



FROM THE EXECUTIVE DIRECTOR

Demand, Development, and Data

■ LOU ELLEN HORWITZ, MA

As of this writing, there is a fury being unleashed by patients in a mid-Atlantic state over the relocation of a single urgent care center. A growing contingent of community leaders and patients has started a mass revolt—including a blogging, e-mailing, and phone calling campaign.

There are a lot of possible takeaways from this.

First, there's a ready-made market in that area if you are looking for a spot for your next location!

Second, patients clearly have strong feelings about availability of urgent care.

Third, if you are considering a relocation, be sure that you are handling it sensitively or you could have a media nightmare on your hands instead of a grand re-opening.

Fourth, choosing your initial location carefully is still one of the most important considerations in the business.

There's getting to be less available ground, too; according to our tracking of centers, there are 636 (give or take a few) more urgent care centers in the U.S. than there were in early 2008. That's about 7.7% growth in two years—split almost evenly across 2008 and 2009.

By contrast, retail clinics grew by about 350% in 2007, 30% in 2008, and by a total of 10 centers in 2009. There are prevailing theories that retail health growth for the future will be in the "worksite clinic" arena, and another bubble is predicted for 2012-2015.

While urgent care is clearly the tortoise in this "race," to me that still seems like a pretty good thing to be. And, happily, while 8,874 is a lot of urgent care centers, the United States is still a big place and there is plenty of room to continue to grow.

As most everyone knows, our baseline number of urgent care centers was garnered during the development of the "sampling frame" for the first truly national-level urgent care benchmarking survey that UCAOA funded in 2008. Since

those results were published, we've gotten hundreds of requests for additional pieces of data. This feedback, coupled with our promise for new data every two years, means it's time to do it again.

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The UCAOA Benchmarking Committee has been working very hard for the past six months developing the upcoming 2010 urgent care survey. We will be repeating some questions that we want to track longitudinally, but introducing many new ones in the areas you told us were most important to you: staffing, financing, clinical services, and marketing.

We've continued to learn a lot internally about writing good survey questions that will elicit specific information to help you and the industry be even more successful, but the key to the survey's success is *you*. If you receive a survey, it is vital that you complete it thoroughly and accurately. The best-written survey in the world is ultimately worth nothing without quality responses.

We've also made some process adjustments to make those responses easier for you to share. Instead of paper, we'll be using a web-based technology.

We are still using an external survey administrator to ensure the validity and credibility of the results. By using our selected vendor and their robust reporting technology, we will be able to do even better cross-tabulation-style analysis and report the results more quickly than we could in 2008.

We are forever indebted to Robin Weinick, PhD and her team at the Harvard School of Public Policy for their original work on the inaugural survey. It established a valid baseline for the industry and provided a strong foundation for us to be able to take the survey soundly into its next evolution—which you will see very, very soon.

P.S.: The owner of the mid-Atlantic urgent care center has since announced a reversal of their relocation decision. ■



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