



## FROM THE EXECUTIVE DIRECTOR

# Astonishing

■ LOU ELLEN HORWITZ, MA

Heeeeeere's fall! School physicals, flu season, indoor home improvement project injuries.... Can slipping on ice and minor frostbite be far away? Ah, the busy season!

From what I am hearing from all of you across the country, 2010 has been a mixed bag, thus far. Some centers are so busy they can hardly breathe, while others had a quiet first quarter since influenza was comparatively tame, and still weren't sure what the summer would bring as of our spring convention.

Some centers are opening their fourth (or 24<sup>th</sup>) locations, and the principals haven't seen their families in daylight hours for months. Others are facing the challenge of being the first urgent care center in their area, and are struggling to educate the community on what urgent care is all about.

It's hard to know who has it better.

Most of you are also fighting misconceptions about what you do, who you are "stealing" patients from, whether your center has any impact on the ED or not, the shifting sands of state regulations, and mixed messages (to both you and your patients) from insurance companies.

Everyone wants to know what "healthcare reform" is going to mean, and no one does. And yet, urgent care is in the news now, every single day, so...we must be doing some things correctly.

But how did we get here?

Before you think you are in for a "history of urgent care" lecture (which cannot be done anyway, as our origins are shrouded in mystery!) let me be clearer: Why are you and your staff (and your families, by extension), and all of us in the UCAOA offices, swimming in this urgent care pool at all?

Did you know that the Statue of Liberty was almost not completed because the U.S. couldn't raise our half of the funds to pay for the base and pedestal? An astonishing

*"In the day-to-day,  
you have to find it in  
the one-to-one."*

120,000 contributions, most for under \$1 (yes, that's one dollar) finally combined to reach the necessary \$100,000.

Before you dismiss that little anecdote as a complete non sequitur, let me explain; the story strikes me as similar to how urgent care has gotten where it is today. There are a lot of you, and most of your businesses are small. *But*, you are willing to take what you have and put it toward the common good, and little by little, fairly quietly, you are building something that is starting to get noticed by the rest of the country. That's a pretty cool thing to be a part of.

It can be hard to see from your individual positions, though. Especially at the end of a long day, or after a tough phone call, or a frustrating negotiation with a system seemingly designed to thwart your success.

At one end, you are that brand new center and just hoping against hope that someone is going to pull into your parking lot. At the other end you are just hoping the phone will stop ringing long enough for you to catch up on your email or charting. Yet, you continue.

Somewhere in each of you there is a desire to be part of something unique, important, and impactful. In the day-to-day, you have to find that in the one-on-one. Making a difference in the life of a patient—be it in the exam room, or with a billing question, or via a constructive chat with one of your staff. All those little differences are your contributions to our Statue of Liberty.

Don't stop. Collectively, you are starting to get noticed for what you have quietly been building for years. And one day, it is going to be astonishing (if it isn't already). ■



**Lou Ellen Horwitz** is executive director of the Urgent Care Association of America. She may be contacted at [lhorwitz@ucaoa.org](mailto:lhorwitz@ucaoa.org).