



MWCN NETWORK NEWS

POSITIVITY ROCKS!

Stephanie Carr, MSN, RN Training Director
[Primary Health Care](#)

I want to focus on something a bit different for this newsletter. Sunshine. Yes, that is right, sunshine. Sunshine feeds positive energy within my soul. I need it! I believe we all need some positivity to feed our souls. Like many I've spoken to, the current environmental circumstances led to some deep reflection and soul searching. Part of my discovery was choosing to accept the circumstances and my reaction to them was more important – for myself and my family.



Positive words are a reflection of our positive thoughts and negative words from negative thoughts. I was drowning in negativity and felt anxiety creeping in. We had little control over this new virus, who it's next victim was, where it would go next, and how can we prevent or cure it? Not to mention, the changes on a daily basis! Perhaps you can relate? I was suffering from a lack of control and fear. I had to unplug. I had to unplug from media outlets and find my sunshine to feed my soul with positivity again. We all need to see the sunshine to peak through the storm, a silver lining glistening underneath the black cloud, or a glimpse of positivity and hope.

Clearly, I am not a mental health provider or someone to give medical advice, but I can share what a little positivity can do for the soul. We painted rocks. You read that correctly – rocks. We call them positive rocks. A simple and fun craft that ended up being so much more! The painted rocks began as a craft that seemed fun and positive to show our kids how a few positive words of encouragement can turn someone's day around.

I had a plan before the craft even began -actually as soon as I completed the online purchase for the supplies. The kids would paint the rocks we would hide them all over town to put smiles on the faces of others. However, in reality, the kids asked me to join and we were all painting. I admit, it was more fun than I anticipated! We let our creative juices flow and just had some good old-fashioned fun that did not include electronics (this is always a win). I sealed them 24 hours later and a couple days later - we were driving all over our little southern Iowa community to hide them in public areas. Again, this was more fun than I imagined.



I planned for this to be a quick, fun, easy craft to entertain our kids. I hoped they would see the

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importance of spreading some positive cheer to lift someone else's spirits. Some of the rocks had positive words while others were painted in various methods. It actually ended up feeding my soul by watching our kids, as their creativity sparked and their commitment to spread good positive energy throughout our community. If painting rocks is not your thing, that's ok. I wish you all the sunshine and positivity in the days ahead. "Wherever you go, no matter what the weather, always bring your own sunshine" – Anthony J. D'Angelo.



Critical Skills for CHC Managers and Supervisors Virtual Training

Dates: Thursday, July 23, 2020 & Thursday, July 30, 2020

Time: 8:30 a.m. - 12:30 p.m. (Central)

Location: Virtual - meeting login information will be provided upon registration.

[Register Here](#)

About

Skilled and effective managers and supervisors are pivotal to the success of Community Health Centers as they hire, coach, motivate and develop staff and drive both employee engagement and retention.

In this intensive, highly interactive, and immediately applicable two-day virtual training, CHC managers and supervisors at all levels gain critical skills to successfully lead and manage employees in today's challenging and fast-changing CHC environment.

Participants learn to:

- Manage, lead and retain engaged, productive, and customer-focused teams.
- Coach and develop employees and drive accountability.

- Utilize Behavioral Interviewing to hire successfully for the long-term.
- Communicate for results, build trust, and de-escalate conflict.
- Create and sustain a culture of customer service.

Presented by: Lisa Mouscher, CEO, Sogence Training and Consulting

Lisa Mouscher is CEO and Lead Trainer at Sogence Training and Consulting. As a popular and dynamic facilitator, trainer and consultant, Lisa works primarily with leaders, managers and staff from Federally Qualified Health Centers across the country. She specializes in two areas of focus: strengthening the management and supervisory skills of Community Health Center managers at all levels, and assisting health centers to create a culture of customer service. Lisa brings her extensive background in management, training and human resources to her work with community health organizations and is known for facilitating immediately applicable results as well as lasting impact to strengthen these organizations for the long term.

Who Should Attend:

Managers/Supervisors of All Types

Registration Fee

Members: \$200.00
Non-Members: \$250.00



WCHQ Releases New Depression Screening/Treatment Toolkit Amid COVID Crisis

WCHQ's Behavioral Health Steering Team developed a [Depression Screening and Treatment Toolkit](#) intended for providers and the administrative staff in a primary care setting serving adult populations. The toolkit is a practical, usable tool for quick referencing and adoption. Two workflows are contained in the toolkit; one for clinical providers with step-by-step instructions on depression screening and treatment options and one for administrative staff related to special operational considerations for the implementation, documentation and tracking of depression screening. There is also a robust addendum with tools that supplement the workflows; including medication augmentation strategies, behavioral health billing codes, a suicide ideation policy, and patient health screeners.

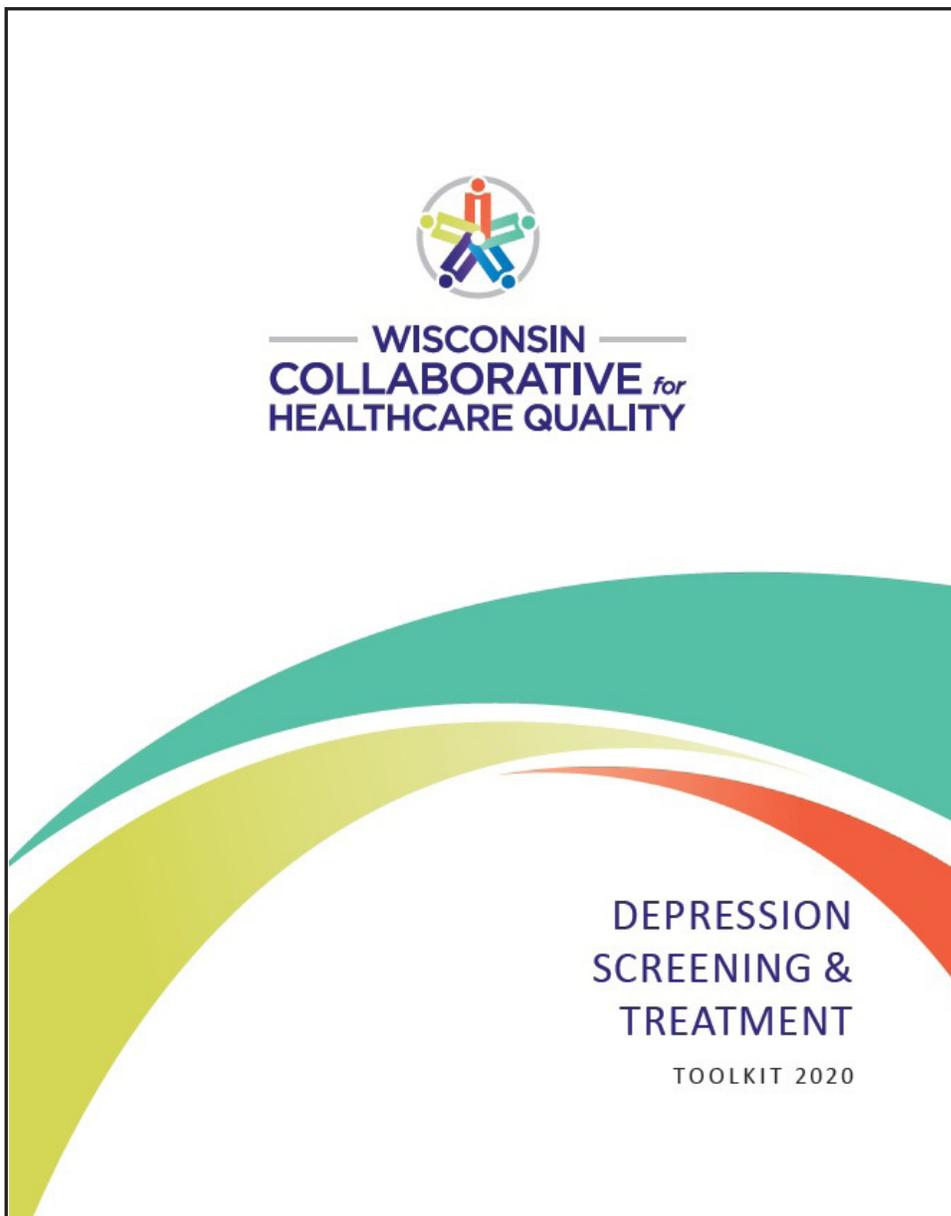
To help with quick referencing, the Table of Contents includes a 'Print' button next to each tool for easy viewing, downloading and printing. To access the toolkit for free, follow this [link](#).

"We're excited about this new toolkit," says Sarah Wright who staffs the Behavioral Health Steering Team. "There's a current treatment gap where people who need behavioral health services can't access them. This toolkit will help address that gap. We're hoping the toolkit provides support to ambulatory care settings where they are better equipped to manage patients with depression internally and reduce unnecessary referrals to specialists."

Jan Simonson, MSN, RN, PPE Branch Director-Supply Chain at the Institute for Quality, Innovation and Patient Safety at Marshfield Clinic Health System, chairs the WCHQ Behavioral Health Steering Team commented:

"Now more than ever it's important to help care teams close the care gaps for patients with depression. My hope is that clinical, as well as operational team members will find the toolkit valuable."

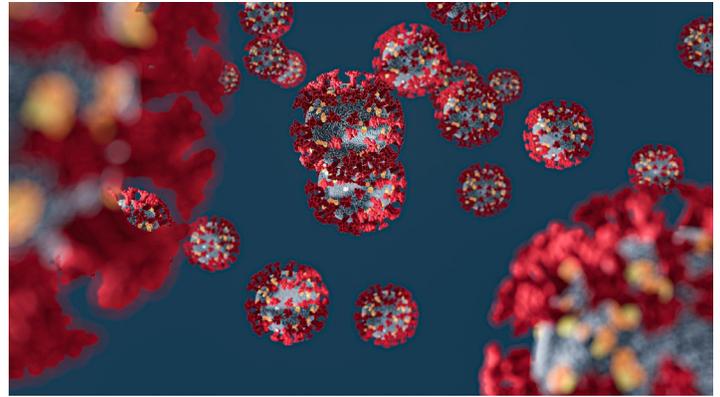
The United States might be seeing depression and mental health numbers worsen as the COVID-19 pandemic continues. Outbreaks, such as COVID-19, can increase stress among people and cause fear and anxiety. Henry J. Kaiser Family Foundation released a poll stating that people are worried about finances such as losing their income, jobs, or investments and about health such as being exposed to the virus at work or having themselves or family members get sick. A total of 72% of Americans state their lives have been disrupted "a lot" or "some" due to COVID-19. This disruption, fear and anxiety can result in the worsening of mental health conditions such as depression. Increasing primary-care based depression services has demonstrated to increase health care capacity to care for patients with depression and to improve health outcomes. (References available, contact [Sarah Wright](#))



Maintaining Compliance with Quality During Covid-19

From [Compliatric](#)

As health centers, we are all trying to figure out what our “new normal” is, while trying not to feel “Covid-19 Fatigue.” While our priorities are shifting to other areas such as, staff burnout, making sure we have enough cash in the bank to pay staff and so on, our main focus is to provide good, quality care to all of our patients during these turbulent times.



Currently, on average, most health centers are seeing a 20-40% decrease in patient visits. In reviewing quality data, most health centers are seeing significant decreases in clinical measures such as blood pressure management, A1C indicators for diabetic patients and well-child visits and immunizations. In addition, the number of new patients being diagnosed with depression and other mental health indicators increased. As health centers' Operational Site Visits are being postponed, diabetes action plans and related reporting are also being postponed for the next quarterly submission. Health centers with active diabetes action plans from 2019 Operational Site visits, or action plans associated with forthcoming Operational Site Visits for 2020, are strongly encouraged to work with their Project Officer to determine a timeframe for quarterly diabetes action plan reporting that is attainable for the health center. Regardless of what our “data story” is, HRSA still expects health centers to maintain continuous compliance in all requirement areas, including Quality.

What does that mean for health centers? Based on the Health Center Program Compliance Manual, Chapter 10, health centers need to:

- Have Quality Improvement Policies and Procedures that address all the HRSA requirements
- Complete Quarterly Assessments of Clinical Care, which includes Peer Review
- Make sure each patient has a documented health record
- Ensure patient records are kept confidential

With telecommunications being the platform of choice at the moment, how can we forge into this new type of care while maintaining compliance?

1) Using Tele-communications to our advantage

A health center may have a hybrid staffing model; that is, some staff may be working from home while others are working at the clinic. Although spread across different locations, taking advantage of tele-communication platforms such as Zoom, Microsoft Teams, Skype for Business etc., which allow meetings to take place, continue to allow staff to have productive conversation and exchange data by sharing screens. Committee meetings, along with Board meetings, can still continue, regardless where you are. Documents for peer review or other quarterly assessments can still be shared electronically (remember to de-identify any patient information), which allows for active discussion and the development of corrective plans of action.

2) Cross-training of staff

In many states, dental services have been discontinued or are only focusing on emergent care. Additionally, in many health centers, medical and behavioral health are the only service lines currently operating. Training staff to fill other positions or alleviate the stress of other staff that have been working tirelessly would lessen staff burnout and facilitate the completion of other necessary duties, such as reviewing and updating policies and procedures, inventory of supplies and equipment, etc. For example, one health center trained their dental assistants on how to provide health education information to diabetic patients. Once training was completed, the health center queried their health records for patients with a Hemoglobin A1C higher than 9. Subsequently, those dental assistants called patients not only to check on the patient's status, but also to provide health education. Dental Assistants also mailed out health information to patients. While this may not generate any revenue, creating a culture of hospitality for patients may be long lasting, knowing their health care home cares about them.

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3) Confidentiality of Patient Records

Although we may be operating under emergency procedures, confidentiality should not be compromised. If providers are working from home, it is important to ensure that they are providing care to patients in a safe and secure manner. Consent to treat should always be requested and recorded in the medical record. Three simple ways to secure information are as follows:

- **Secure computers:** If working from home, make sure computers are password protected and after 2 minutes of inactivity, ensure that the computer locks itself.
- **Use HIPAA compliant products for patient visits:** Ensure that whatever methods of communication used for patient visits are encrypted and HIPAA certified. If health centers have an IT department or staff, ensure staff are trained on using approved websites and applications to continue patient care. HRSA has provided a guide of those applications to use for visits. (<https://bphc.hrsa.gov/emergency-response/coronavirus-frequently-asked-questions>)
- **Establish Policies and Procedures related to Data Security and Audit:** Policies and procedures should include and address mobile devices, passwords, confidentiality, back-up procedures, etc. Once policies and procedures are implemented, training should be completed, and each employee should attest they have read and understand them.

Additional guidance on maintaining HIPAA compliance can be found at <https://www.hhs.gov/hipaa/for-professionals/special-topics/hipaa-covid19/index.html>.

These 3 topics on maintaining compliance are not all inclusive, and as health centers navigate this new way of providing care, quality of care must continue to be at the forefront.



Visit
compliantfqhc.com
for more information

Come learn why FQHC's across the country are making the switch from legacy general employee training systems to **Compliatric**, the **COMPLETE** training and compliance management system designed for FQHC's and HRSA covered entities.

OUR CORE MODULES:

- OSV Program Management
- Policy & Forms Library
- Employee Training LMS
- Incident Management
- Agreement Management
- Auditing & Monitoring
- Grant Management
- Exclusion Monitoring
- Credentialing & Privileging
- CHC Board Management

Covid-19 Response, Recovery, and Mitigation: The Role of Community Health Workers

By Deb Kazmerzak, [Iowa Chronic Care Consortium](#)

“Individual wellbeing depends upon the wellbeing of those around them.”
President Barack Obama



President Obama’s words ring true - now, more than ever. This statement is a great public health message but also aligns with the fundamental beliefs of the health center movement over more than five decades. We can’t separate ourselves from our neighbors and expect that we will thrive when others cannot; just as we cannot separate healthcare received in the primary care office from the poverty, poor education and racism our patients experience and expect that the healthcare alone will result in healthy, thriving patients. Enter an unprecedented pandemic into the mix and, while there is no level of income, race, or geography that provides

complete protection from COVID-19, the disproportionate impacts on communities of color and low-income families are stark reminders that we all depend on each other.

The country and world continue to deal with the devastating health and economic impacts of the COVID-19 pandemic as we move from response to recovery and mitigation. Underserved populations have crushing needs, and the services system has significantly reduced capacity due to the economic downturn. These factors point to a tough road ahead for many individuals, families and communities. Community health workers (CHWs) can play important roles in response and recovery.

State plans - or lack thereof - to mitigate the impacts of the pandemic vary, but in addition to testing capacity for COVID-19, there are other functions important to recovery. This is where CHWs can have a real impact in your communities and states.

Information and Outreach

Misinformation about COVID-19 is rampant, especially in communities of color. Reasons include distrust of government and healthcare systems due to lack of citizenship status, historical and institutional racism, and cultural folklore and beliefs. As trusted resources in communities they serve, CHWs armed with accurate information and skills in outreach and awareness campaigns can be effective in combating this problem. With a second wave of the pandemic expected, this is a very timely need. Public awareness campaigns can be part of strategies to “flatten the curve” and lessen the impact of a second wave.

Contact Tracing

CHWs are often recommended and utilized as contact tracers. Receiving a call / contact about potential exposure to a deadly virus can be frightening for many; and again, the ability to establish trusting relationships can help ensure the information is received in a supportive way and guidance is acted on.

Referrals to Resources

CHWs are already in the business of connecting patients / clients to resources. Often, the first question asked when someone is told they have been exposed to COVID-19 and need to self-quarantine for two weeks is how they will get access to food. CHWs are already prepared and equipped and assisting clients with accessing these and other needed services.

Identifying Emerging Needs in the Community

Advocacy is another common role for community health workers. Because they have time and capacity to work closely with community members, they are often the first to identify unmet needs or gaps in services. Those needs can be relayed back to the organization, so they can take steps to address needs.

The COVID-19 pandemic has created an extraordinary crisis in our country - and the world. As states begin to re-open and continue to respond, government leaders and planners should look to existing resources to address current and expected future needs in our communities. In many areas CHWs are such an existing resource that can be rapidly deployed and are already doing some of the work that will be needed for communities to recover. The CDC and others have developed guidance for utilization of CHWs in COVID-19 response and recovery. And Federally Qualified Health Centers are a natural home for CHWs as well as logical partners with local and state public health agencies across the country.

Proven Online Training

Clinical Health Coach

Advance essential skills for healthcare professionals, especially care managers, as high performing **health coaches for the clinical setting** through 26-hour on demand online learning.

For information and enrollment information: Kathy Kunath, Kathy.kunath@iowaccc.com



Community Health Worker Professional Skills Training

Develop critical talent in community health workers and other front-line staff to address accelerating social determinants of health with this 35-hour **CHW professional skills training**.

For information and enrollment information: Deb Kazmerzak, deb.kazmerzak@iowaccc.com



HRSA-SUPPORTED PCMH TRAINING - REGIONS 5 AND 6

Thanks to support from the Health Resources and Services Administration (HRSA), the National Committee for Quality Assurance (NCQA) is pleased to provide this virtual training around Patient-Centered Medical Home Recognition for HRSA regions 5 and 6. This virtual training will consist of two courses:

- NCQA's Introduction to PCMH Program: Foundational Concepts of the Medical Home
- NCQA's Advanced PCMH Program: Mastering the Medical Home Transformation



Training will be provided through a series of on-demand (recorded) lectures interspersed with live webinars for Q&A, polling, content review, and engagement with the training faculty. The required on-demand modules should be reviewed prior to each scheduled webinar session.

NCQA will provide the same continuing medical education credit and PCMH Certified Content Expert (CCE) maintenance of certification credit normally provided when this training is delivered as in-person seminars. Additionally, learners who complete both sessions will become eligible to sit for the CCE exam.

[Register here!](#)

CHC Virtual Care @Home

By Carla Chance, BSN, PCMH CCE, CHC Clinical Programs Manager, [Indiana Primary Health Care Association](#)

In the early days of the COVID-19 pandemic, the Indiana Primary Health Care Association (IPHCA) and Board of Directors sent a letter to Indiana Governor, Eric Holcomb, stating that the community health centers stood ready to assist in reducing the demand placed on our hospital partners during the expected surge. The letter was passed along to the statewide response team which was led by Jennifer Sullivan, MD, MPH, Secretary of the Indiana Family and Social Services Administration (Indiana Medicaid). Secretary Sullivan asked for phone meeting with IPHCA and health centers to discuss an idea she had. This developed into the **CHC Virtual Care @ Home** program.

CHC Virtual Care @ Home allows patients to stay in their home to recover from an illness or manage an acute illness that does not require the full level of care available at a hospital, but more regular check-in with providers than usual, without the need to travel to a provider. Patients receiving care through **CHC Virtual Care @ Home** can have nursing check-ins, periodic monitoring of vitals, and virtual visits by a physician or other clinician so that they can stay at home.

Why **CHC Virtual Care @ Home**?

- **Social Distancing:** During times of public health emergency, like the current COVID-19 pandemic, patients who are at risk for serious health complications if they are infected need to limit their exposure to other individuals who may not be infected.
- **Hospital Surge Capacity:** Hospitals may need to divert their precious resources to caring for the most critical patients when the disease surges. Some hospitals may need to discharge patients to home who are medically able to receive **CHC Virtual Care @ Home** services, allowing space to provide critical care to new patients.
- **High Value Care Delivery:** This model is aligned with high value care delivery and population health strategies that health centers are already embarking on for Chronic Care Management and Transitional Care Management. This is all aligned with PCMH efforts.

The program was initiated as a pilot with four health centers, two located in Marion County, which was where the largest outbreak occurred, one located in Lake County (second largest hot spot), and one in Vermillion County (a rural located health center). Each of the health centers were provided with the Abbott ID Now testing machine from the Indiana State Department of Health and a trauma bag with thermometer, pulse oximeter, and other equipment from the Department of Homeland Security that they could give to the patients for the duration of their confinement. Four other health centers located across the state have now joined the program.

IPHCA provided the platform for peer sharing of workflows between the initial four health centers and this has continued with the newer health centers. In addition, IPHCA has been the liaison between the health centers and the Indiana Family and Social Services Administration (FSSA) as the pilot program was rolled out and newer sites have been added. FSSA developed the evaluation tool for the program.

While the expected surge did not happen due to the steps that the state took to help reduce the spread of the virus, the participating health centers did enroll several of their patients into the program. Patient satisfaction is high, as they have told staff that they were so thankful to have some care about them and to alleviate their fears as they recover.

For more information, please contact Nicole Hall, NP-C, Clinical Director, Indiana Primary Health Care Association at nhall@indianapca.org, or Carla Chance, BSN, PCMH CCE, CHC Clinical Programs Manager at cchance@indianapca.org.





JOIN THE HCV ECHO

- Learn how to treat HCV
- Get no cost CME credit
- Meet Iowa Medicaid prescribing requirements to allow PCPs to treat HCV patients

90-minute sessions every 3rd Tuesday of the month from 11:45 am – 1:15 pm | January 21 – December 15, 2020

HEPATITIS C (HCV) ECHO

This interactive web-based program provides community-focused primary care clinicians an opportunity to become experts in the delivery of Hepatitis C care through a mentoring-based initiative. Project ECHO, developed by Dr. Sanjeev Aurora at the University of New Mexico (UNM) in 2003, provides a framework for sharing expertise across the state and as a result will help patients achieve a viral cure and avoid the downstream sequela associated with HCV without leaving the providers they trust and the communities where they live and work. Interested providers do not have to have any prior experience in treating Hepatitis C to participate in HCV ECHO. We invite you to join colleagues from Iowa Community Health Centers in the Iowa Primary Care Association (PCA) Hepatitis C ECHO clinic.

WHO SHOULD ATTEND?

Providers and clinical staff who are interested in providing treatment and care to individuals diagnosed with Hepatitis C (providers, nursing, behavioral health, linkage navigators, front desk/scheduling, admin, etc.).

HOW TO CONNECT

Connect using the platform Zoom for all sessions. You do not need a Zoom account. It is best if you are in a room or using a computer with a camera and microphone. If you have a camera, we strongly encourage you to use it during the ECHO session to build comradery among HCV ECHO participants.

ABOUT ECHO

Extension for Community Healthcare Outcomes is a movement to de-monopolize knowledge and amplify local capacity to provide best practice care for underserved people all over the world.

HCV ECHO SESSIONS

Every Third Tuesday of the Month
(starts January 21, 2020)
11:45 am - 1:15 pm

REGISTRATION

To register, email ECHO@iowapca.org the following information:

- Name
- Title
- Organization Name
- Email

CONTINUING EDUCATION CREDIT

MD: This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Iowa Medical Society (IMS) through the joint providership of Des Moines University (DMU) and Primary Health Care, Inc. DMU is accredited by the IMS to provide continuing medical education for physicians. DMU designates this live, on-line activity for 1.0 AMA PRA Category 1 Credit(s)[™]. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

DO: Des Moines University (DMU) is accredited by the American Osteopathic Association (AOA) to provide osteopathic continuing medical education for physicians. DMU designates this program for a maximum of 1.0 AOA Category 2-A credits and will report CME and specialty credits commensurate with the extent of the physician's participation in this activity.

Nurse: Des Moines University is Iowa Board of Nursing approved provider #112. This live activity has been reviewed and approved for 1.0 continuing education contact hour(s). No partial credit awarded.

Other Health Professionals: This live activity is designated for 1.0 AMA PRA Category 1 Credit(s)[™].

Everyone in a position to control the content of this educational activity will disclose to the CME provider and to attendees all relevant financial relationships with any commercial interest. They will also disclose if any pharmaceuticals or medical procedures and devices discussed are investigational or unapproved for use by the U.S. Food and Drug Administration (FDA).





HCV ECHO (Via Zoom)

The HCV ECHO is a tele-mentoring program that uses videoconferencing technology (Zoom) to combine MAT didactic presentations with interactive and practical HCV case presentations from participants.

HCV ECHO HUB TEAM

Panel: Donald Hillebrand, MD, Medical Director,
UnityPoint Health – Center for Liver Disease

Steven Donnelly, PharmD
Community A Walgreens Specialty Pharmacy

Mark Hillenbrand, LISW, RCSW
Authentic Freedom Counseling Center

Megan Srinivas, MD, Infectious Disease
Community Health Centers of Fort Dodge

Malissa S. Sprenger, MS, IAADC, Coordinator
Turning Point Treatment Center

ECHO Coordinators:

Julie Baker, Director of Preventive Services
Iowa Primary Care Association

Chelsea Miller, Administrative Assistant
Iowa Primary Care Association

Didactic Sessions will include:

- Hepatitis C 101
- HCV Treatment medications and access to treatment
- Treatment Considerations for People Living with HCV (re-infection; Genotyping; people who use substances; necessary lab work; etc.)
- Health Economics 101: Standard v. Enhanced Screening and Treatment
- Drug User Health and Person-Centered Language
- Treating Patients with Substance Use Disorders and HCV
- Co-Infections: HIV and HCV
- Populations Disproportionately Impacted by HCV and/or HIV (LGBTQ+; Persons experiencing human trafficking and Intimate Partner Violence; racial and ethnic groups)
- HCV Screening among pregnant women

CASE PRESENTATIONS

You do not need to present a case during every session in order to participate in the HCV clinic. However, the submission of cases for presentation and discussion is a key component in the Project ECHO model and critically important for knowledge building and sharing, and it is therefore required that each provider present at minimum three cases per year. We welcome cases that involve common clinical scenarios related to HCV diagnosis and care as well as difficult, complex, or challenging presentations and patient management scenarios.

ECHO HUB

Team of Specialists



ECHO SPOKE

Providers



PATIENT REACH



HEALTHY RECIPE: Mediterranean Orzo Salad

Crunchy fresh vegetables and leafy spinach pair with orzo pasta, briny olives and feta cheese for an easy pasta salad perfect for meal prep or parties.



Resource and additional great tips!

<https://www.foodiecrush.com/mediterranean-orzo-salad/>

INGREDIENTS:

- 16 oz orzo
- 3 cups baby spinach leaves, gently torn into large pieces
- 1 1/2 cup chopped red bell pepper, about one red bell pepper
- 1 cup cucumber, diced and seeded, about one medium
- 3/4 cup red onion, diced
- 5 oz Castelvetrano green olives, drained and halved
- 5 oz Kalamata pitted olives, drained and halved
- 7 oz feta cheese
- 1/2 cup canola oil
- 1/4 cup olive oil
- 1 lemon, juiced
- 1 1/2 tsp oregano
- 1 tsp kosher salt
- 1 tsp black pepper

DIRECTIONS:

1. Bring a pot of water to a boil, season with salt, and cook the orzo for 10 minutes. Drain, rinse, and set aside to cool.
2. Transfer the cooled orzo to a large mixing bowl. Add the spinach, chopped vegetables, and olives, then crumble half of the feta cheese over the pasta.
3. In a small bowl, whisk the canola oil, olive oil, lemon juice, oregano, salt and pepper until mixed. Pour the vinaigrette over the pasta mixture and gently fold until the pasta and veggies are coated. Taste for seasoning and top with the remaining feta cheese.
4. Refrigerate for 1 hour overnight before serving. The pasta is best within 2-3 days, but will last in the refrigerator up to 1 week. Serves 12.

JOB POSTINGS

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

Illinois

Various Positions

Eagle View Community Health System is seeking to hire a General Dentist for our Oquawka, IL clinic, a temporary Staff Accountant for our Oquawka, IL clinic and a Substance Abuse Counselor for our Federally Qualified Health Centers in Henderson County, IL. For more info and to submit a resume, please email administration@eagleviewhealth.org.

Nursing Coordinator

Family Christian Health Center (FCHC) is seeking to hire a motivated full-time Disease Management Nursing Coordinator (RN). We offer a competitive salary and excellent benefit package. Please contact Regina Martin, HR Manager, rmartin@familychc.org or phone, 708.589.2017 for more information.

Various Positions

Illinois Primary Health Care Association seeks Physicians, Medical Directors, Nurse Practitioners, Physician Assistants, Certified Nurse Midwives, Dentists, Dental Hygienists, LCSWs, LCPCs and Clinical Psychologists for positions in urban, rural and suburban community health centers in Illinois and Iowa. To take advantage of IPHCA's complimentary recruitment assistance service please contact Ashley Colwell, acolwell@iphca.org or visit [IPHCA-Job Seekers](http://IPHCA-JobSeekers) for more information.

Indiana

Various Positions

Heart City Health (HCH) a FQHC with 4 locations in Elkhart, Indiana is seeking vibrant Board Certified Family Medicine Physicians, Family Nurse Practitioners, Psychiatric Mental Health Nurse Practitioners, Chief Financial Officer, Referrals Case Manager, Licensed Clinical Social Worker, Registered Nurses, LPN's, Dentist, Expanded Functions

Dental Assistant, Medical Assistants, and Care Coordinators. We offer competitive salaries and full benefits package. Forward your CV/resume to hr@heartcityhealth.org. Please see our "open positions" on our career page of our website at <https://www.heartcityhealth.org/>.

Iowa

Family Practice Physician

All Care Health Center (ACHC) is seeking a full-time Family Practice Physician. As a Federally Qualified Health Center (FQHC) we are committed to breaking down barriers for our patients to access quality and affordable healthcare services. ACHC offers competitive wages and a comprehensive benefits package including medical, dental and vision insurance, a 401(k) program with employer match, PTO, paid holidays and more! Contact Human Resources by email recruiting@allcarehealthcenter.org or by phone 712.325.1990 for more information.

Family Nurse Practitioner

Eastern Iowa Health Center is recruiting a full-time Family Medicine Physician. This is an opportunity to join our team of dedicated providers and staff to carry out our mission. For more information visit www.easterniowahealthcenter.com/about/careers or email hr@eihc.co.

Various Positions

Peoples Community Health Clinic, Inc. Waterloo, IA. Is looking for a Full time Family PMHNP practicing primarily with adult patients, and a Full time Urgent Care Family ARNP. Loan repayment possible. Full benefit package. Go to www.peoples-clinic.com/hr for more information or to submit CV to Human Resources.

Various Positions

Primary Health Care, Inc. is seeking to hire a variety of positions including: Medical Director; Physician; Dentist; Pediatric Dentist; Behavioral Health Consultant and More! Navigate to our careers page at <https://recruiting2.ultipro.com> to search and apply for positions. Contact Rachael Miller at rmiller@phcinc.net or 515-248-1490 for more information.

Kansas

Various Positions

Hunter Health is a FQHC with 3 clinic sites each located in Wichita, the largest city in Kansas. We are seeking highly motivated applicants for a variety of openings including: Family Practice Physician, Quality Compliance and Risk Manager, Medical Assistant and Medical Intake Receptionist. For more information or to apply, visit <https://hunterhealth.org/careers>.

Michigan

Dental Assistants

The Family Health Center in Kalamazoo, MI is currently seeking positive, dedicated, and detail oriented Dental Assistants to join our Dental Team. This is an amazing opportunity to work at Michigan's largest dental facility with state of the art technology. Interested applicants can apply

on the employment section of our website at www.fhckzoo.com or email Rebecca.Holloway@fhckzoo.com.

Various Positions

Western Wayne Family Health Centers (WWFHC) a FQHC with 4 locations is seeking vibrant Internal Internal Medicine Physicians, Family Practice, DO, OB-GYN Physician, Nurse Practitioners, Certified Nurse Midwives, RN's, LPN's, Dentist, Dental Hygienist, Therapist, Certified Medical and Dental Assistants, Call Center- Customer Service Reps, Billers and Community Health Workers. We offer competitive salaries and full benefits package including loan repayment through NHSC and NURSE Corps. Forward your CV/resume to humanresources@wwfhc.org. Please see our "jobs" on our website at www.wwfhc.org.

Various Positions

MidMichigan Community Health Services (headquartered in Houghton Lake, MI) is currently recruiting for the following job opportunities: Full Time Medical Assistant or LPN for our Pediatrics Unit, Full Time Medical Assistant or LPN as a float, and a Cardiac Sonographer. We offer competitive benefits including Medical, Dental, Vision, Long/Short Term Disability, Life/AD&D, as well as a 403B with organizational match. Interested applicants can view all of our current opportunities at <https://www.healthynorth.org/healthynorth/careers/>.

Minnesota

Various Positions

Professional Opportunities at Open Door Health Center- If you are looking for a work environment that is patient focused and passionate about what we do, then we want to hear from you! We are currently hiring medical, dental and behavioral health professional positions. To explore these positions and more, visit our website at www.odhc.org.

Nebraska

Various Positions

OneWorld Community Health Centers, Inc. in Omaha, NE is seeking a Physician, Dental Hygienist, Registered Nurse, Nurse Case Manager, and Employee Health 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 offer competitive salaries and generous benefits. Please apply at www.oneworldomaha.org/get-involved/careers.

Ohio

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, <http://www.communityhealthdayton.org>.

Various Positions

Crossroad Health Center, a level 3 NCQA certified Patient-centered medical home located in Cincinnati, is seeking a Family Physician and a Family Nurse Practitioner to join their clinical team. We are a non-profit community health center, with a faith-based mission, providing care to children and adults in the tri-state area. If interested or to find out more information, please email resume or questions to Amanda Sawyers, amandasaw@crossrd.org.

