

## *Weekly Medical Directors Briefing September 21-25, 2020*

**“So you may be reading this and thinking,  
‘Yes I do all of those things – there’s nothing to learn here.’  
My challenge back to you is, really?”**

**--Karen Barnett, NHS (England), reflecting on the success factors  
of Alaska’s Southcentral Foundation**

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### **This Week’s News**

#### **Managing to Optimize Quality: The Case of Southcentral Foundation**

Southcentral Foundation, a tribal health center in Anchorage, Alaska, is recognized as one of the world’s leading models of health care redesign and is a recipient of the 2011 and 2017 Malcolm Baldrige National Quality Award, the only health center in the United States with this record. Their Nuka System of Care is based on a Native Alaskan value framework. “Nuka” is an Alaska Native word that means strong, giant structures and living things. It is also the name given to Southcentral Foundation’s whole health care system, which provides medical, dental, behavioral, traditional and health care support services to more than 65,000 Alaska Native and American Indian people.

In the Nuka System, strong relationships between primary care teams and patients (known as customer-owners) have helped manage chronic diseases, control health care costs, and improve the overall wellness of the people they serve. Recognizing that individuals are ultimately in control of their own lifestyle choices and health care decisions, Nuka focuses on understanding each customer-owner’s unique story, values and influencers in an effort to engage them in their care and support long-term behavior change.

**Southcentral Foundation’s management theory** can be broadly defined as **“tight-loose-tight.”**

“Tight” management means that there is considerable structure that is set by leadership that employees must adhere to. “Loose” management means that there is no rigid structure in place and employees have more flexibility to do as they see fit. Their approach to management employs both types.

There are two major things that are “tight” under this management style.

The first is the overall philosophy and the broad picture of how they approach health care. All care teams must follow the organizational philosophy and operational principles. They must practice relationship-based care and strive to understand the story of each customer-owner they serve. They must make use of communication techniques such as advocacy and inquiry to facilitate the formation of the strong relationships, which are at the core of the Nuka System of Care.

The other element of clinical care that is “tightly” managed is outcomes. Each care team has certain health outcomes, for the panel they care for, that they are responsible for reaching. These health outcomes are tracked and are compared to national benchmarks; care teams are able to view their panel’s status on these outcomes at any time. The team is accountable for reaching these outcomes and if they fail to do so, management will step in and determine how best to support them so they can.

Management of all other aspects of clinical care at Southcentral Foundation is “loose.” This means that the specifics of how the team operates, and how they organize their work day-to-day, is mostly up to the team itself. So long as they are following the philosophy of the Nuka System of Care, and achieving the outcomes they are accountable for, teams have considerable freedom in how they operate. They are free to innovate and experiment. Their management does track what teams are doing in these areas, but only so that practices that are working well can be spread further across the organization.

This “tight-loose-tight” philosophy of management has allowed their care teams a great degree of flexibility while maintaining the values of the Nuka System of Care, and supporting good health outcomes for customer-owners.

Southcentral Foundation shares its best practices on leadership, management, quality, and COVID-19 on its [website](#), in [publications](#) and at [conferences](#).

## National Guidelines for Diagnosis and Treatment of COVID-19

With the rapid pace of medical research on COVID-19, it is a good time to step back and look at authoritative summaries of information. Here are six sources I think your providers may find most useful.

1. NIH Coronavirus 2019 (COVID-19) Treatment Guidelines: <https://covid19treatmentguidelines.nih.gov/>
2. Infectious Diseases Society of America Guidelines on Treatment and Management of COVID-19: <https://www.idsociety.org/practice-guideline/covid-19-guideline-treatment-and-management/>
3. Infectious Diseases Society of America Guidelines on Infection Prevention in Patients with Known or Suspected COVID-19: <https://www.idsociety.org/practice-guideline/covid-19-guideline-infection-prevention/>
4. Infectious Diseases Society of America Guidelines on the Diagnosis of COVID-19: <https://www.idsociety.org/practice-guideline/covid-19-guideline-diagnostics/>
5. Curated summary of new published evidence about COVID-19, on the CDC website. Unlike the CDC’s recommendations for the public, which have become politicized, this summary (started at the beginning of September, with new articles posted every few days), is targeted at a professional audience and appears to not be censored or edited based on political concerns: [https://www.cdc.gov/library/covid19/091820\\_covidupdate.html](https://www.cdc.gov/library/covid19/091820_covidupdate.html)
6. Risk calculator for patients with acute COVID, uses clinical data to assess risk of serious illness and death: [https://rsconnect.biostat.jhsph.edu/covid\\_predict/](https://rsconnect.biostat.jhsph.edu/covid_predict/)

## Shriner's Hospital Contracted with PHC for Pediatric Specialty Surgery

PHC has a contract with [Shriner's Hospital](#) in Sacramento. This hospital provides very specialized care for children, including:

- Burn Care
- Orthopedic Conditions, including congenital deformities, complications from fractures, spinal conditions, complications from neurologic conditions
- Pediatric general surgery
- Cleft Lip Repair
- Plastic surgery for children
- Spinal cord Injury
- Pediatric Urology

See the PHC specialty referral director for information on making referrals.

## Oxygen Saturation Monitors, BP Monitors, and Thermometers – No Cost for PHC Members

In response to COVID-19, PHC has obtained a limited supply of blood pressure monitors, oxygen saturation monitors, and thermometers to be given at no cost to PHC members who are patients of FQHCs, RHCs, and Indian Health Services (IHS). PHC would like your help in getting these supplies distributed to our members and your patients who would benefit from this medical equipment.

These supplies will be on a first-come, first-served basis. Interested providers will need to complete the DME Request Form on our [website](#). Complete the form and submit to [request@partnershiphp.org](mailto:request@partnershiphp.org) or fax to 707-420-7855.

Providers will be expected to connect with the selected PHC members to ensure the member can use the equipment properly.

## Funding Opportunity for Project ECHO Diabetes

Stanford University's Project Extension for Community Healthcare Outcomes (ECHO) Diabetes, is looking for additional PCPs to join their well-run Project ECHO for Diabetes. The goal is to increase the capacity of PCPs and clinics to empower and safely, and effectively, manage underserved patients with insulin-requiring diabetes who do not receive routine specialty care. Project ECHO is an innovative "Hub-and-Spoke" outreach model committed to addressing the needs of the most vulnerable populations by equipping community practitioners with the right knowledge, at the right place, at the right time. Through the use of technology, education and research, Project ECHO demonopolizes specialty knowledge and amplifies the capacity for primary care providers to provide best practice care to their patients. The model was developed out the University of New Mexico in 2003 for Hepatitis C and has since expanded to over 65 complex conditions in over 200 global sites.

Project ECHO Diabetes is a weekly video-conference based tele-mentoring and tele-education collaborative, Continuing Professional Development (CPD) accredited, case-based learning program. By creating a unique partnership between community healthcare providers and diabetes specialists, the ECHO program and the PCP will enrich and empower each other in practice and work collectively to enhance care for

underserved patients with insulin-requiring diabetes. Stanford University will serve as the “Hub” site with a team of multispecialty experts (pediatric and adult endocrinologist, primary care provider, behavior health specialist, nurse/diabetes educator, social worker) to work in partnership with “Spoke” sites (community providers and clinics like yours).

The program is accepting applications for community providers and clinics to join this initiative. Project ECHO Diabetes has cohorts beginning in February 2021 and August 2021. Thanks to the generous support of the Helmsley Charitable Trust, there is no fee to spoke sites who participate.

Apply at this link:

[https://stanforduniversity.qualtrics.com/jfe/form/SV\\_ag9Zd5rMh04rfFj](https://stanforduniversity.qualtrics.com/jfe/form/SV_ag9Zd5rMh04rfFj)

For more information email Dr. Nicolas Cuttriss at [diabetesecho@stanford.edu](mailto:diabetesecho@stanford.edu).

## PHC Educational Opportunities and Events

### Register Now for Fall Regional Medical Directors Meeting

Due to the pandemic, our next regional medical directors meeting will again be via webinar format, instead of in-person. We will include small group breakouts to allow more intimate conversation and discussion.

- Learn about new PHC policies, activities
- Share best practices
- Connect with colleagues

**Date:** Friday, October 30, 2020

**Time:** 9 a.m. to Noon

[Sign-up Now](#)

Be sure to enter your **county** when you register. This will help us link you to your local colleagues in the breakout section.

Agenda topics requests can be sent to Dr. Moore: [rmoores@partnershiphp.org](mailto:rmoores@partnershiphp.org).

### Accelerated Learning Education Programs

CME/CE credits available

We acknowledge that the COVID-19 response is changing how health centers and practices approach their daily work and QIP efforts. Wishing to be mindful of the situation, we solicited feedback regarding your ability to participate in the upcoming scheduled webinars. The information received back indicates that most would like the webinars to continue as planned. We want to continue to provide education and resources to help practices on the PCP QIP measures, and will maintain the currently scheduled webinars:

#### **Childhood Immunization Measures (CIS10, IMA2)**

**Date:** Tuesday, October 06, 2020

**Time:** Noon – 1 p.m.

[Sign-Up Now](#)

## **Improving Asthma Care and the HEDIS® Asthma Medication Ratio (AMR)**

**Date:** Tuesday, October 20, 2020

**Time:** Noon – 1 p.m.

[Sign-Up Now](#)

## **Announcing a New Webinar Series: 2019 PCP QIP High Performers - How'd They Do That?**

During each of these webinars, two high-performing PCP's will be sharing how they were able to accomplish their high QIP scores in 2019, including: How quality works at their organization, the keys to their success and lessons learned.

### **Webinar #2 of 3, Winters Healthcare & Alexander Valley**

*Representing provider 10,000 to 20,000 assigned PHC members*

**Date:** October 08, 2020

**Time:** Noon – 1 p.m.

[Sign-Up Now](#)

### **Webinar #3 of 3, CommuniCare & Marin Community Clinic**

*Representing provider with more than 20,000 assigned PHC members*

**Date:** November 05, 2020

**Time:** Noon – 1 p.m.

[Sign-Up Now](#)

## **Tools for Prioritizing Quality Measures**

The ever-growing list of measures that PCP's must track and report in health care can be overwhelming. During this webinar we will explore three tools that will help you and your teams to prioritize measures of focus for your quality improvement work.

**Date:** Thursday, October 01, 2020

**Time:** Noon – 1 p.m.

[Sign-Up Now](#)

## **Virtual ABCs of Quality Improvement**

CME/CE determination is pending.

This virtual training consists of five training sessions and an optional office hour session via webinar. Participants are eligible for 1:1 coaching with an Improvement Advisor after attending. These courses are free.

### **Session 1 of 5, The Model of Improvement and Creating an Aim Statement**

**Date:** Wednesday, October 07, 2020

**Time:** Noon – 1 p.m.

[Sign-up Now](#)

### **Session 2 of 5, Using Data for Quality**

**Date:** Wednesday, October 14, 2020

**Time:** Noon – 1 p.m.

[Sign-up Now](#)

### **Session 3 of 5, Understanding the Role of Measurement in Quality Improvement**

**Date:** Wednesday, October 21, 2020

**Time:** Noon – 1 p.m.

[Sign-up Now](#)

### **Office Hours with Improvement Coaches**

Do you have questions related to quality improvement or need support on your quality improvement project? If so, join us. This is an optional session.

Attendance is encouraged for additional support.

**Date:** Wednesday, October 28, 2020

**Time:** Noon – 1 p.m.

[Sign-up Now](#)

### **Session 4 of 5, Tips for Developing Change Ideas for Improvement**

**Date:** Wednesday, November 04, 2020

**Time:** Noon – 1 p.m.

[Sign-up Now](#)

### **Session 5 of 5, Testing and Implementing Changes via the Plan-Do-Study-Act Cycle**

**Date:** Thursday, November 12, 2020

**Time:** Noon – 1 p.m.

[Sign-up Now](#)

More Details, visit our [Quality & Performance Improvement Webpage](#).

## **Change Management, Change Fatigue & QI**

*Roll With It: Keeping up Momentum Using Change Management Strategies.* These are challenging times for maintaining focus on quality. This training session will introduce the concept of change management and some practical tools for supporting the resiliency of teams to navigate change and support improvement work. Join us as we talk about how to recognize and beat change fatigue and building resilience.

**Date:** Tuesday, October 27, 2020

**Time:** Noon – 1 p.m.

[Sign-Up now](#)

## **Recommended Educational Opportunities Outside of PHC**

### **On-Demand Webinars by ECHO**

All available trainings are available on-demand and free of cost:

- [Leveraging Telehealth and Remote Monitoring to Support Patients with Diabetes](#)
- [Diabetes Patient Needs in the Time of COVID-19](#)
- [Continuous Glucose Monitoring \(CGM\) & Beyond A1c Targets in the Time of COVID-19](#)
- [Platforms to Support Remote Diabetes Monitoring in your Practice in the Time of COVID-19](#)
- [COVID-19 & Sick Day Management for People with Diabetes](#)

- [Identifying High-Risk Diabetes Patients for COVID-19 Triage](#)
- [Insulin Dosing & Therapeutic Inertia in the Time of COVID-19](#)
- [DPP-4 Inhibitor, GLP-1 Receptor Agonist, & SGLT Inhibitor Therapies](#)
- [Tackling Therapeutic Inertia: American Diabetes Association Standard of Care Updates](#)