



NETWORK NEWS

April
2019

WHAT'S INSIDE

pg. 2
Save the Date! Trainings

pg. 3
Measuring Office Visit Cycle Time

pg. 4
Is a "medical virtualist" specialty on the horizon?
MWCN Annual Walk@Lunch Day

pg. 5
National Education with Visual Food Models
Healthy & Fun Recipe: Easter Egg Smoothie Popsicles

pg. 6
Job Postings

Message from the MWCN President Ideas, Purpose and Future

Ronald Dwinells, M.D., MBA, CPE, FAAP
CEO, [ONE Health Ohio](#)



In early March, members of the MWCN met in Columbus, Ohio to exchange ideas and discuss strategies on how to move forward with our Network.

We began with introspective exercises through reminiscing about our past accomplishments. I especially remembered those great annual conferences held in Chicago around the Christmas and New Year's holidays. The contents were always timely and as a bonus those holiday sales on the Magnificent Mile were really fun!

We also reviewed our mission statement:

...to enhance professional and personal growth for clinicians to become effective leaders for their health centers and promoters of quality, community-based primary health care.

Finally, we looked at our home website page where it describes what we do:

...supports Community Health Centers members by facilitating networking and sharing among clinical and quality improvement staff in the region.

After several hours of great discussions, we came up with four major focus topics:



CONTACT US

Midwest Clinicians' Network
321 W. Lake Lansing Road
East Lansing, MI 48823
517.381.9441
info@midwestclinicians.org
www.midwestclinicians.org

OFFICERS

**Ronald Dwinells, M.D., MBA, CPE,
FAAP, CEO**

President
ONE Health Ohio
Youngstown, Ohio

Heather Hicks, RN

Past-President
Heart of Kansas Family Health Care
Great Bend, KS

Stephanie Carr, BSN, RN

President-Elect
Primary Health Care
Des Moines, IA

Jeff Cooper, CFO

Treasurer
Shawnee Health Center
Carterville, IL

Laura Pryor, RN, MSN

Secretary
Windrose Health Network, Inc.
Trafalgar, IN

BOARD MEMBERS

Lynne Adams, RDH, RN
Lisa Burnell, RN, BSN
John Carrington, PA
Diane Cummins, MSN, RN, LICDC
Loretta Heuer, PhD, RN
Stacey Gedeon, Psy.D., MSCP
Lanett Kane, Director of Nursing
Denise Koppit
Renee Mardis, MBA
Nicole Meyer, MBA
Debra Morrisette, DDS
Lenny Philips, MD, MBA
Michael Quinn, PhD
Darryl Roberts
Jennifer Smith

IDEAS, PURPOSE AND FUTURE

continued from page 1

Leadership: Because the primary mission of the Network is to help our clinicians become effective leaders, shouldn't we focus on this as a primary goal? We have so much talent and know-how amongst our members that I am sure we can come up with a series of leadership topics and present them at various State PCA meetings across the region. For example, I have been teaching leadership courses at our local medical school for over 25 years where I developed a seminar series called, "Don't Do That!" It is about all my "screw-ups" as a leader and the lessons are focused on what not to do in leadership. We can take a poll on who, in our Network are willing to develop a talk on this subject and also engage some national leadership speakers and make this a great series.

Research: One of my favorite things to do as a physician is clinical research. I have had four peer-reviewed research papers published. It is fun, productive and it provides excellent credibility to our health centers. Collectively, we have a wealth of data and information where we could do great research together. This, in turn, can be used to write for grants to help support our programs.

List serve re-design: I have always been impressed with Amanda's work on the list serve questions and answers. When I was the MWCN President the first time, I wanted to organize, categorize and index this information better, but it got put aside. We discussed this at length in Columbus and I think we have a pretty good idea on how to move forward with this. It is a great benefit for members!

Survey Instrument: This is a no-brainer in terms of keeping it going and enhancing it. They are great tools used by many organizations, even on a national level. This is a great data source for future research as well.

In the coming weeks, Amanda, our board and I will have discussions about these four items and start brainstorming this more. We hope to reach out to all of you soon and we welcome feedback and input. Please share with us your ideas.

I believe the future of MWCN will be exciting! I can't wait!



Save the Date!

September 13-14, 2019

**CHC Clinical Leaders
Training Institute-
Introductory Course**

IPHCA Institute for Learning
500 S. Ninth St., Springfield, Illinois

[Registration Coming Soon>>](#)

Open to All!

**PCMH Regional Training –
Introductory and Advanced**

Date: November 12 – 14, 2019
Location: 500 S. 9th St. Springfield, IL

Midwest Clinicians' Network and the Illinois, Wisconsin, Ohio and Indiana Primary Care Associations will be hosting a 2 1/2 day training in Springfield, IL, which will cover the National Committee for Quality Assurance (NCQA)'s Introduction and Advanced Patient-Centered Medical Home (PCMH) educational training for health centers, Primary Care Associations (PCAs), and Health Center Controlled Networks (HCCN) staff. More information will be distributed as it becomes available.

Measuring Office Visit Cycle Time

By Tom Ludwig, RN, MBA, FACMPE

President/Owner, [Forward Healthcare Solutions, LLC](http://www.forwardhealthcaresolutions.com)

Does your health center receive patient complaints about long waits during the visit? Do you have a physician who is constantly behind schedule? Prolonged waiting times affect your practice in several ways. Patients can become dissatisfied to the point of leaving your health center. Physicians and staff become frustrated with delays that can result in long hours and patient complaints.

There are a variety of reasons for prolonged waiting times. Patients who arrive late, staff who take too much time with patients, providers who try to do too many things at once, and poor communication within the office are just a few of the many possible causes. Are you not sure where the problem lies in your health center? It might be time to measure your office visit cycle time.

According to the Institute for Healthcare Improvement (IHI), office visit cycle time "... is the amount of time in minutes that a patient spends at an office visit. The cycle begins at the time of arrival and ends when the patient leaves the office." Measuring the office visit cycle time can help you identify where the bottlenecks exist in your practice.

When measuring cycle time, you can measure as few or as many steps in the patient visit process as you wish. The fewer steps you measure, the easier it is - but you get less information. The more steps you measure, the more helpful your information will be - but it will also be more resource-intensive. The steps you will want to consider are:

- Patient appointment time
- Time patient checks in at desk
- Time patient is taken to exam room by staff
- Time staff leaves the room
- Time provider enters the room
- Time provider leaves the room
- Time patient leaves the room
- Time patient checks out at desk

IHI recommends that you measure a total of 15 patients in order to get a good average cycle time. The patients should also be measured on the same day of the week and at the same time of the day. Depending on your specialty - or where you think your bottlenecks are - you might also want to include lab, x-ray, or certain procedures in your cycle time measurement.

Cycle time can be measured manually or, depending on the sophistication of your electronic health record (EHR), automatically. The manual method can be done by staff or by patients.

A sample form can be found at IHI's web site, www.ihl.org. If you prefer to try to automate it, many EHRs are able to time-stamp several important steps in the cycle: patient check-in, staff logging in and out of the record, providers logging in and out of the record, and the end of the visit (closing the encounter).



Once you've identified where the bottleneck exists, focus on that step in the cycle and use basic process improvement tools (process mapping, plan-do-study-act cycle) to make changes that will improve your cycle time.

When measuring cycle time for the first time in your practice, you should consider doing several (if not all) of your providers. This will not only enable you to get an overall average for your health center, but you can also identify best performers within your practice and use them as a model for the others. As for a standard benchmark, IHI suggests that you take the amount of time that a patient spends with the provider and multiply that by 1.5. For example, if a patient spends 20 minutes with the provider, the ideal cycle time would be 30 minutes ($20 \times 1.5 = 30$). Please keep in mind that this benchmark is for ALL practices - private, public, large, small, primary care, specialty - and is not specific to FQHCs.

Improving patient cycle time can help reduce waiting times in your practice. It can become a valuable aspect of your practice's quality program. It not only makes the practice more efficient, it is also a great satisfier to patients, staff and providers.

If you would like more information on decreasing patient cycle time - or other aspects of improving patient flow - feel free to contact Tom Ludwig at tludwig@forwardhealthcaresolutions.com.

Is a “medical virtualist” specialty on the horizon?

By Erin Dietsche, November 30, 2017, MedCity News

Reprinted with Permission from: <https://medcitynews.com/2017/11/medical-virtualist-specialty/>

In a new JAMA viewpoint article, two physicians — Michael Nochomovitz and Rahul Sharma — discussed the potential behind creating a new specialty: the medical virtualist. Such a provider would spend most of his or her time caring for patients via a virtual medium.



Photo: bernardbodo, Getty Images

Telemedicine and digital health are on the rise. Additionally, as the medical field advances, more and more specialties are being added to the mix.

These factors prompted two physicians — Michael Nochomovitz and Rahul Sharma — to pen a [JAMA](#) viewpoint article on the potential behind a new specialty: the medical virtualist.

“This term could be used to describe physicians who will spend the majority or all of their time caring for patients using a virtual medium,” the authors wrote.

In the article, Nochomovitz and Sharma make their way to this conclusion based on a number of factors.

For one, telehealth isn’t only being used to treat minor ailments anymore. Now, clinicians are leveraging it to communicate imaging and lab results, change patients’ medications and manage more complex chronic diseases. Not to mention the role it can play in home visits and remote monitoring.

This push for technology has driven the development of various medical specialties. “For instance, critical care was not a unique specialty until 30 years ago,” the authors note. Hospitalists, laborists and intensivists are also relatively new specialties. Laparoscopic and robotic surgical equipment prompted the creation of specialties like interventional radiology, electrophysiology and general surgical oncology.

The success of a medical virtualist specialty would require key stakeholders to work on multiple factors.

First of all, the healthcare world would need to establish a set of core competencies and formalize certification for such a specialty.

Training would include techniques for achieving proper [webside manner](#), or the way a physician is able to communicate and convey empathy to a patient during a telehealth visit. It encompasses a host of factors: how close the provider is sitting to the camera, the background of the room they’re in, the lighting, what they’re wearing and a proper Internet connection. Additionally, a training curriculum would highlight the legal and clinical limitations of virtual care, on-site clinical measurements and continuing education notes.

If such a specialty is developed, Nochomovitz and Sharma note that “there could be a need for physicians across multiple disciplines to become full-time medical virtualists with subspecialty differentiation.” Urgent care virtualists, intensive care virtualists, behavioral virtualists and neurological virtualists are a few examples.

Despite the increasing prevalence of technology in healthcare, the authors note that in no way will the medical virtualist replace the traditional clinical encounter.

“‘Bricks and clicks’ will prevail for patients’ convenience and value,” they wrote. “Physicians will lead teams with both in-office and remote monitoring resources at their disposal to deliver care.”

Join MWCN for our
Annual Walk@Lunch Day
Wed, April 24th, 2019!



This is a great way to show your support of physical activity and a healthier workplace. Please let us know if you participate—either as a group or on your own we hope you walk at lunch.

To enter the challenge, send an email with details on how many staff participated and a photo if possible which may be used for the next newsletter to ricks@midwestclinicians.org. You will be automatically entered to win a prize!

National Education with Visual Food Models

Reprinted from: <https://www.nationaldairyCouncil.org/content/2019/nutrition-education-with-visual-food-models>

National Dairy Council's food models can help make teaching nutrition easy and fun.

They are versatile, printer-friendly and bring the 2015 Dietary Guidelines for Americans (DGA) and MyPlate recommendations to life. When printed on 8.5-by-11-inch paper, these food models represent true-to-life serving sizes of the individual foods. Nutrient information is provided on the back of the images in a format similar to the updated 2018 Nutrition Facts labels.

The DGA recommends Americans aged 2 and older make smart nutrition choices. Healthy eating patterns include low-fat or fat-free dairy foods, fruits, vegetables, whole grains and lean protein (e.g., meats, poultry, fish, beans, eggs and nuts).



National Dairy Council® presents 200 life-size food images. These are an ideal tool for teaching nutrition and complement the 2015 Dietary Guidelines and the ChooseMyPlate.gov food guidance system.

The food models help teach the concept of “balance, variety and moderation” — eating from all five food groups, eating a variety of foods within each food group and eating the recommended amounts from each food group.

The food models make it easy to teach nutrition as a stand-alone topic or as part of core curriculum subjects such as math or science. The leader guide comes with a variety of activities and lesson plans. To download the original Food Models resource, please click the link button below. then download the resource from the page.

[Click here](#)

HEALTHY & fun RECIPE: Easter Egg Smoothie Popsicles

Made of only fruit and coconut milk, you can totally be the fun one with these treats and serve these Easter egg popsicles with breakfast! These treats are healthy, cute and a simple way to surprise your kids. Recipe makes 6 eggs.

INGREDIENTS:

- 1.5 cup mixed frozen strawberries and raspberries
- 1 cup coconut milk
- 1/2 banana

ADDITIONAL SUPPLIES:

- 6 plastic Easter eggs
- 6 lollipop sticks or popsicle sticks
- something pointy like a pen or a chopstick to make holes in your eggs
- a squeeze bottle (author found hers at the dollar store)

DIRECTIONS:

1. In a blender, blend berries, coconut milk and banana until liquidy with no chunks of fruit.
2. Line up your eggs so the pointy side of the eggs face down. Using chopstick or a pen, poke a hole in each plastic egg on the wider side of the egg. Wash well after.
3. Fill a squeeze bottle with smoothie mix. Make sure your eggs are closed tightly, then carefully fill each Easter egg with the smoothie mixture.
4. Place egg in an egg carton for support. Add a lollipop stick to each egg in the hold in the egg.
5. Freeze Easter Egg Smoothie Popsicles for a minimum of six hours, preferably overnight!
6. TIP: run under warm water for a few seconds to make opening the frozen eggs easier.



Resource: <https://onmykidsplate.com/easter-egg-smoothie-popsicles/>

JOB POSTINGS

Illinois

OB/GYN Physician

Family Christian Health Center (FCHC) is seeking to hire a motivated full-time OB/GYN Physician. FCHC offers a competitive salary and excellent benefit package including National Health Service Corp program. Please contact Regina Martin, HR Manager at rmartin@familychc.org or 708.589.2017 for more information.

Various Positions

Community Health Partnership of IL is seeking to hire a part time dentist (Mendota, IL), part time physician (Harvard, IL) as well as part time seasonal support and provider staff for our 2019 spring and summer Agricultural Worker Outreach Program at all CHP locations. Think spring & plan ahead! We offer excellent benefits, competitive wages and a rewarding work experience. For more information please contact Barbara Sacco, HR Director at 312.795.0000x224, fax 312.795.0002 or email bsacco@chpofil.org.

Registered Nurse

Crossing Healthcare is seeking to hire a motivated full-time REGISTERED NURSE. We provide primary outpatient medical care and are expanding to a state-of-the-art Substance Use Disorder facility driven to provide quality care and service to the community. Please visit <http://www.crossinghealthcare.org/employment> to apply, or contact Shawna Cole, CHRO, by email scole@crossinghealthcare.org for more information.

OB/GYN Physician

Shawnee Health Service is seeking a board-certified or board-eligible OB/GYN PHYSICIAN to join our team in beautiful, scenic southern Illinois! You will work in a newly remodeled, state-of-the-art facility with a team of skilled OB/GYN physicians and Certified Nurse Midwives, in a Patient

Centered Medical Home Model. We offer competitive salary and benefit packages. For more information or to schedule a visit, please contact Emma Basler - ebasler@shsdc.org, (618) 519-9200, ext. 9570.

Various Positions

Asian Human Services Family Health Center, an FQHC with four locations, is seeking to hire a F/T Medical Receptionist Supervisor, Dental Assistants (for Niles location), as well as a Behavior Health Counselor (LCSW or LCPC). We offer great benefits and a competitive salary. If you are interest, please submit your resume to kmcnamara@ahsfdc.org.

Indiana

Various Positions

Various Positions open due to growth. Indiana FQHC **Heart City Health Center** is seeking to hire a part time dentist (Elkhart Indiana), Registered Nurses (Elkhart, In.), Family Physician (Elkhart, In.), OBGYN (Elkhart, In.), Mid-wives (Elkhart, In.) We are committed to our patients and our staff. Please send your resume to: shouser@heartcityhealth.org,

Various Positions

Windrose Health Network is seeking to hire two highly motivated full-time employees. We are hiring a Psychiatric Nurse Practitioner in Edinburg, Indiana and a Behavioral Health Provider in Franklin, Indiana. We have a family-friendly, supportive, environment that treats employees with respect. Windrose Health Network offers a competitive salary and benefit package that includes a program through NHSC that assists students in paying off loans. Please contact us through our website at windrosehealth.net or Indeed.com for more information.

Iowa

Various Positions

Primary Health Care, Inc. is seeking to hire a variety of positions including: Dentist; Pediatric Dentist; Certified Nurse Midwife; Distance Learning Specialist; Registered Nurse; Medical Assistant/ Licensed Practical Nurse and more! Navigate to our careers page at <https://pm.healthcaresource.com/cs/phc#/search> to search and apply for positions. Contact Rachael Miller at rmiller@phcinc.net for more information.

Kansas

Medical Director

Southwest Boulevard Family Health Care of Kansas City (FHC) is seeking a mission-focused full-time MEDICAL DIRECTOR. FHC is an established thirty-year old clinic. We have a state-of-the-art facility with mid-level providers and we serve a diverse population including multi-generational families. FHC offers a competitive salary and benefit package. To learn more, please contact Carla Southard (HR Coordinator) by e-mail at: CarlaSouthward@swbfhcs.org, or call 913-722-3100.

Michigan

Various Positions

Community Health and Social Services Center is seeking to hire a Licensed Master Social Worker (LMSW) with substance abuse certification, Spanish speaking Registered Dietician, Spanish speaking Research Assistant and a part-time Spanish Speaking Phlebotomist. For more information please contact Angela Salgado, HR Director via email: asalgado@chasscenter.org

continued on page 7

JOB POSTINGS

Missouri

Various Positions

Northwest Health Services is an FQHC looking for a PSYCHIATRIST with a calling to serve the underprivileged population of NW Missouri, a mission-minded DENTIST to service St. Joseph, MO, and a Family Practice PHYSICIAN for the St. Joseph area. We offer competitive salary, and an OUTSTANDING benefits package. Visit our website to apply www.nwhealth-services.org/careers or contact HR @ (816) 901-1040.

Various Positions

Primary Care Providers - Missouri: **The Missouri Primary Care Association** seeks dedicated healthcare professionals in the specialties of: Family Medicine, Internal Medicine, Pediatrics, OB/GYN, Psychiatry, Dentistry, Pediatric Dentistry, and Behavioral Health Professionals to fill positions throughout Missouri's rural and underserved areas. Competitive compensation and benefit package including Loan Repayment incentives. Contact Joni Adamson jadamson@mo-pca.org or visit <https://www.3rnet.org/missouri>

Nebraska

Various Positions

OneWorld Community Health Centers, Inc. in Omaha, NE is seeking a Behavioral Health Director, Behavioral Health Therapist, Physician, Physician Assistant, Nurse Practitioner, RN Nurse Manager, and Registered Nurse. OneWorld is a FQHC and a PCMH. Out of 1,400+ Community Health Centers nationwide, we rank in the top 2% for clinical quality. Our clinic is growing, and we need dedicated individuals to come join our team! We care about our employees, and it shows; in 2018 we were named one of the Best Places to Work in

Omaha®. We offer competitive salaries and generous benefits. Our clinicians are eligible for student loan repayment through NHSC and NURSE Corps. Please apply at www.oneworldomaha.org/careers.

Ohio

Various Positions

Community Health Centers of Greater Dayton in Dayton, OH has career opportunities for Family Practice physician, Nurse Practitioner, and Licensed Independent Social Worker. CHCGD offers a competitive salary and benefits. Contact Sheryl Fleming at sfleming@chcgd.org, or visit our website, www.communityhealthdayton.org.

Wisconsin

Various Positions

Progressive Community Health Centers (PCHC) is seeking to hire a motivated full-time REGISTERED NURSE, FAMILY MEDICINE PHYSICIAN, PEDIATRICIAN, DENTAL HYGIENIST and GENERAL DENTIST. PCHC offers a competitive salary and benefit package. For more information, contact Alison Thiel, Human Resources Generalist by email at alison.thiel@progressivechc.org.

If you have a job posting you would like added to our next newsletter, forward it to Renee Ricks at rricks@midwestclinicians.org

Various Positions

MidMichigan Community Health Services is seeking a fully licensed LMSW to join our thriving Behavioral Health Service as part of our outpatient Substance Use Disorders clinic in Houghton Lake, MI. Will consider part- and full-time employment. CAADC, master's level mental health degree from an accredited university, and experienced in treating patients across the lifespan. Salary commensurate with experience and generous health and benefit package included. May be eligible for NHSC loan repayment and/or recruitment incentives. Interested applicants can apply at <https://www.healthynorth.org/healthynorth/careers/>

OB/GYN Physician

Muskegon Family Care is seeking to hire a full-time OB/GYN Physician. We are a Federally Qualified Health Center, offering Federal and State student loan reimbursement opportunities, competitive salary and benefit package. Visit our site at mfc-health.org to complete an application or contact Ashlee Koone by email koonea@mfc-health.org or phone (231) 737-1711.

Minnesota

Chief Executive Officer

The Sawtooth Mountain Clinic (SMC) is seeking a Chief Executive Officer. SMC is a Federally Qualified Health Center (FQHC) located in Grand Marais, Minnesota. An exciting opportunity to lead an innovative community health center dedicated to helping ALL people live healthier lives. Visit www.sawtoothmountainclinic.org/CEO for more information about this position, submitting cover letter and resume to Board President, Carol DeSain, cdesain@boreal.org.