience as a practicing family physician with 25 years in academic medicine. After private practice experience in rural Anson County, North Carolina from 1980 to 1986, he taught and practiced from 1986 to 1996 at the University of Missouri-Columbia Department of Family and Community Medicine. He has been with the Department of Family Medicine at UNC Chapel Hill since 1996, where he is presently Professor of Family Medicine.

Kevin Stange, MD, is an actively practicing general surgeon at Alaska Native Medical Center where he has worked for over 20 years in the surgery department as a staff surgeon, chief of surgery, and as the medical centers medical director. He facilitated the implementation of Advanced Access in the specialty areas of the medical center during his tenure as medical director. He has presented on Advanced Access in the specialty setting and has worked as a consultant with Tantau and Associates to help organizations improve access for

their patients. Dr. Stange graduated from Wright State University Medical School in Dayton in 1981 and completed surgical residency in Phoenix in 1989.

Christopher Stanley, MD, MBA, is the Senior Medical Director for UnitedHealthcare's Rocky Mountain Region. In this role, he is a member of the health plan's senior leadership team and the organization's top clinician overseeing Colorado, New Mexico, Montana, and Wyoming. Dr. Stanley holds a Bachelor's of Science degree in chemistry from Missouri State University, a Doctor of Medicine degree from the University of Missouri-Columbia, and a Master's of Business Administration degree from the University of Colorado. Dr. Stanley's focus is to enhance the delivery of high-quality, efficient health care for UnitedHealthcare's 750,000 members in the four-state region, both inside and outside the hospital.

Richard C. Stark, MD, Director of Primary Care Operations, Veterans Health Administration, Department of Veterans Affairs, has played an integral part in developing, leading, and providing guidance to VA facilities on implementation of Patient-Aligned Care Teams (PACT), VA's medical home model. Previously, he was Associate Chief of Staff for Ambulatory Care for the VA New Jersey Health Care System, where he managed Primary Care for two Medical Centers and ten Community Based Outpatient Clinics (CBOC) as well as other outpatient services such as Emergency Medicine, Compensation & Pension (C&P), and VA/DoD Sharing Agreements at Fort Dix and McGuire AFB while maintaining an active practice as a primary care provider. He is a graduate of Colgate University and New Jersey Medical School, trained in Internal Medicine at the University of Medicine and Dentistry of New Jersey, and is board certified in Internal Medicine. In addition to his work with the Primary Care program office and PACT, Dr. Stark chairs the VHA Outpatient Systems Redesign Steering Subcommittee and serves on a number of national committees.

Rose M. Steiner, RN, BSN, MBA, CPHQ, Clinical Transformation Consultant, Southwind, a Division of The Advisory Board Company, is a registered nurse with over 30 years of experience. She specializes in process improvement in the physician office setting, and she served as the Michigan State Director for Improving Performance in Practice from 2008 to 2010. Ms. Steiner is well-versed in the Patient-Centered Medical Home concept, and uses her health care quality and process improvement skills to move practices in this transformation process. Additionally, she works with the transition in care from hospital to home for patients. She achieved a Lean Six Sigma Black Belt in health care, and is currently President of the Michigan Association of Healthcare Quality.

Somava S. Stout, MD, Vice President of Patient Centered Medical Home Development, Cambridge Health Alliance (CHA), has held a number of leadership roles at CHA, including Medical Staff President, Chair of the Patient Care Improvement Committee, membership in the 2015 Vision Committee, and co-lead of the ACO-PCMH Executive Workgroup. Dr. Stout has been deeply committed to improving the health of underserved communities in both the domestic and international settings since the beginning of her medical career. Her current work examines the concept of empowerment over one's health at the individual, health system and community levels, through the patient-centered medical home transformation process, through the CHAMPIONS (CHA Mediators of Partnerships in Our Neighborhood) and Walking In the Patient's Footsteps projects, through the Innovation Fellows program at Harvard Medical School, and through Varqa Foundation in Guyana.

Jonathan R. Sugarman, MD, MPH, is President and CEO of Qualis Health, a national leader in the generation, application, and dissemination of knowledge to improve the quality of health care delivery and health outcomes. He has served as a leader of and advisor for numerous government and private sector quality initiatives addressing a broad range of acute and chronic conditions and delivery system models. A graduate

of Harvard College, the Albert Einstein College of Medicine, and the University of Washington School of Public Health and Community Medicine, he is Clinical Professor in the Departments of Family Medicine and Epidemiology at the University of Washington.

Catherine I. Tantau, BSN, MPA, President, Tantau & Associates, is an internationally recognized authority on access, efficiency, and flow systems in health care. Her extensive experience includes designing and implementing demand management models with a special emphasis on utilizing health care workers in fully expanded roles. She led the creation and implementation of Advanced Access and developed the Access and Office Efficiency Internal Collaborative Model. Ms. Tantau has worked with hundreds of health care organizations in the US and Europe using this model to improve access and medical office flow. She has chaired and been faculty for the Institute for Healthcare Improvement's national Waits and Delays Collaborative, and she was advisor to the UK National Health Service Cancer Care Access Initiative. She has published widely in peer-reviewed journals and speaks internationally on various health care topics.

Jane A. Taylor, EdD, Improvement Advisor, Institute for Healthcare Improvement (IHI), advises several IHI initiatives, including Transforming Care at the Bedside, Transitions Home, Reducing Harm from Falls, and Improving Perinatal Care. A long-time Improvement Advisor for IHI Collaboratives and programs, she is currently faculty for IHI's Improvement Advisor Development Program. Dr. Taylor also provides Improvement Advisor consulting on chronic disease management, improving rehabilitation care, home health medication management, and the North American Sepsis Campaign, among others. Over the past 20 years, she served in hospital operations as a hospital CEO and as a quality improvement professional. Dr. Taylor has published articles on rapid cycle change, the role of middle management in transformation, the art of using questions, and transitions home.

Corinne Thomas, RN, BA(Hons), MA, Senior Clinical Advisor for Patient Safety, South West Strategic Health Authority, UK, is responsible for the implementation of the South West Quality and Patient Safety Improvement Programme. She has 13 years of experience as a director of nursing in acute care and in organizations providing community, mental health, and learning disability services. She also has experience leading change across large, complex organizations. In March 2009, she completed the Institute for Healthcare Improvement Patient Safety Executive Development Program and more recently has qualified as a Team Resource Management Instructor with Global Air Training. Ms. Thomas is an Improvement Faculty Fellow with the NHS Institute for Innovation and Improvement.

Jonathan Thornhill, Manager, P&A Practice Quality and Innovation, University of North Carolina (UNC) Health System, leads a team supporting the delivery of high-quality care and continuous improvement of health care processes. A collaborative approach utilizing transparency, analysis, and facilitation forms the foundation of this team's efforts to implement meaningful use of electronic health records, participate in quality reporting programs such as the Physician Quality Reporting System, and coach internally sponsored improvement projects. Prior to joining UNC, he worked as a Project Manager for Epic Systems Corporation. He is a Lean/Six Sigma Black Belt in Training and a student in the Masters of Health Administration program at the UNC School of Public Health.

Margreth Tolson, Leader, Community Engagement, Vancouver Coastal Health Authority, has been involved in the health field since 1993, focusing on community-based education and peer support programs. Her experience includes engagement with a wide range of populations, including homeless and prisoners' groups (Canada), brothel communities (Indonesia), and nomadic families and paramilitary neighborhoods (Ireland).

Her international experience in health issues led VCHA Community Engagement to new recognition of the need for multilingual engagement in Vancouver's ethnically and linguistically diverse environment. She continues to advocate for including these and other vulnerable communities in health care planning, most recently conducting extensive public consultation with hard-to-reach groups to support the British Columbia Ministry of Health's new HIV/AIDS strategy.

Laurel Trujillo, MD, Medical Director of Quality, Palo Alto Medical Foundation (PAMF), has worked in quality improvement since 2001. Current quality initiatives include variation reduction projects in 22 medical and surgical specialty departments, a project to integrate shared decision making into primary care, development of a provider dashboard, and design of metrics for primary care redesign. Dr. Trujillo Co-Chairs PAMF's Quality Improvement Steering Committee and PAMF's Pay For Performance Steering Committee, which works to improve quality measures in the statewide Integrated Healthcare Associates Pay for Performance program. She obtained her bachelor's in Biology-Chemistry from University of the Pacific in California, her MD from University of California San Francisco, her residency training in Primary Care Internal Medicine at UCLA Medical Center, and completed a fellowship in the California HealthCare Foundation's Health Care Leadership Program. She practices at the Los Altos Center of PAMF.

Sharon Tucker, MD, FAAFP, is a Family Physician in Mesquite, Texas, employed by Health Texas Provider Network (HTPN) for the past 15 years. She is a graduate of the University of Texas Southwestern Medical School, and did her residency at Charlton Methodist Hospital in Dallas (affiliated with UTSW). She is the Chair of the HTPN Patient Safety Committee, a member of the Baylor System Patient Safety Committee, a member and Treasurer of the HTPN Board of Directors, Patient Safety Physician Champion for ambulatory medicine for HTPN, and lead physician in her local medical group.

Shelly van't Riet, MHSA, RD, is a Performance Improvement Specialist at Virginia Commonwealth University (VCU) health system, an academic medical center in Richmond, Virginia. After a 15-year career as a Registered Dietitian, she received her MSHA from VCU and began formally working in health care quality. She also is credentialed as a Certified Professional in Healthcare Quality, a Six Sigma Black Belt, and a Project Management Professional. She is the immediate Past President of the Virginia Association for Healthcare Quality and is also active in the National Association for Healthcare Quality.

Edward H. Wagner, MD, MPH, FACP, Director of the MacColl Institute for Healthcare Innovation at the Center for Health Studies, Group Health Cooperative, is a general internist/epidemiologist. His research and quality improvement work focus on improving the care of seniors and others with chronic illness. Since 1998, he has directed Improving Chronic Illness Care, a national program of The Robert Wood Johnson Foundation. He and his MacColl Institute colleagues developed the Chronic Care Model, which has now been used in quality improvement programs worldwide. He also is Principal Investigator of the Cancer Research Network, a National Cancer Institute funded cancer research consortium of 12 HMO-based research programs. Dr. Wagner has written two books and more than 250 publications. He serves on the editorial boards of Health Services Research, BMJ, Journal of Clinical Epidemiology, and Journal of Cancer Survivorship. He is also a member of the Institute of Medicine.

William J. Warning, MD, CMM, FAAFP, is Program Director of the Crozer-Keystone Family Medicine Residency Program. He is also Founder and Faculty Chair of the Pennsylvania Patient-Centered Medical Home (PCMH) Residency Program Collaborative of the Pennsylvania Academy of Family Physicians. Dr. Warning also serves as lead physician for the SEPA Chronic Care Collaborative and is the IPIP Physician Champion. He was lead

physician for NCQA PCMH Recognition, Level 3 (2009).

Ray Weick, MD, is a full-time family practitioner who, in addition to his clinical practice, is a member of the St. John's Mercy Medical Center multispecialty group and serves the physician group in various administrative roles. For the last two years, he served on the board of directors, the pediatric quality committee, and the electronic medical record council. Dr. Weick is also the physician lead for the group's patient portal and medical home endeavors.

Eric M. Weil, MD, Associate Medical Director, Massachusetts General Physician's Organization, is also Associate Chief for Clinical Affairs for the Massachusetts General Hospital (MGH) Division of General Medicine. He is also the MGH medical director for the Medicare Demonstration Project designated as Care Management for High Cost Beneficiaries, a Medicare Demonstration Project that seeks to optimize the care delivered to sick and high-risk Medicare patients through care coordination in addition to other innovative approaches. For the past 13 years, he has been a practicing primary care physician on faculty at MGH, and has served in many roles, including chief for the internal medicine practice at a health Center and chair of a local board of health. He has been involved in a multitude of educational, primary care, and community-based initiatives on local, hospital, statewide, and national levels. He has also chaired the MGH Clinical Policy Committee. His key areas of academic and operational interest include care redesign and process improvement.

Sam Weir, MD, Co-Director, University of North Carolina (UNC) Family Medicine Center, is also Director of Quality Improvement at UNC Department of Family Medicine. He teaches residents and fellows as an associate professor at UNC School of Medicine.

David M. Williams, PhD, Improvement Advisor, truesimple Consulting, is also on the teaching faculty of The George Washington University School of Medicine and Health Sciences. He is also a Six Sigma Black Belt and serves as faculty and an Improvement Advisor (IA) for the Institute for Healthcare Improvement, supporting teams through leading system changes using the Model for Improvement. Dr. Williams started his career as an urban street paramedic. For the last decade, he has acted as an internal and external IA to governmental agencies, hospitals, and for-profit and not-for-profit organizations. He works with clients to improve their organizations by enabling appreciation of systems, understanding of data and variation, testing changes, and recognizing the influence of psychology. He has published nearly 100 articles, led intensive workshops, presented at major conferences to thousands of attendees, and writes a popular blog.