



NETWORK NEWS

January 2018

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Message from the MWCN President REFRESH

Heather Hicks, RN
Director of Quality and Informatics
Heart of Kansas Family Health Care

It's a new year, which brings new faces, new projects, new initiatives, new spreadsheets and reports for the year, resetting for annual goals, and checking trends. It's also compiling, creating and presenting year end reports, submitting for prior year regulatory programs, mapping training and compliance tasks all in between what our jobs are. It's a busy time of year! It always is a busy time of year, something is always changing, starting, renewing, reviewing, ending or updating.

The year 2017 was tumultuous and 2018 looks to be as well with no end in sight to the changing landscape of healthcare. It's the perfect storm for burnout if we don't at some point pause to reflect. Some may have already come to this conclusion, but for those like me just now reflecting back and those caught up in keeping up -1 invite you to pause and reflect.

We've come a very long way in a very short time! It's been less than 10 years since the HITECH act. While EHR's were around before HITECH, this is the snowball that created the avalanche that has transformed the healthcare landscape. In 2010, I was working in risk management at a hospital that used paper records – I read the Electronic Incentive program with some interest and remember thinking "Wow, that's a long time to do these things". I don't think we realized the transformational change was heading for us!

We have implemented, upgraded, grown and expanded our EHR's. We have transformed isolated electronic systems and paper systems into electronic networks primed for the new generation of information integration. We have leveraged and streamlined our processes from paper based, manual tracking into interoperable, electronic systems with automated reminders, alerts and reporting all while navigating ever changing regulations. If transforming our practices from isolated electronic systems or paper based systems into integrated electronic systems wasn't enough of an achievement, we have also improved our performance and engaged our patients in their own health and wellness.

CONTACT US

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

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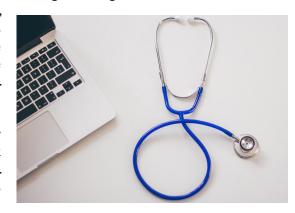
Refresh

To make this shift we have created teams within our clinics, within our communities, across our states and throughout our nation. We have networked across electronic systems, healthcare systems and grown electronic registries that previously didn't exist. We have partnered with multiple entities across varied industries to meet the challenges of populations, patients, providers and politicians.

In doing this we have created entirely new jobs, defined new education paths and certifications and expanded our knowledge. We have thoroughly melded electronics with medicine and morphed into a whole new environment. This has been painful and frustrating and frenzied for us all – but it's time to reflect on our remarkable achievements, both personally and as an industry. History is going to look back on this time as truly transformational. We deserve to take a moment to look as

well; to see how far we have come, to see what we have built, to see the new system of healthcare we have been instrumental in creating. Please, take a moment – pause if you will to look around at the changes, the accomplishments, and the success. Reflect on our progress, the lessons learned from failure that we will pass on and build from. Well done my friends and colleagues – what great things we have seen and done!

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INDIANAPOLIS' UNCOVENTIONAL WAY TO FIGHT THE OPIOID EPIDEMIC

By Ryan Martin, ryan.martin@indystar.com
Reprinted from The Indianapolis Star, July 27, 2017

Dr. Dan O'Donnell speaks to a small group of men and women seated among rows of tables at Indianapolis Metropolitan Police Department's East District headquarters.

His delivery is matter-of-fact, maybe because the problem he's talking about — the opioid epidemic — is no surprise to anyone in this room. They've seen the "pinpoint pupils," the bodies that look dead.

Addiction and mental illness are burdening the criminal justice system. The situation is dire, said O'Donnell, medical director for IMPD, Indianapolis EMS and Indianapolis Fire Department. "We cannot use 2010 solutions to this problem."

The people in the room represent the change.

Read the entire article HERE!



Brooke Hartwell (left), an Eskenazi Health Midtown clinician; Melissa Lemrick, an IMPD officer: and Bill Eberhardt, an Indianapolis EMS paramedic, are members of the newly formed Mobile Crisis Asistance Team.

(Photo: Robert Scheer/IndyStar)

Preventing Re-Traumatization Through Trauma Informed Care

By Nancy D. Spargo, AM, LCSW, Chief Executive Officer/Co-Founder, St. Louis Center for Family Development, LLC

Life-altering events can result in many forms of trauma, from extreme anxiety and PTSD, to ongoing problems with relationships and physical symptoms. Patients who are not upfront about their past traumatic experiences when beginning treatment risk being re-traumatized. By engaging each and every patient using a Trauma Informed approach, behavioral health providers reduce these chances and form more meaningful connections.

Trauma Informed Care is a framework informed by six key principles and incorporates four core assumptions. It is helpful to compare the practice to universal precautions. As providers, we want to interpret and understand the presentation of the people around us. We want to make sure that we remember and convey that people do indeed recover from traumatic experiences. And we need for trauma to be a lens we use every step of the way because we certainly don't want to hurt anyone. The following are Trauma Informed tips to keep front of mind when serving patients:

- Instead of asking "What's wrong?", ask "What happened?"
- · Provide structure and routine
- · Use a compassionate and nonjudgmental approach
- Promote a future orientation
- Provide hope/ belief in something better
- Stay present, pay attention and LISTEN
- Help channel and manage emotions
- · Provide opportunities for success and mastery
- Validate and empower patients
- Use shared decision making

Following best practices with all patients helps reduce retraumatization; however, providers ultimately need to determine if a patient is suffering from trauma in order to treat the underlying problem. According to the National Child Traumatic Stress Network, some indicators of the physical and emotional distress of a trauma history may result in symptoms, behaviors and attitudes that impact upon medical care, including:

- Headaches and stomachaches
- Poor control of emotions
- Inconsistent performance
- Unpredictable and/or impulsive behavior
- · Over-reacting or under-reacting to the environment
- Triggers to others' behaviors
- Perceived violations of personal space
- Exploding when corrected or directed differently
- Fighting
- Resisting transition and/or change

Many of these presentations are judged and misunderstood, frequently leading to perceived character flaws or moral

failures. The science behind the developmental neurobiology allows us to move past this perception and on to the healing.



Trauma Informed Care Benefits Community Health Providers

We know that trauma is pervasive. The impact is broad and diverse; the effects are deep and life shaping. But did you know that being exposed to the trauma of others can also be a threat to the workforce? By engaging each patient using a Trauma Informed approach, behavioral health providers not only build trust more reliably and deliver better service, but also minimize their own chance of experiencing Secondary Traumatic Stress Disorder (STSD).

Referred to by many names, such as secondary trauma or vicarious trauma, STSD is "the natural consequent behaviors and emotions resulting from knowing about a traumatizing event experienced by a significant other – the stress resulting from helping or wanting to help a traumatized or suffering person (Figley, 1993a)." The onset is frequently sudden, but may be cumulative as well.

The sequelae for STSD are parallel to that of Post-Traumatic Stress Disorder (PTSD) during and following a traumatic event, which is why it is important to follow a Trauma Informed approach to service delivery. Trauma Informed Care is a framework informed by six key principles and incorporates four core assumptions that can be used across the board.

Six Key Principles of Trauma Informed Care:

- I. Safety
- 2. Empowerment, voice and choice
- 3. Trustworthiness and transparency
- 4. Peer support
- 5. Collaboration and mutuality
- 6. Cultural, historical and gender context

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Four Core Assumptions of Trauma Informed Care:

- I. Recognize the signs and symptoms of trauma in clients, families, staff and others who are involved.
- 2. Realize the widespread impact of trauma and understand the potential paths for recovery.
- 3. Respond by fully integrating knowledge about trauma into policies, procedures, and practices.
- 4. Resist re-traumatization.

It might not always be apparent that someone is suffering from a past traumatic experience. By always addressing the impact of trauma and facilitating healing, Trauma Informed Care provides emotional protection for both providers and patients. Providers can further protect themselves from STSD by prioritizing self-care. Be sure to take the time to maintain connections, engage in activities that restore hope, and minimize trauma inputs. And while it might seem like common sense, don't forget to monitor and address one's own history of trauma. Trauma Informed Care is not a fad. It is not just for someone else. It is for all of us. And, when a trauma informed lens is utilized, we all benefit from it.



About the St. Louis Center for Family Development, LLC

The St. Louis Center for Family Development was created in 2009 by Nancy D. Spargo, AM, LCSW, and Ryan R. Lindsay, MSW, LCSW in response to an identified need for trauma-informed mental health services in the St. Louis region that increase access to quality care for underserved populations as well as leadership for skill development in other professionals by providing training to implement Trauma-Informed Care and Evidence-Based Treatment Models.

Our commitment to increasing access to care for marginalized populations and the underserved has lead us to develop our own innovative model of community based crisis stabilization services through the integration of multiple evidence based theoretical constructs, as well as outpatient services for populations not readily served by others. Treatment models include Dialectical Behavior Therapy, Trauma-Focused Cognitive Behavior Therapy, and Prolonged Exposure.

Providing leadership for skill development in other professionals led to the development of STLCFD's Training Institute, which focuses on Trauma Informed Care, Motivational Interviewing, Prolonged Exposure and Dialectical Behavior Therapy. Our model is defined by a combination of didactic training followed by consultation groups for practicing the learning and maximizing lasting change. Our training teams are composed of highly experienced clinicians with a passion for skill development.

HEALTHY RECIPE:

Slow Cooker Turkey Black Bean Chili



When you're short on time or energy to make dinner, your slow cooker is your best friend. Cook fresh or freeze to cook later. Serve with shredded cheese and chips! Makes 6 servings.

INGREDIENTS:

- -I pound ground turkey
- -28oz can tomato sauce
- -2 cans black beans (15oz each), drained and rinsed
- -14.5oz can petite diced tomatoes, undrained
- -1 2/3 cup frozen corn (half of a 1lb. bag)
- -2 large cloves garlic, minced
- I tbsp paprika
- -I tbsp chili powder
- -2 tsp ground cumin
- -I I/2 tsp ground oregano
- -1/4 tsp crushed red pepper flakes

DIRECTIONS FOR NOW:

- I. Add all ingredients to your slow cooker and stir.
- 2. Cover and cook on low 6-8 hours.
- 3. Break apart turkey and stir.

DIRECTIONS FOR LATER:

- 1. Label a gallon-sized plastic freezer bag with the name of the recipe, cooking instructions, and use-by date (which would be 3 months from the prep date). Cover and cook on low 6-8 hours.
- 2. Add all ingredients to freezer bag, seal, and freeze up to three months.
- 3. Thaw.
- 4. Cook on "low" setting in slow cooker for 6-8 hours.
- 5. Break apart ground turkey and stir.

Source: https://newleafwellness.biz/2013/02/13/slow-cooker-turkey-black-bean-chili/

Conducting a Mock Survey

By Marcia Patrick, RN, MSN, CIC, FAPIC

Mock surveys are a good way to assess readiness for a CMS or accreditation survey. The goal is continuous readiness, not preparing for the survey. The CMS and accreditation requirements are all about patient and staff safety, so should be followed all day, every day. It can be helpful to ask a colleague from another facility to do your mock survey- fresh eyes are a real asset.

A good starting point is the CMS Infection Control Surveyors' Worksheet- this is what the surveyor will use. Review this and use it to determine where your facility is compliant and where work needs to be done. There are also evaluation tools- one will be provided at the end of this article. If you're having an accreditation survey, know the IP requirements of your survey organization.

As part of the CMS Worksheet, you are asked to write down the nationally recognized guidelines you are following. Be careful here- it's best to indicate the chapters you follow, not the whole guideline. For example, AORN Guidelines for Perioperative Practice has many chapters, some of which do not apply to ASCs, and some that are specific for ASCs. Note the chapters you are basing your policies and procedures on, not just the whole thing. Otherwise, the whole thing is fair game for the surveyor. Same with the CDC Guidelines- for most ASCs, the Guideline for Prevention of Intravascular Device-Related Infections is only applicable for your peripheral IVs, as central lines aren't usually used. The new, 2017 SSI Guideline would be applicable.

Organization of your documents is important. One approach is to have a survey book containing the documents important

to your program. These might include:

- Your infection control program document that includes a description of your facility and patients;
- The risk assessment that weighs and prioritizes the risks identified. There are many tools available on the internet for this. Remember this is a living document that changes as risks are eliminated and others added;
- Risks selected to work on. For each, a goal and measurable objective(s) to fix the problem or reduce the risk; (this becomes the basis of your program!)
- A dashboard that shows progress on the goals and objectives;
- Minutes of the committee or group that oversees the infection prevention function in your facility. Remember to include approval of infection prevention policies and procedures on a schedule- these can be listed in the minutes. If there is contention or an issue, that can be called out in the minutes along with the decision that was made. Anything OSHA- Bloodborne Pathogens Exposure Control Plan, TB Exposure Control Plan, Hazard Communication (not infection prevention!) must be reviewed and approved ANNUALLY!
- Surveillance data- the graphs or reports for the surveillance you are conducting, these may be monthly or quarterly, depending on your reporting schedule and frequency of the committee meeting:
- Infection Prevention Manual or IP policies and procedures.
 This may be in a separate binder.

The advantage of having everything in a binder or computer file is that if you are not there when there is an unannounced survey, everything is available for the surveyor.



CONTINUE READING "CONDUCTING A MOCK SURVEY" AND VIEW "CHECKLIST" HERE!

An Integrative Behavioral Health Care Model Using Automated SBIRT and Care Coordination in Community Health Care

Efficient and effective integration of behavioral health programs in a community health care practice emphasizes patientcentered medical home principles to improve quality of care. A prospective, 3-period, interrupted time series study was used to explore which of 3 different integrative behavioral health care screening and management processes were the most efficient and effective in prompting behavioral health screening, identification, interventions, and referrals in a community health practice.



SEE THE STUDY HERE!

Illinois

Various Positions

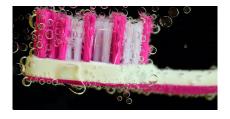
Community Health Partnership of Illinois (CHP) is seeking mission driven staff members – Dental Hygienist (18hr/week) in Harvard, IL; Dental Assistant (34hr/week) in Mendota, IL. CHP offers a competitive salary and outstanding benefit package. Contact Barbara Sacco, HRD by e-mail HR@chpofil.org or fax 312.578.1454 for more information.

Various Positions

The Illinois Primary Health Care Association seeks Physicians, Medical Directors, Nurse Practitioners, Physician Assistants, Certified Nurse Midwives, Dentists, Dental Hygienists, Licensed Clinical Social Workers, Licensed Clinical Professional Counselors 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, Ashley Colwell, Manager of Workforce Development, acolwell@ iphca.org or visit www.iphca.org for more information.

Various Positions

Family Christian Health Center, Harvey, IL (FCHC) is seeking to hire a full time OB/GYN Nurse Practitioner and a Family Practice Physician. FCHC offers an excellent benefit package and a competitive salary. Please contact Regina Martin, HR Manager, via email at rmartin@familychc.org or phone, 708-589-2017, to submit your CV or for more information.



JOB POSTINGS

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), RN-Nurse Care Manager, RN, Medical Assistant/LPN, 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.

Various Positions

FORBES ranked IOWA as the FIRST IN THE NATION FOR QUALITY OF LIFE. THRIVING Iowa Community Health Centers seek Family Medicine Physicians, Internal Medicine Physicians, Pediatricians, Family Nurse Practitioners, Pharmacists, Psychiatric Nurse Practitioners, Dentists, and Behavioral Health Providers to ioin dedicated teams of mission driven providers and staff. Health Centers offer competitive salary and benefit package, eligible for loan forgiveness, and offer visa sponsorship, in their patient-centeredmedical care health homes and state of the art facilities. Contact Mary Klein for more details at mklein@iowapca.org.

Various Positions

Siouxland Community Health Center is seeking to hire a Full-time Dentist and a Full-time Physician. Siouxland Community Health Center offers a competitive salary and benefit package. To apply please visit our website: www.slandchc.com or contact Susan George, HR Director, by e-mail sgeorge@slandchc.com or mail 1021 Nebraska St. Sioux City, IA 51105 for more information.

Various Positions

All Care Health Center (ACHC) in Council Bluffs, IA is seeking to hire a full-time GENERAL DENTIST and a full-time MENTAL HEALTH CASE MANAGER (RN). ACHC offers a competitive salary and benefits package. Please contact

Gina Klein, HR Director by e-mail gklein@ allcarehealthcenter.org or call 712-256-6582 for more information!

Kansas

Social Worker

Hoxie Medical Clinic is seeking to hire a full time LSCSW. We offer competitive salary and benefit package. We are a family practice setting desiring to fully integrate behavioral health and substance abuse counseling. This FQHC is an approved NHSC site and successful applicants may be eligible for the loan repayment program. Please email smoss@sheridan.hpmin.com or apply online at www.sheridancountyhospital.com.

Michigan

Dentists

The Family Health Center (FHC) in Kalamazoo, MI is currently seeking part-time and full-time DENTISTS to join our nonprofit Federally Qualified Health Center. We have a brand new, state of the art facility with 25 dental chairs — making this the largest FQHC in Michigan. Bread and butter dentistry. Full benefits for full-time. Please email Alyssa.rhoda@fhckzoo.com for more information.

Various Positions

Cherry Health is seeking motivated professionals for our Federally Qualified Health Center (FQHC) in the areas of Dentistry, Psychiatry, General and Specialty Medicine to join our diverse team dedicated to ensuring optimal health care. With over 20 FQHC locations in 6 counties, we offer a dynamic and expanding health care system, providing integrated health care for those who may not otherwise have access. Please visit www.cherryhealth.org for more information on open positions and to view our generous benefits package.

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JOB POSTINGS

Internal Medicine

STERLING AREA HEALTH CENTER (FQHC) In Nothern Michigan seeks a full time INTERNAL MEDICINE PHYSICIAN (BOARD CERTIFIED). Competitive salary and fringes. Contact: James Balten, CEO at jbalten@sterlinghealth.net or mail: PO Box 740, Sterling, MI 48659.

Social Worker

MidMichigan Community Health Services is seeking a fully licensed clinical Social Worker to join our School Based Health Clinic in Houghton Lake, MI. Experience working with children through young adults is required, salary commensurate with experience and generous benefit package included. Please send cover letter and resume to: Dr. Stacey Gedeon, 9249 West Lake City Road Houghton Lake, MI 48629 or at stacey.gedeon@midmichiganhs.org.



Missouri

Various Positions

Northwest Health Services is looking for an LCSW with compassion for their patients, a PSYCHIATRIST with a calling to serve the underprivileged population of NW Missouri, a mission-minded DENTIST to join out Family Dental location in St. Joseph MO as well as our Savannah MO clinic, a NURSE PRACTITIONER to service long term care facilities in the St. Joseph/Mount City/Savannah/Gower MO areas, and a FAMILY PRACTICE PHYSICIAN for the St. Joseph/Savannah/Mound City MO areas. Contact HR at heathermiller@nwhealth-services. org or (816) 901-1040.

Nebraska

Various Positions

OneWorld Community Health Centers, Inc. in Omaha, NE is seeking a Physician, Physician Assistant, Nurse Practitioner, Dietitian/Nutritionist, Behavioral Health Therapist, Registered Nurse, and RN/BSN Clinic Manager. 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 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

Primary Care Physician

Community Health & Wellness Partners of Logan County (CHWPLC) is looking for an enthusiastic Primary Care Physician to join their team of Community Partners in Healthcare. A fast-growing health center that is serves one-fourth of the community's population has room for I or 2 full-time physicians. CHWPLC offers a competitive salary and benefit package. Contact Tara Bair, CEO at tara.bair@chwplc.org or visit www.chwplc.org to learn more.

Physician

Bilingual (Spanish) Physician needed to provide professional medical services for outpatients at Lower Lights Christian Health Center and will support the Mission to provide the highest quality holistic care to all who need it and in so doing minister the love of Christ. Physicians will maintain a level of involvement with health center committees and serve as leaders in word and deed for the rest of the staff. MD or DO Degree, Appropriate board certification, Ohio Medical License and

current staff privileges at a local hospital. Contact Kelly O'Brien at kellyo@llchc.org. org or visit our website at www.llchc.org.

Wisconsin

Dentist

Northern Health Centers, Inc. is seeking to hire 3 Full time Dentist to work at our Oconto or Lakewood location. NHC offers a competitive salary and benefit package. Please contact Kelly Schmitt, HR Manager, by email kellys@nhcmedden.com or mail PO BOX 179 Lakewood, WI 54138 or visit our website at www.nhcmedden.com.

Various Positions

Scenic Bluffs Community Health Centers is looking to hire a full-time Behavioral Health Counselor and a full-time General Dentist. We are located in rural Cashton, Wi and offer services in medical, dental, behavioral health, chiropractic and have an on-site pharmacy. Scenic Bluffs offers loan repayment opportunities. For more information on these jobs or to fill out an application visit www.scenicbluffs.org or call Human Resources today at 608-654-5100 x260

General Dentist

Lakeshore Community Health Care in Sheboygan & Manitowoc County, is looking to hire dedicated General Dentist(s) who will provide oral evaluations, restorative procedures, crowns, removable prosthetics, oral surgery, etc. Send your resume/cover letter to: lchchr@lakeshorechc.org.

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