



EVERYONE IS A LEADER

JEFF COLE, PRESIDENT/CEO, JEFF COLE GROUP

What does it take to be a leader? Are you a leader?

What if I told you that’s a trick question and that we’re all leaders? According to Webster’s Dictionary, leadership is “the quality of character and personality giving a person the ability to gain the confidence of and lead others.” Leadership is not something exclusive to a privileged few!

Several myths surround leadership. Grab your nearest sledgehammer and prepare to smash these to smithereens.

MYTH: I must have an organizational position of authority to be a leader.

BUSTED! You don’t need to be at the top of an organizational chart to be a leader. Titles give authority, not necessarily influence. Healthy influence is earned by bringing credibility to an organization or relationship—something we all can do! Individual leadership is more about finding a personal area of strength and using that strength to influence others in a positive way.

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MYTH: To be a leader, I must possess a “turbo-charged” personality.

FAKE NEWS! According to *Psychology Today*, sociologists tell us that the most introverted of people will influence 10,000 others in an average lifetime. Regardless of one’s personality, we influence others as we pursue our passions.

MYTH: Leaders must have all the answers.

WRONG! If this were the case, it’s highly unlikely we would be reading about major stores closing around the country or the stock market plummeting. Great leaders ask questions, empower others and build other leaders. They also surround themselves with people better than they are at certain things.

So what can we do today to become better leaders?

Here are a few ideas:

- Practice mindful listening
- Build trust and credibility
- Add value to every meeting you attend
- Foster a team mindset
- Avoid gossip and blame
- Be adaptive to change
- Be empathetic, realistic and proactive when things go wrong

Have fun leading your way to a better tomorrow!

MEASURE ACCURATELY, ACT RAPIDLY AND PARTNER WITH PATIENTS

MAP improves hypertension control in medically underserved patients: Care Coordination Institute and American Medical Association Hypertension Control Project Pilot Study results

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Measure Accurately, Act Rapidly and Partner with Patients (MAP) is an evidence-based protocol implemented to improve hypertension control in a clinic for underserved patients (49.9% Medicaid and 50.2% black). Patients with hypertension seen during the year before intervention and with at least one visit during the 6-month intervention (N = 714) were included. If initial attended blood pressure (BP; standard aneroid manometer) was $\geq 140/\geq 90$ mm Hg, unattended automated office BP was measured in triplicate and averaged (Measure Accurately) using an Omron HEM- 907XL.

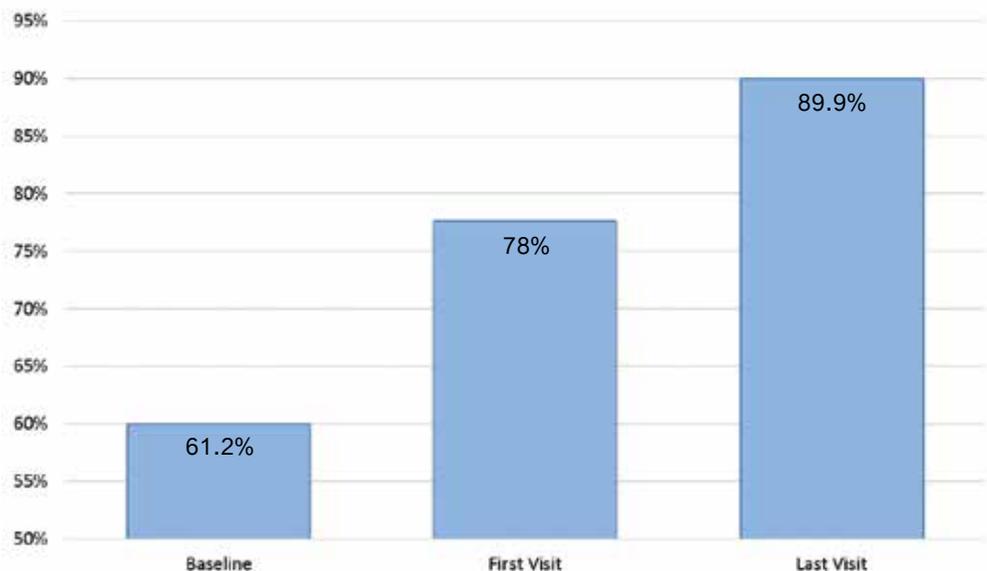
When automated office BP was $\geq 140/\geq 90$ mm Hg, Act Rapidly included intensification of antihypertensive medications, assessed by therapeutic inertia. Partner with Patients included BP self-monitoring, reducing pill burden



and minimizing medication costs, which was assessed by systolic BP change per therapeutic intensification. Between baseline and the last study visit, BP control to $<140/<90$ mm Hg increased from 61.2% to 89.9% (P < .0001). MAP rapidly and significantly improved hypertension control in medically underserved patients, largely as a result of measuring BP accurately and partnering with patients. ■

Patients who had at least 1 or more visits during the first 6 months of implementation had a nearly 30% point increase in HTN control rate in that period.

MAP Patients with Baseline and ≥ 1 Study Visit





CCI SUPPORTS TARGET: BP RECOGNITION PROGRAM

TARGET: **BP**[™]

The Target: BP Recognition Program is a collaborative effort between the American Heart Association and the American Medical Association that seeks to recognize practices throughout the nation who have achieved excellent results with their patients' hypertension control rates. Practices who register to participate with Target: BP are eligible to receive educational materials and tools to assist them in their efforts for even better hypertension control.

For the 2017 data submission period, CCI was instrumental in registering 276 practices from around S.C. to participate; 155 practices were eligible to be recognized for Gold Level Participation by having hypertension control rates of at least 70%.

The deadline for data submission was June 1; however, if you are interested in discovering how your practice can participate in the 2018 data year, visit targetbp.org or contact Ellison Welton, CCI Provider Relations coordinator, at ewelton@ccihealth.org.

