



Midwest
CLINICIANS' NETWORK

NETWORK NEWS

July
2017

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Message from the MWCN President Unexpected Partnerships

Chris Singer, MAN, RN, CPHQ

Chief Operating Officer

West Side Community Health Services



One of the first phrases I recall hearing as I transitioned my career to community health, is “If you have seen one community health center, you have seen one community health center”. Sound familiar? Any of us can provide the necessary assurance that no two health centers are alike. I have further discovered that over a period of time, one health center may not even recognize itself due to the amount of change that the health care system experiences, but also the amount of transition that must take place in order to continue to support and care for our communities. As we continue to navigate this landscape, we know that this resiliency, transition, and

improvement at our core only happen through partnership and collaboration. This partnership and collaboration, though, does not come easily. We often come to expect that the consistent assurances we have encountered in our past will continue to support our needs in the future. It is important to take risks that will provide necessary resources to our communities, and constantly being on the lookout for new partnerships that will help us continue our mission well into the future is one of the most essential risks. It is not necessarily about getting the partnership right, but getting the ‘right partnership’.

One of our great goals in community health is to give care to our communities that they cannot access on their own. Many patients have a need for screening and diagnostic testing, such as colorectal screening, but it is difficult to get that testing if you have inadequate or no insurance. At a 12% screening rate, our community health center sought out ways to improve colorectal screening. We educated our community. We educated our staff. We educated our patients. We participated in quality improvement collaboratives. Guess what? We didn't improve, not even an inch. We had lots of partnerships going, but none of them were able to help us meet our goal. Patients still could not afford colonoscopies no matter how much we wanted to improve. Through a series of conversations and new partners, we ended up at the table with a local GI provider, and we asked for their help of this unexpected partner. They didn't need to think twice about donating colonoscopies to patients that needed them.

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Unexpected Partnerships *continued from page 1*

After improving screening by about 50%, we now know that there are unexpected partners willing to help our communities. This unexpected partnership identified over 200 polyps that would otherwise have gone undetected until they became symptomatic.

While this is a great example of success, we all know that we don't always get it right the first time. Going through a formal needs assessment will help define your next steps.

1. **Review your strategic plan.** A great place to start is to align partnerships with your health center's strategic plan. What partnerships needs to be developed over the next year? Five years? What needs in the community is your health center not able to adequately meet?

2. **Review your quality improvement plan.** What are your goals that aren't being met? Are there resources that patients need that you cannot provide? Brainstorm all of the areas that are needed.

3. **Name the potential partners.** By now, you should have a list of the needs of your

community that align with your strategic plan and quality goals that you don't currently have access to. Next, brainstorm all of the potential partners that may help your health center meet a specific need.

4. **Prioritize, prioritize, prioritize.** Only your health center can determine where to start, but be deliberate in picking the highest risk and highest needs first.

5. **Develop new partnerships.** Remember all of those you have networked with in the past to start engaging these new potential partners. Sometimes, resources will be presented by just asking for them. Others will need time, effort, and data to show the need. In the example presented, a one-page business case was developed to help demonstrate the need and potential risk to the partner.

There will always be challenges in our work, but innovation and vision will help us as a collective to identify new ways to meet the needs of our communities. Remember that some of the most effective partners might also be your most unexpected partners.

**CHC Clinical Leaders
Training Institute** September 15 - 16, 2017
500 S. Ninth St.
Springfield, Illinois



IPHCA will host the CHC Clinical Leaders Training Institute – a two-day training for community health center (CHC) clinicians to learn about different aspects of CHC operations, expectations of them as clinical leaders, and how they fit into the CHC's overall governance structure.

Participants will learn about CHC specific activities and gain knowledge regarding:

- Management principles, styles and skills
- Program development and evaluation
- Conflict resolution
- Risk Management and FTCA coverage

This CHC Clinical Leaders Training Institute is pending for continued education credit(s) by the American Academy of Family Physicians. Physicians should claim only the credit commensurate with the extent of their participation in the activity. This training is also approved for dental education credit and behavioral health education credits.



[Click Here for More Information & Registration](#)

Cancer Survivorship E-Learning Series for Primary Care Providers



The Cancer Survivorship E-Learning Series is a **continuing education program offered at no cost** that provides a forum to educate primary care providers (e.g., general medicine physicians, geriatricians, gynecologists, physician assistants, nurse practitioners, nurses) who may have patients who are cancer survivors about how to better understand and care for survivors in the primary care setting.

Clinicians can learn about caring for survivors of adult-onset cancers through a series of ten enduring online educational modules.

For more
information visit:

<https://goo.gl/Ry7Z8B>

- Module 1:** Current Status of Survivorship Care and the Role of Primary Care Providers
- Module 2:** Late Effects of Cancer and its Treatments:
Managing Comorbidities and Coordinating with Specialty Providers
- Module 3:** Late Effects of Cancer and its Treatments:
Meeting the Psychosocial Health Care Needs of Survivors
- Module 4:** The Importance of Prevention in Cancer Survivorship:
Empowering Survivors to Live Well
- Module 5:** A Team Approach: *Survivorship Care Coordination*
- Module 6:** Cancer Recovery and Rehabilitation
- Module 7:** Spotlight on Prostate Cancer Survivorship:
Clinical Follow-Up Care Guideline for Primary Care Providers
- Module 8:** Spotlight on Colorectal Cancer Survivorship:
Clinical Follow-Up Care Guideline for Primary Care Providers
- Module 9:** Spotlight on Breast Cancer Survivorship:
Clinical Follow-Up Care Guideline for Primary Care Providers
- Module 10:** Spotlight on Head and Neck Cancer Survivorship:
Clinical Follow-Up Care Guideline for Primary Care Providers

CONTINUING EDUCATION

Visit our website for more information about continuing education credits for physicians, nurse practitioners, physician assistants, nurses and Certified Health Education Specialists.

PROGRAM SUPPORT

The Cancer Survivorship E-Learning Series for Primary Care Providers is supported by Cooperative Agreement #5U55DP003054 from The Centers for Disease Control and Prevention. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Centers for Disease Control and Prevention.

THE GEORGE
WASHINGTON
UNIVERSITY
WASHINGTON, DC



As a doctor with a brain tumor, I now truly appreciate the patient perspective

Chris Chiou, MD

Okemos, Michigan, United States

"KNOCK, knock."

I warn of my entrance.

"Come in," the waiting patient replies.

The door opens and I enter, with cane in one hand and laptop in the other. I am obviously unsteady, with each step shakier than the last, almost as if the exam room floor were made of ice. I then extend my hand and say, "Hi, my name is Dr. Chiou, it is an honor to meet you. Thank you for letting me be your physician."

The word 'patient' comes from the Latin word "patientem", meaning "one who suffers". I have been fortunate enough to be on both sides of the examination table, as both a physician and a patient and have come to fully appreciate what it means to be "one who suffers".

On the morning of 20 March 2013 I awoke with double vision. My limited clinical experience convinced me that this was a manifestation of a complex migraine. But when it kept progressing, an MRI was obtained which showed "a 4.5 centimeter mass in the brainstem, possibly cystic, with no evidence of hydrocephalus. Clinical correlation recommended."

I remember crying when I heard the diagnosis; an epidermoid posterior fossa tumor (most commonly seen in pediatric patients). All of my medical training was thrown out the window. "How can this happen to me?" I asked myself. I eat well and exercise every day. At that moment I actually hoped for a diagnosis of multiple sclerosis, a dreadful, debilitating disease.

After a week of frenzied searching and consultations with multiple neurosurgeons, I met with a pediatric neurosurgeon who was referred to me by a family friend. Dr. Cormac Maher is a pediatric neurosurgeon at the University of Michigan, who is known for his experience with epidermoid posterior fossa tumors. I underwent a 16-



Above: Dr Chris Chiou

hour surgery to remove the mass. Before the surgery, I had played four years of varsity tennis at Harvard University, and went on to compete on the professional circuit. I also completed medical school and began a Family Practice Residency. I do not recount my past achievements to boast or brag, but simply to highlight the contrast to my current state.

As I explained to a good friend of mine, I essentially "went from fully functional to disabled overnight."

Since my brain tumor resection, I have pondered much that I hadn't considered before. One of these is the idea of perspective. Now, I wonder about the perspective of the patient. From my perspective, the experience of introducing myself to my patients is straightforward. My nurse tells me that the patient is ready to be seen. I then make my way to the patient's examination room, take a deep breath then knock as I was taught in medical school. I then introduce myself, shake the patient's hand, and thank them for allowing me to be their physician.

It is through each and every encounter

that I truly come to understand and appreciate the patient in this field of medicine. Before my patient encounters, I give all my patients a two-paragraph letter, explaining my own condition. After a patient reads the letter, I enter, hobbling. But as much as I try - just as they can't pretend to know what it's like to go through what I've been through - I can't imagine their perspective. I know that in their eyes, our encounter starts with fear and anxiety. What shape is the doctor in? Can he help me? These questions and thoughts I cannot control but my hope is that by the end of our visit, this fear has turned into comfort, reassurance, and confidence in my ability to address their health concerns.

Before the discovery of this brain mass, my days were filled with diagnosing and managing conditions in other people such as chronic obstructive pulmonary disease (COPD) and diabetes. Now I find myself on the other side, in waiting rooms for appointments with neurologists, physical medicine rehabilitation physicians, and physical therapists.

Before the tumor, a patient to me was simply someone who scheduled an appointment and who sought out my expertise in managing health issues. But, whenever I wait to see a physician now, as the patient I find myself with a mix of emotions. The one constant emotion I experience is fear. "Fear of what?" I ask myself. Fear of the diagnosis? Fear of the management? I finally figured out that this fear was a fear of vulnerability. I had not realized that being a patient meant opening oneself to the doctor. I cannot think of any other profession where such trust is given to another.

One patient may explain their crippling depressive symptoms, while another details their bouts of abdominal pain. This inherent vulnerability is part of the patient-physician relationship. However, within this vulnerability

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Above: Chris Chiou and his family (left to right): Cormac (then six months), Fleur (Chris' wife and a family physician), Christian (then six) and Chris

lies the beauty of medicine; this vulnerability is born from trust: trust in the doctor, trust in their training, and trust in their judgment. It may have taken a brain tumor, and for me to become a patient, but I finally learned of this trust given to each and every physician.

The famous Chinese Philosopher Lao Tzu once said, "A journey of a thousand

miles begins with a single step." During this journey, I have had moments when I purposefully tried not to pause and reflect on lessons I have learned. Perhaps I feared that boiling down this ordeal to one overriding lesson might somehow cheapen what I've gone through, or perhaps I have some underlying post-traumatic stress disorder and I fear dredging up these experiences.

But in returning to my clinical duties, I have come to realize that this tumor has changed my own perspective. I have always only considered myself in the role of the physician. This ordeal has given me the rare opportunity to have the perspective of the patient. It is a position of humility, vulnerability, and faith. Unfortunately, it is easy to fall back into the designated "perspective" or role as physician, forgetting the person and what it truly means to be a patient.

My journey, even though different than what I had envisioned, has allowed me to appreciate first-hand the beauty of the physician-patient relationship and truly understand why we must remember to be compassionate and empathetic to our patients. With every visit I have with a patient, I begin a



Above: Chris, prior to his neurosurgery for a brain tumor, together with medical colleagues

new journey, one that starts when I take my first wobbly step into the exam room. ■

Chris currently writes a column for the Epidermoid Brain Tumor Society, as well as for What's Up Doc? (a health literacy website), and also has his own blog at www.handicappeddoctor.com

References

- 1 <http://www.etymonline.com/index.php?term=patient>
- 2 Lao Tzu, Tao Te Ching, 1891, Chapter 64



If you would like to subscribe to the IBTA's Brain Tumour magazine and the monthly IBTA eNews, please email kathy@theibta.org

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Community Health Partnership of Illinois



Health Center Association of Nebraska



Access Family Care



Chestnut Health Systems



MWCN & officemates



People's Center Health Systems



HEALTHY RECIPE: Garlicky Tomato Basil Shrimp with Zoodles



Garlicky Tomato-Basil Shrimp with Zoodles is a fresh and healthy, gluten-free summer dinner recipe. Quick, easy and made in 1 skillet!

INGREDIENTS:

- | | |
|---|---|
| 4 small, straight zucchini, ends trimmed | 1/4 cup + 1 tsp extra virgin olive oil, divided |
| salt, garlic salt, pepper | 1 lb. jumbo shrimp (16/20 count), peeled and deveined |
| 1 cup cherry or grape tomatoes, quartered | 1 large clove garlic, minced |
| 5 large fresh basil leaves, chopped | |

DIRECTIONS:

1. Spiralize zucchini using the fattest noodle blade then add to a colander set atop a bowl. Lightly salt then toss with your fingers to coat. Cover then place in the refrigerator for 30 minutes to an hour to drain excess liquid.
2. Add tomatoes and basil to a large bowl with 1 teaspoon extra virgin olive oil then season with salt and pepper, stir to combine, and set aside.
3. Heat 1-1/2 Tablespoons extra virgin olive oil in a large skillet over medium-high heat. Pat shrimp very dry between paper towels then season tops with garlic salt and pepper. Add half the shrimp to the skillet seasoning-side down then saute for 2 minutes per side, or until cooked through, then transfer to bowl with tomatoes and basil. Heat another 1-1/2 Tablespoons extra virgin olive oil in the skillet then saute remaining shrimp. When shrimp have 30 seconds left add garlic then saute until fragrant, and then add to the bowl and stir everything to combine.
4. Meanwhile, remove zoodles from refrigerator then pat dry with paper towels. Heat remaining Tablespoon extra virgin olive oil in the skillet then add zoodles. Season with salt and pepper then saute until crisp-tender, 2-3 minutes. Plate zoodles then top with garlicky tomato-basil shrimp and serve.

Source: <http://liowagirleats.com/2016/06/01/garlicky-tomato-basil-shrimp-with-zoodles/>

JOB POSTINGS

Illinois

Various Positions

[Community Health Partnership of Illinois \(CHP\)](#) is seeking various positions at our clinics: Seasonal Outreach Nurse (p/t) – Mendota/Princeville, IL, and Physician (p/t) – Rantoul, IL. We offer competitive wages, excellent benefits and a supportive work environment with other dedicated professionals. Eligible National Health Service Loan Repayment Sites. Visit our [website](#) for more information. Interested applicants are asked to submit a current resume to CHP, Attn: HR Director – email bsacco@chpofil.org or fax 312/795-0002.

Various Positions

[The Illinois Primary Health Care Association](#) seeks physicians (FP, IM, PED, OB/GYN, PSY, Medical Directors), nurse practitioners, physician assistants, certified nurse midwives, dentists, dental hygienists, LCSWs, LCPCs and clinical psychologists for positions in urban and rural community health centers in Illinois and Iowa. To read job descriptions please send your CV to Ashley Colwell, Manager of Workforce Development, acolwell@iphca.org or visit www.iphca.org for more information.

Indiana

Physicians

[HealthLinc CHC](#) is seeking Primary Care Physicians (Family Practice/Internal Medicine/Med-Peds). We have multiple Health Centers across Northwest/Northern Indiana with a “Patient-Centered-Medical-Home” model. HealthLinc offers a very competitive salary, benefit package and loan repayment options. Contact Mike Lowe, Talent Acquisition Coordinator, by e-mail: mloew@healthlincchc.org or check out our career website: <http://healthlincchc.org/join-our-team/>.

Various Positions

Porter-Starke Services, Inc. (PSS), a CMHC based in Valparaiso is seeking Psychiatrists, Nurse Practitioners, Therapists, and other positions, in offering services for virtually all mental health and addiction needs for adults, children and families. PSS also operates Maram Health Center, a FQHC in Gary, IN, providing comprehensive primary and integrated care. PSS offers competitive salary and a benefit package. Visit the PSS Careers website at <http://www.porterstarke.org/careers/current-job-opportunities/> for both locations, or contact Mark Goodrich (219)476-4582, Recruitment and HR Coordinator at mgoodrich@porterstarke.org for more information.

Physicians

Open Door Health Services (FQHC) in Muncie, Indiana is seeking full-time physicians (FM/IM/PEDS). Consider this “one-stop shop” clinic providing primary care, pediatrics, dental and behavioral health services. Competitive salary and excellent benefits. Visit www.opendoorhs.org and/or contact Terri Hutchison at thutchison@opendoorhs.org or call (765) 287-3043.

Iowa

Various Positions

Primary Health Care, Inc. (PHC) is seeking to hire a variety of positions, including an HIV Clinical Director (required MD/DO, PA, or NP), Pharmacist, RN-Case Manager, and more! Please 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.

Michigan

Various Positions

[Cherry Health](#), located in Grand Rapids, Michigan a community health center is seeking full time psychiatrists to join our organization to provide quality outpatient care, as well as full time dentists. Cherry Street offers a competitive salary with incentive package and excellent fringe benefits including generous loan forgiveness programs. Contact Bob Lackey, by phone at (616) 776-2124, Contact Bob Lackey, by phone at (616) 776-2124, Boblackey@cherryhealth.com.

Various Positions

At Great Lakes Bay Health Centers We Changes Lives Because We Care. We are currently looking for Family Medicine Physicians, Psychiatrist, Nurses and LMSW with and without Child/Adolescent experience to join our team of caring professionals so we can continue to provide high quality healthcare. As a group of FQHCs we offer competitive salaries and benefit packages including loan forgiveness through the NHSC. Please visit our website at www.glbhealth.org for detailed information of all our open positions or we invite you to contact us through our website or call 989-759-6400 option 3 for the HR department.

Various Positions

[Grace Health](#), located in Battle Creek, Michigan is seeking full-time Medical Assistants and full-time Registered Nurses (with their current RN license in the State of Michigan). Come be part of a team in a busy health care center, offering a beautiful working environment, excellent wage and benefits. Please send cover letter and resume to Grace Health, 181 W. Emmett Street, Battle Creek, MI 49037. Fax 269-441-1265. E-mail: recruiting@gracehealthmi.org.

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JOB POSTINGS

Physicians

Physicians needed: Internal Medicine/ Pediatrics and Family Practice at [Sterling Area Health Center](#). Competitive salary and benefits. For a medium sized Federally Qualified Health Center located in rural NE Michigan. Student loan forgiveness is available. Contact jbalten@sterlinghealth.net

Minnesota

Behavioral Health Consultant

Exciting Opportunity for a Behavioral Health Professional to join a team integrating behavioral health into primary care at a FQHC. Team includes Physicians, Nurse Practitioner, Care Coordinator, Dietitian and another Behavioral Health Consultant. Ideal candidate would be committed to working in an integrated team and comfortable with EMR's. Licensure in one of the following is preferred: Graduate Level Social Work, Psychologist, Marriage and Family Therapist or Psychiatric Certified Nurse Practitioner. This is an opportunity to be on the cutting edge of integrated behavioral health care – as well as to live on the North Shore in beautiful Grand Marais, MN! Job application available on SMC's website: www.sawtoothmountainclinic.org or at the clinic's front reception desk. Questions? Contact Sue Nordman at 218-264-0272, or sue@sawtoothmountainclinic.org. Applications accepted through July 29, 2017.

Nurse Practitioner/ Assistant

[Lake Superior Community Health Center \(LSCHC\)](#), dedicated to serving the needs of low income and underserved communities, has an immediate opening for a Nurse Practitioner or Physician Assistant. The ideal candidate is an experienced, progressive professional, with strong interpersonal skills, the ability to foster a positive team environment, and has a CFNP/PA degree. Candidate must hold a valid MN and/or WI license and DEA license. LSCHC offers excellent wages & benefits. Please go to our website at <http://www.lschc.org/employment.php> to fill out an application and submit, along with a resume, to lschhumanresources@lschc.org or mail to LSCHC, 4325 Grand Ave, Duluth, MN 55807.

Nebraska

Various Positions

[OneWorld Community Health Centers, Inc.](#) in Omaha, NE is seeking a Physician, Certified Nurse Midwife, Physician Assistant, Nurse Practitioner, Medical Dietitian/Nutritionist, Behavioral Health Therapist, and Registered Nurse. OneWorld is a FQHC and a Certified Level III Patient Centered Medical Home (NCQA.) Out of 1,400+ Community Health Centers nationwide, we rank in the top 1% in clinical quality. Our clinic is growing, and we need dedicated individuals to come join our team! We offer a competitive salary 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

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

Various Positions

Community Health & Wellness Partners of Logan County (CHWPLC) is seeking to hire a motivated full-time FM or IM Physician, as well as, a full-time Psychiatrist, Psychologist and/or Psych NP. We are enthusiastic about our Mission and are looking for innovative providers to join our team. CHWPLC offers a competitive salary and benefit package. Contact us by emailing humanresources@chwplc.org. To learn more visit: www.chwplc.org

Wisconsin

Various Positions

[Lakeshore Community Health Care \(LCHC\)](#) in Sheboygan is looking to hire an experienced and compassionate full-time Psychiatric Nurse Practitioner who will provide patient-centered, comprehensive, integrated healthcare with a focus on psychiatric disorders. We are expanding & looking for this key member of our team! Send your resume/cover letter to Ashley Fenner at: ichchr@lakeshorechc.org.

Reach the Unscreened This Colorectal Cancer Awareness Month

This Colorectal Cancer Awareness Month, check out the 80% by [2018 Communications Guidebook: Recommended Messaging to Reach the Unscreened](#). Using new market research from the American Cancer Society, it is designed to help educate, empower, and mobilize key audiences who are not getting screened for colorectal cancer. It includes templates, tools, and customized resources to reach unscreened audiences.