

FROM THE UCA CEO

Who's on First?

Lou Ellen Horwitz, MA

rgent Care people would rather drive change than reactively manage its aftereffects. The same is true of all $oldsymbol{\mathsf{U}}$ of us who lead the Urgent Care Association (UCA), College of Urgent Care Medicine (CUCM), Urgent Care College of Physicians (UCCOP), Urgent Care Foundation (UCF), Commission on Ambulatory and Urgent Care Quality (CAUCQ), and our regional chapters.

To drive change, you must evolve fast enough to stay ahead, but evolving is usually a messy business. That's been true of UCA and our affiliates too. We've taken a couple of years to really sort out "who's on first" for which initiatives and how we can collaborate most effectively across all of our entities.

I believe we are all coming out of our awkward adolescence – on the association side and across the field. We have figured out who we are, and what we do next is going to be important to the communities we each serve. In honor of this milestone moment, I want to provide clarity about the role of each entity that serves you.

First up, UCA makes sure Urgent Care continues to advance (meaning get better) operationally, and we deal with national-level problems impeding Urgent Care's success.

Next, CUCM is our group whose members include clinicians (physicians, physician assistants and nurse practitioners) in Urgent Care who advocate for all clinical professionals working in Urgent Care. Sometimes that means addressing gaps in practice, and sometimes that means regulatory advocacy.

UCCOP focuses on medical quality, including growing medical research programs and ensuring momentum continues down the pathway to specialty recognition for physicians. They represent physicians both working clinically and leading in Urgent Care, and they have a deeply connected relationship with CUCM, even sharing board members.



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As our newest group, CAUCQ will continue offering Certification and Accreditation for centers while launching a new, fundamental tier for scope called "Designation." Over time, they will expand into educating both patients and payers.

All 4 of these entities focus on work happening within Urgent Care centers.

Finally, UCF is stepping into its new role as the trusted "educational" voice to the public—highlighting the role, capacity, and value of Urgent Care, while creating and spreading a unifying Urgent Care "brand."

Our regional chapters currently take on pieces of all this work, just at a more local level. We are working with chapter leaders to determine what evolution looks like for them in the years to come.

What all this work has created is a deeper understanding of our individual and shared roles and how we can better leverage our collective power. What we've realized at this stage of the work is that we haven't just been getting clarity on roles, we've been creating a megaphone an amplifier. With so many official voices to speak on behalf of our field, we believe we can be much louder now than we have been to date.

That's important because one of our main problems in driving change is that we are comparatively small as a field and as an association. We are a mouse trying to change the minds of gorillas. So how do we evolve to seem more like a gorilla ourselves? We do that by leveraging our collective voices in more strategic ways.

Internally (now that we are clear on roles), we are sketching out what "amplification" looks like and how we fully leverage the voices we have.

We are still a young field, but we are out of our awkward adolescence and are ready to own our place in healthcare.

I challenge you to evolve your role in your communities and to step up to whatever microphone you can find to amplify our collective voice. We'll do that same work on your behalf on a national scale.

It's a strange concept to evolve from a mouse into a gorilla, but I have complete faith in our ability to do it together because I have already seen what we can do. ■