

Georgia Association of Healthcare Executives

An Independent Chapter of



American College of
Healthcare Executives
for leaders who care™



Newsletter – Fall 2016

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PRESIDENT'S LETTER

By Tripp Penn, FACHE

We hope you have enjoyed your participation with the Georgia Association of Healthcare Executives so far this year. For many health systems, the months ahead are an opportunity to “finish strong” with the goals you have set for your respective organizations. To do so, it is important to continue to grow and stretch yourself every day as a leader. In the coming months, we have several more opportunities for you to receive education on healthcare leadership and network with fellow leaders in the industry.



- One of the things we are particularly excited about at GAHE this year has been the involvement of **physician executives**. We are very fortunate to have a great leader in Dr. John Henson, FACHE coordinating our efforts with physicians around the state, and the Physician Executive Committee will host its first dinner and networking evening on October 6.
- On October 17, we will host **our Mini-Cluster meeting in Macon**. This is a great opportunity to receive six face-to-face credit hours in three sessions on leading strategic change, recognizing substance abuse among nurses and the impact of technology on healthcare.
- On October 20 will be two opportunities for networking events, in Atlanta and in Savannah. In the Atlanta area we will partner with Georgia HFMA and Georgia HIMSS again to host a **networking and charity benefit evening at the World of Coca Cola**. The topic for this event will be the patient experience, and we are currently looking for sponsors and in-kind donors to support this event. In Savannah will be our **Low Country Networking Evening** at the Moon River Brewing Company, housed in one of the oldest and most historic buildings in this historic town.
- On October 27, we will be back at Maggiano's for our monthly meeting and a program about **transforming revenue cycle**.

Between now and November, our national political discussion will likely be ever negative and increasingly divisive. As healthcare leaders, let's pledge to be better than that. Let's model kindness and compassion among our team members. Let's support our fellow colleagues and lift each other up when we get knocked down. Let's be civil and respectful as we disagree with each other. Let's love our neighbor and continue to serve and support those in need in our communities. One leader who I feel extremely confident in is our **next President of GAHE, Mary Germann, FACHE**. She is an incredibly bright, passionate and organized leader who cares deeply about our organization. We are in excellent hands in the year ahead.

I continue to be sincerely thankful **for those who have volunteered with GAHE in 2016**. We are a volunteer-led organization that is fortunate to have dozens and dozens of committed people on our Board, as committee leaders and committee members. These dedicated volunteers have worked hard this year to bring quality education and networking opportunities for Georgia's healthcare leaders. I have enjoyed working with you all and it has been a privilege to serve alongside you. As we work toward the close of the calendar year, let's finish strong on behalf of our many patients and their families.

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MEMBER NEWS

Notice of Slate and Meeting – 2017 Board of Directors

The Nominating Committee of the Georgia Association of Healthcare Executives (GAHE) has met and offers the following slate of Officers and Directors for your consideration for the 2017 chapter year. Voting will take place at the GAHE Annual Meeting to be held Tuesday, November 16, 2016, 11:30 am at Maggiano's Atlanta/Buckhead, 3368 Peachtree Rd., Atlanta, Georgia 30326. To attend the meeting please register on the ["Events" page](#) of our website. We look forward to seeing you there.

CANDIDATES

President – Mary A. Germann, RN, MN, FACHE, SFHM (automatic succession)
Vice President – Timothy A. Slocum FACHE, CSSBB, CHFM
Secretary – Marlene Sidon, MSHSA, FACHE
Treasurer – Matthew S. Jernigan, MBA
Immediate Past President – Tripp Penn, FACHE (automatic succession)
At-large Member – Bryant Cornett, SIOR, LEED AP
At-large Member – John W. Henson IV, MD, MBA, FACHE
At-large Member – Chad Knight, MSHA, FACHE
At-large Member – William (Bill) Lee III, MHA, MBA
At-large Member – Stephanie Troncalli, PMP, MHA
ACHE Regent for Georgia – J. Larry Tyler, FACHE, FHFMA, CMPE (automatic succession)

BIOGRAPHIES – See biographies for our candidates on our website at [GAHE Slate of officers 2017](#) .

According to the bylaws, the Board of Directors shall consist of (a) the officers of the corporation (President, Vice President, Secretary, Treasurer, Immediate Past President), (b) five (5) at-large active members, and (c) any currently serving Regent of ACHE who is a member of GAHE (a "Regent Director"). With the exception of the Regent Directors, the President, and the Immediate Past President, directors shall be elected by a majority of the voting membership present at the annual meeting of the membership. The Vice President automatically succeeds to the office of President and the President automatically succeeds to the office of Immediate Past President. The Bylaws require the President and Vice President be either ACHE Fellows or Fellow Designates at the time of election and the nominees for the other positions must at least be active GAHE members. Additional nominations may be made in the following manner: any active member may be nominated by written petition of at least fifteen (15) members of GAHE. Such nominations must be received by the Nominating Committee at least fifteen (15) days prior to the annual meeting to be held on November 16, 2016. Send written petitions to: GAHE Nominating Committee, 736 Willow Ridge Ct., Marietta, GA 30068.

GAHE Student Newsletter – see the latest issue

Check out the Fall issue! Produced by GAHE Student Associate members, it features spotlight articles on students in our chapter and their experiences as they begin their journey as healthcare leaders, industry news and the ever-popular "Advice From the Authors" column. Read it now on the ["Students" page](#).

Your GAHE Board at work

The GAHE Officers, directors and committee chairs met for an in-depth strategic planning session on August 12 to assess our organization's goals and looking forward to next year. We thank Jackson Healthcare for the generous use of their facility to make it a very productive day. *Photos below by Secretary Nancy Greene and PEG Chair John Henson, FACHE, see many more full-size in the album at [Board Strategic Planning Meeting 08-12-2016](#).*



Full board begins the day



Sponsorship chair Callie Andrews, FACHE discusses one strategic focus with ACHE Regent Larry Tyler, FACHE



Board Advisor Allyson Keller, FACHE; Immediate Past President Jay Dennard, FACHE; Board Advisor Craig Honaman, FACHE; At-Large Member Barry Herrin, FACHE



Reviewing the chapter metrics for the year – far right: At-Large Member Marlene Sidon, FACHE

MEMBERS ON THE MOVE

Barry S. Herrin, CHPS, FAHIMA, FACHE, Esq. — Effective June 1, Mr. Herrin established his own boutique law practice devoted to serving health care providers, Herrin Health Law Partners, P.C., www.herrinhealthlaw.com, with offices in Atlanta, Cumming, and High Point, NC. Barry is a long-time volunteer with GAHE, serving in a number of board and committee chair positions, and has earned the [ACHE Exemplary Service Award](#).

Dr. Mary Gregg named to Board of Examiners for 2016 Malcolm Baldrige National Quality Award
The Commerce Department’s National Institute of Standards and Technology (NIST) has named GAHE member Mary Gregg, MD, MHA, President and CEO of Gregg Healthcare Consulting in Atlanta to the Board of Examiners for the 2016 Malcolm Baldrige National Quality Award. The Baldrige Award is the nation’s highest honor for organizational innovation and performance excellence. Appointed by the NIST Director, examiners are responsible for reviewing and evaluating applications submitted for the Baldrige Award, as well as other assessment-related tasks. The examiner board is composed of more than 350 leading experts competitively selected from industry, professional, trade, education, health care and nonprofit (including government) organizations from across the United States.

→ **Your news wanted!** — GAHE members who have moved to a new position, received a promotion or achieved professional accomplishment, we would like to hear from you! Notices may be submitted to GAHE Administrator Karen Manno, [kmanno AT gahe.org](mailto:kmanno@gahe.org), or any member of our Communications Committee. A notice should not exceed 40 words and should tell the member’s name and credentials, accomplishment /new position/ new location, former position and location, and effective date. Photos are encouraged but not required.

MEMBERSHIP REPORT *(third quarter 2016, as of publication date 9/30/16)*

Congratulations to these GAHE members who **achieved their Fellow of ACHE (FACHE) credential**. Please take a moment to congratulate your colleagues for their commitment to advancing their healthcare careers:

Ryan K. Clarke, FACHE

Brandon M. Nudd, FACHE

Christopher Dorman, FACHE

Anthony K. Jones, FACHE

Demarius D. McRae, FACHE

Nishith Patel, DHS, FACHE

We also congratulate these **Fellow Designate members: Marty Chafin, Darrell L. Nash, and Michael G. Justice** who recently passed the Board of Governors Examination in Healthcare Management and are well on their way to earning the distinction of board certification in healthcare management

And we congratulate the following members who **recently recertified their Fellow status**:

Heather K. Dexter, FACHE, John M. Hauptert, FACHE, Melinda M. Nelson, FACHE, Timothy A. Slocum, FACHE, Robert E. Bolden, FACHE, Pam Buecker, FACHE, Elizabeth Fritchley, FACHE, Amanda Hopkins Tirrell, FACHE, Beverly R. Hunt, RN, FACHE, Karen N. Johnson, RN, FACHE, Patricia Ketsche, PhD, FACHE, Clare O'Geary, FACHE, Leslie B. Wiggins, FACHE, Deborah P. Armstrong, FACHE, Charles R. Evans, FACHE, Terrence A. Johnson, FACHE, Jonathan C. Knight, FACHE, Lee Ann Liska, MBA, FACHE, Phillip A. Villacci, FACHE, Kellie A. Foss, FACHE, Michael G. Johnson Jr., FACHE, Carrie Owen Plietz, FACHE, Steven M. Scott, FACHE, Linda Townsend-Green, FACHE

We welcome the following new members of GAHE and hope to meet you soon at one of our events:

Susan R. Blakely, Phillip S. Capes, Taya Duchatellier, Thomas Gardner, Terry S. Hatch, Watson Lunsford, Anne Murray, Nancy Neuringer, Elizabeth L. Parizo, Indera Rampal-Harrold, PhD, Dan Whitenack, DrPH, Tekeshia Austin, Lithonia, Adam Berman, MD, Delena C. Brockmann, Christi C. Bryant, Brian E. Coleman, Anna K. Fox, Shirley Gabriel, Elizabeth R. Gallup, Trent Goode II, Gregory Guillet, Maria Hernandez, Elize Joseph, Evans, Vicki S. Kaiser, John Kellerman, Amy S. Lane, RN, Kyle W. McKinley, Martin Periola, Emily Rogers, Ameshea H. Taylor, Sarah Trautmann, Ronnie A. Ware Jr., Thomas Worthy, JD, Mulikat L. Amuda, Gloria Barnes, Alora Brock, Pamela Burton, Angela Crouch, Chaz R. Dachenhaus, Benjamin Dyer, Jacqueline Hamer-McGhee, RN, Songsarae Harley, Chris Hendry, Roy Hightower, Hugh Jackson, Caleb Long, Sharon Massey, Fern Oddman, Deven Poppell, Todd Quartiere, Dustin Robertson, Laura A. Salvatore, Jonathan E. Schmid, Bernie Segura, Jitendra Thakkar, MD, Octavia Washington, Oliver Banta, Cheryl Blair, Queenester Campbell, Kerry P. Clark, Natalie P. Daniels, Anita Echols, Kara Erlandsen, LaQuinta Grizzard, Deloria Jackson, Tarri Johnson, COL Greg Kolb, Michelle L. Parmelee, Joanna Roberts, Pamela Roshell, PhD, Emily Russell, Samantha Sater, Daniel Satterfield, Matthew D. Singletary, Lisa Wallace, Michael D. Wynne

FROM YOUR ACHE REGENT

Network or Not Work!

September 2016

By J. Larry Tyler, FACHE, Regent for District II, Georgia, Chairman Emeritus of Tyler & Company, Chairman and CEO of Practical Governance Group



During this time of *déwanjman*, it's important that everyone have a high awareness level of career advancement opportunities or general ideas for career growth if one becomes displaced. Per my Spring 2016 Regent's Message, *déwanjman* (de – wanj – ma) is Patois for a shaking of your innards when something violent upsets you ...like when you drive over a "sleeping policeman" (a speed bump) at full speed. More often than not, the door widens more through networking as opposed to answering ads. As an example, when I conduct my bi-annual survey of military medical administrators transitioning from the military to the civilian sector, I ask, "What techniques worked best for finding jobs?" Of the top five, four involved networking.

Networking 101

Why is networking so important? Because you're often able to uncover opportunities that have not been advertised. In fact, sometimes you can have a job handcrafted just for yourself. As an example, someone was thinking about creating a job, but had procrastinated. All of a sudden, there you appear ... the answer to a prayer. A friend of mine was interviewing recently and had a unique set of skills. She sent her resume to one of my contacts (after networking with me) and he immediately called her. When she interviewed, she was told by an interviewer that she was a "godsend." Networking also helped in this case because someone knew someone who could vouch for the candidate. Most opportunities are very competitive. When the hiring group starts to sort through resumes, team members pay more attention to those who came from a known source. So, every little bit of information helps. If your cover letter notes that you know others in the organization, that's even better.

So what is networking? It is merely connecting with people. And how do we do this? By finding something in common. In this case, the more the better! All of you reading this Regent's Newsletter already have one thing in common; you work in healthcare. Secondly, you're all members of ACHE. And if trice is the charm, you're also members of GAHE. Wow! Three things we all have in common, and I have barely started.

Networking Necessities

What do you need to do to network?

1. For starters, have a "networking attitude." Sometimes, this is hard to do, especially for introverts. Keep in mind a networking attitude always can be cultivated. Just take it upon yourself every day to reach out and connect with people – in and out of healthcare as those in other fields may have healthcare connections. But you will never know this unless you engage in conversation.
2. Have business cards on hand as someone is bound to ask you for one. If you are between jobs, you can order general business cards inexpensively online. There was a time I didn't like the idea of featuring a faceshot on a business card. Time is an influencer, and my new business card has my picture on it. Since I have a "face made for radio" my reluctance was overcome by the need for someone to remember me from a chance meeting. Business card holders come in handy, and I stash them in various places so that a card is within easy reach. If for some reason you're out of cards, ask the person you've met for two of his/her cards. Write your name on the back of one card and return it. Keep the other. Then, text or email the person a vCard.

3. Always keep with you a writing instrument that you can find quickly. I usually carry a spare “space pen” in my casual clothes. But if I’m dressed for business, I carry a nice fountain pen in my shirt pocket and another one in my coat. Writing tips and hints on the back of cards helps tease the memory for follow up.

Wallflowers vs. Social Butterflies

Networking is tough for introverts. Unlike their extroverted counterparts, it doesn’t come as naturally. But there’s a solution – work harder. Introverts must assume a networking attitude at every event that they attend. Believe it or not, sometimes the best networkers are the ones who draw people into conversation by just asking open-ended questions and listening.

Embracing Technological and Face-to-Face Opportunities

Thanks to LinkedIn, we now have an evolving technical solution for networking. Although the platform makes certain tasks easy, be sure to write the person a custom note; don’t just click the button asking to connect. A personal note will go a long way to gaining acceptance. I adopted the guideline to accept requests from anyone in healthcare. If it’s not obvious they work in the industry by their title, I review their profile. Undoubtedly, you’ll get some odd requests, so it’s good to also think about the types of people with whom you’re sharing your network. Raise your red flag if there are typos in the profile and the requestor only is connected to a handful of people.

ACHE provides some of the greatest networking opportunities that exist in healthcare, starting with the ACHE Congress on Healthcare Leadership, to be held March 27 to 30, 2017, at the Hilton Chicago and Palmer House Hilton. Hotel blocks will open in November, and be sure to reserve your room before blocks fill up. In addition, GAHE has several upcoming networking opportunities where you can practice your networking skills in friendly environments. Check out gahe.org’s event calendar at the [Events page](#) for more events and updated details.

As Georgia Regent, I support our chapter and ACHE however possible. This includes representing Georgia favorably when interacting with other Regents, as well as the ACHE board and administration in Chicago; being a career development resource for members; encouraging senior-level executives to become involved in GAHE; and promoting the benefits of earning a Fellowship to CEOs who are not yet credentialed. Greatly appreciate your support.

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UPCOMING EVENTS

Get the most current details and registration for all GAHE programs on the “Events” page (list here accurate as of publication date 9/30/16)

- October 6: Physician Executives Group (PEG) Dinner & Networking Evening at Dunwoody Country Club, Atlanta, 6:00-8:30 PM
- October 17: GAHE Mini-Cluster , at Edgar H. Wilson Convention Center, Macon Centreplex, 7:45 AM – 4:30 PM
- October 20: Atlanta Networking Evening and charity benefit at World of Coca-Cola, 7:00 PM – 8:00 PM, joint event with Georgia HIMSS and Georgia HFMA
- October 20: Low Country Networking Evening in Savannah, at Moon River Brewing Company, 6:30 – 8:30 PM

- October 27 Meeting: “Taking the Lead in Revenue Cycle Transformation”, at Maggiano’s Atlanta/Buckhead, 11:30 AM – 1:30 PM
- November 7: Small-group Lunch with the CEO featuring Kim Ryan, FACHE – Senior VP, Wellstar Health System and President, WellStar Atlanta Medical Center, 12:00-1:30 PM
- November 7: Complimentary education program 4-5:30 PM and networking reception 5:30-6:30 PM – “Population Health and the Cultural Demographic Shift” featuring Glenn Llopis, President, Glenn Llopis Group, at Hyatt Regency Atlanta. Sponsored by Aramark, part of the ACHE Atlanta Cluster (need not be registered for cluster to attend)
- November 11: Annual Joint Breakfast with Georgia Hospital Association, at Hyatt Regency Savannah, 8:00 AM – 9:30 AM
- November 16: Annual Meeting/Luncheon, at Maggiano’s Atlanta/Buckhead, 11:30 AM – 1:30 PM
- December 5: Small-group Lunch with the CEO featuring Lance Jones – CEO of Coliseum Medical Center, Macon, 11:30 AM – 1:00 PM
- December 14: Holiday Networking Evening at College Football Hall of Fame, Atlanta, 6:00 PM – 8:30 PM, joint event with GA HFMA and GA HIMSS

RECENT EVENTS RECAP

Our August 19 meeting presented an expert panel on “When Substance Use Disorder Involves the Nurse Care Provider.” *Photos by Rodney Gullatte, Sr., see many more full-size in the album at [August 19, 2016 Meeting](#).*



Panelists: Cynthia Hall; Merry Fort; Sherry Sims; Mary Gullatte; Barbara Austin; Moderator Catherine Futch, FACHE



At-Large Board Member Marlene Sidon, FACHE; Vice President Mary Germann, FACHE; Member Relations Chair Bindi Shah



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CAREER CORNER

Then Versus Now: The Changing Job Search Process

*By GAHE Board Advisor J. Craig Honaman, FACHE, CRC – Principal
H & H Consulting Partners, LLC, a healthcare consulting firm specializing in career transitions for healthcare executives, in Atlanta, GA
careerdir1@aol.com / www.careerpiloting.com / 770.394.2221*

Conducting a job search has become a life time event. Jobs come and go which forces people to not just get ready to make a career move but to “Stay Ready” all the time. Various characteristics of the job search process have changed, especially if a job search has not been conducted for a couple of years, the changes can be significant. Some overview perspectives include:

- Actions happen a lot faster than they used to.
- Answers to questions are “sound bites” – 90 seconds to two minutes
- Use of LinkedIn is crucial
- Electronic interactions continue to evolve.

Here are some tips to consider:

1. **THEN:** The Resume has been a “chronological / historic resume”;
NOW: A Strategic Resume. Requirements are different and have been changing for a couple of years. The main feature of a Strategic Resume is a Positioning Statement to lead off the resume. Do not lead off with Education (it goes in the back), a bland “Summary” (that says a lot about nothing), or general work assignments. The first page is the most valuable part of sales information to the reader. Positioning Statement includes:
...a Generic title – who are you
...a Brand Statement – 1 to 2 sentences
...a bullet list of Quantified Accomplishments – Your VALUE to the company
...a list of Skills, competencies, knowledge that most people do not have
...what others say that sets you apart from competitors.
2. **THEN:** Resumes reviewed in 60 – 90 seconds.
NOW: 10 seconds or less time taken to review the resume which means getting the information up front for quick assimilation. Thus the Positioning Statement is crucial.
3. **THEN:** The style of review was to read the resumes in detail.
NOW: Scan read / skim looking for bullets. The “Drive through mentality: Give it to me and Give it to me NOW.”
4. **THEN:** The Elevator Pitch an overview of one’s career and work experience.
NOW: A well-rehearsed 2 minute statement with value driven grabbers, derived from information in the Positioning Statement. Consistent threads throughout the information flow from elevator pitch to resume to cover letter and to the interview.
5. **THEN:** Thank you notes of a generic thank you.
NOW: Thank you letters / notes have moved to become “influence letters” rather than a simple “thank you.” Structure could be three sentences: “Thank you very much...”, “I heard what you said about...”, “Oh, by the way” with an influencing statement. Include two or three sentences of new information to add to the value proposition of the candidate role.

6. **THEN:** Chasing Job Openings on Job Boards or “Open Position Reports” was the norm and is useless. Listings are out of date by the time they are read and hundreds of people are chasing whatever openings are listed.
NOW: Create and develop Job Opportunities by selling value and “What can I do for your Company.” Developing a Network of colleagues who know you well enough to think of you when the next job opportunity occurs is where you need to be positioned. Creating the network of colleagues takes some time and effort. Attending the GAHE meetings may be the most productive time spent on the career development.
7. **THEN:** Career Management with a focus to move in a progressive ladder of positions.
NOW: Strategic Career Positioning ignores a formal ladder but instead relies on increasing responsibilities and appropriate compensation. Titles are often vague and meaningless. Responsibilities count! Strategically in the career, what skills and experiences would most enhance the “quiver of arrows” to be well armed in the next competitive fight for a choice position.
8. **THEN:** Work assignments were in roughly a 5 year window. Advancement to the next rung on the ladder moved up another 5 years.
NOW: A position is now 24 to 36 months. Job “hopping” is no longer frowned on but instead a requirement. Flexibility and adaptability are essential traits in today’s workforce. Meanwhile a career vision of 10 to 20 years out is not uncommon. Most individuals will have three Careers, each about 20 years – from age 25 – 30 to 50; 50 to 70; 70 and beyond. Within those careers, there will be jobs lasting 2 to 3 years. Jobs may change with the same Employer so prepare new skills to enhance the existing company but in a new role.
 - Plan for change
 - Look for new adventures
 - Stay on top of new developments
 - Skill maintenance and development are required.
9. **THEN:** The HR exec would review the resume and credentials of candidates.
NOW: Electronic review of the resume and application are done with the ATS (Applicant Tracking Systems) at the front end of job application submittal. Know how the systems work to maximize the resume Positioning Statement to reflect the characteristics that the ATS is looking for in the document submitted.
10. **THEN:** First round job interviews were done with a face to face “screening” visit.
NOW: Virtual Interviews are taking over the one-on-one interchange. Cost savings, a predetermined list of questions asked of all candidates, and less human interaction early is driving this change. Be sure your technology is up to date – lap top with camera – or have a reliable source to get the support needed. For some HR systems with interview programs, the questions are timed and verbal rambling is not in favor of the interviewee. Be succinct and answer the question.
11. **THEN:** Email the resume with a cover letter.
NOW: LinkedIn with support from a Twitter. The LinkedIn page may be reviewed before much information is exchanged by the hiring authority. The LinkedIn page becomes more important in appearance and content as a sales tool.
12. **THEN:** Separating from a position the individual dragged along the design of the resume and marketing material which was based on the success in the former position. The position may have been obsolete when separating.
NOW: The position left behind has gone away permanently and a new position must be found based on new skill sets, abilities, or competencies rather than specific work experience. Do not think that the old position can be replaced.

13. **THEN:** Presentation of the resume on fancy paper or PDF.
NOW: No PDF or fancy layouts. Word software is essential. Other software will not be compatible with the ATS review systems and the information will be discarded. The applicant is left wondering why they never hear back from the application.
14. **THEN:** Ethics validated with references and here-say comments.
NOW: Although references are still important, ethical validation comes with Credit reports Facebook commentary, and other multimedia and digital footprint. Do you do what you say you will do like pay back debt obligations?
15. **THEN:** Go to meetings, exchange business cards and perhaps a resume to establish network contacts.
NOW: Relationship development that may lead to exchange of information starts with getting to know the individual as a person. The relationship should develop to a level that the person will recommend you for openings they uncover.

Criteria for Understanding Employment Needs

In addition to the obvious factors, such as compensation and location, here are nine key potential criteria for better understanding your employment needs:

- My primary responsibilities should be...
- The organization's strengths/market position should be...
- My bosses' style and approach would ideally be...
- The culture of this organization should be described as...
- The organization's core values should be...
- Learning opportunities should include...
- The opportunity for me to make an impact/difference should be...
- The type of people I will work with should include...
- The job positions me well for...

Source: Broscio, Michael A., CMF, "Push vs. Pull," Healthcare Executive, March/April 2012.

ACHE Career Resources

- ACHE Job Center – www.ache.org/career.cfm – search or post jobs
- To develop a more strategic career plan, check out ACHE's Career Resource Center with *CareerEDGE* at www.ache.org/newclub/career/career_development_new.cfm

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TOPICS IN LEADERSHIP

The Psychology of Success: Leadership Lessons From an Olympic Swimmer

What could Olympic medalist Katie Ledecky, who holds five gold medals in swimming and shattered the world record in the 800-meter freestyle at the 2016 Olympics, teach healthcare leaders about leadership? Four lessons stand out.

- **Do the work.** Ledecky's day starts at 4:05 a.m. with a breakfast of two slices of toast with peanut butter and a banana or apple before swimming from 5-6:30 a.m. and again from 3:30-6 p.m., not counting one hour of dry-land training three days a week. She's spent thousands of hours spent honing her skills—and she's 19. More than that: She wants to do the work required to succeed on a global level.
- **Skip the back-up plan.** When your primary goal is the only goal in sight, you'll work harder to achieve it.
- **Don't follow the crowd.** Ledecky trains at near-race pace every day, twice a day, with a stroke rate that is significantly higher than the rate of most swimmers.
- **Set big goals.** Ledecky doesn't just want to win each race. She wants to set world records—and she has, multiple times.
- **Never stop setting goals.** After Ledecky first broke the world record in 800-meter freestyle, she and her coach set a goal to do it again, this time with a winning time under 8 minutes, 5 seconds. Ledecky's winning time in the 2016 Olympics: 8 minutes, 4.79 seconds.

—Adapted from “6 Ways Katie Ledecky Thinks Differently: The Psychology of Success,” *inc.com*, Aug. 11, 2016.

5 Things Productive People Do Differently

How do some of the world's greatest talents manage their time? Forbes gleaned these tips from several masters of the art of business.

- **They don't use to-do lists.** Instead, highly productive people schedule tasks on their calendar—and they stick to that calendar down to the minute.
- **They carry a notebook.** Richard Branson of Virgin fame doesn't go anywhere without a notebook, and neither did Greek shipping magnate Aristotle Onassis. Carrying a notebook enables you to write down that million-dollar idea whenever the idea presents itself—and before you have a chance to forget.
- **They focus on minutes, not hours.** As Olympic gymnast Shannon Miller once told Forbes author Kevin Kruse, “To this day, I keep a schedule that is almost minute by minute.” Successful people know the value of their time and hold themselves accountable for time spent.
- **They concentrate on just one thing at a time.** Highly successful people like Tom Ziglar, CEO of Ziglar Inc., invest the first hour or two of their day working on their No. 1 business priority.
- **They make it home for dinner.** Highly successful people know there will always be reasons to stay longer at work, but they make time for the things they value outside of work, too, from family to friends to exercise to favorite hobbies.

—Adapted from “15 Surprising Things Productive People Do Differently” by Kevin Kruse, *Forbes.com*, Jan. 20, 2016.

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HEALTHCARE INDUSTRY EXTRACTS

The Dealmaker and The Regulator: The State of Healthcare in Georgia

- The Georgia Association of Healthcare Executives (GAHE) recently sponsored a closed-door, interactive session for C-Level Executives throughout Georgia. We heard different perspectives regarding the state of healthcare from two insiders: Mr. Will Melson, President of the Broadwell Group (the “Dealmaker”) and Harold Kirtz, Senior Litigator for the Federal Trade Commission (the “Regulator”). Both presentations shed light on the multi-dimensional effects of ongoing M&A activity, as well as regulatory requirements and concerns. Read insights from each of these speakers
The Dealmaker’s perspective : www.dtspade.com/the-dealmaker-the-state-of-healthcare-in-georgia/
- The Regulator’s perspective: www.dtspade.com/the-regulator-the-state-of-healthcare-in-georgia/

The Spade Report, by DTSpade Medical Real Estate www.dtspade.com

8 Ways Healthcare Organizations Can Reduce Cyber Risk

By Barry S. Herrin, FACHE

No matter the technology used in the healthcare industry today—e-signature Healthcare cyber risksoftware, EHR platforms, wearable devices, smartphones, tablets, or other software or hardware—providers can either work to mitigate risk or watch the organization spiral into potentially uncontrollable vulnerability. Today’s electronic environment leaves little room for laissez-faire security efforts if a healthcare provider wants to remain safe from attack.

www.signix.com/digital-signatures-for-healthcare/8-ways-healthcare-organizations-can-reduce-cyber-risk

Georgia Chamber Releases Plans For Expanding Health Care Access

By Mitchell Eloy

A health care task force created by the Georgia Chamber of Commerce released its much-anticipated report on ways the state could expand medical coverage to the uninsured on August 31st, outlining three paths for lawmakers to consider this coming legislative session.

<http://news.wabe.org/post/ga-chamber-releases-plans-expanding-health-care-access>

Gaps in Care

By Anna Bentley

How Georgia’s schools and the legislature are addressing the state’s looming healthcare workforce shortage

www.georgiatrend.com/May-2016/Gaps-in-Care/

AHRQ Stats: Potentially Avoidable Hospitalizations

By Georgia Healthcare Association

The Agency for Healthcare Research and Quality (AHRQ) reports that, from 2005 to 2013, the rate of potentially avoidable hospitalizations for all conditions, excluding chronic obstructive pulmonary disease, fell about 23 percent.

www.ahrq.gov/research/findings/nhqrdr/chartbooks/carecoordination/index.html?utm_source=AHRQ&utm_medium=ENSTAT1&utm_term=&utm_content=25&utm_campaign=AHRQ_CCCB_2016

AMA unveils Medicare Payment/MA CRA web page

By American Medical Association

The American Medical Association has unveiled a ‘Medicare Payment Reform/MACRA’ web page, which features a physician/medical practice preparation checklist, information on AMA’s advocacy efforts to improve the rule, and details on the new merit-based incentive payment system (MIPS) and alternative payment models (APMs).

www.ama-assn.org/ama/pub/advocacy/topics/medicare-physician-payment-reform.page

The 9 best hospitals in Georgia

By Fiza Pirani

Four Atlanta hospitals and one Marietta facility were named among the top in Georgia, according to the latest ranking from U.S. News and World Report.

www.ajc.com/news/news/9-best-hospitals-georgia-according-one-ranking/nsCCL/

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ACHE NATIONAL NEWS

Gain Strategies for Achieving Health Equity During Fund Program

Addressing disparities in care and improving health equity requires leadership, vision, teamwork and an understanding of the problem and its potential solutions. ACHE’s Fund for Innovation in Healthcare Leadership will host a special program this November that will explore proven tactics for advancing healthcare equity. “Achieving Care Equity: The Ethical Imperative” will be held Fri., Nov. 11, in Atlanta following ACHE’s Atlanta Cluster. This half-day seminar will provide proven strategies for building a sustainable and meaningful equity-of-care strategy based on data that reflects the community and marketplace. Senior leaders of progressive

organizations will share their journey toward eliminating racial and ethnic healthcare disparities and achieving care equity.

During this seminar, participants will identify the challenges posed by personal bias and assumptions; examine a community-based approach to health equity that aligns healthcare organizations, payers and community entities; understand leaders' roles in ensuring the provision of culturally sound care and making cultural competency an organizational priority. Learn more and register at www.ache.org/AchievingCareEquity/

Are You Due to Recertify Your FACHE Credential in 2016?

Demonstrate your continued dedication and commitment to lifelong learning by recertifying your FACHE® credential. Visit my.ache.org to learn when you are due to recertify. If you are required to recertify in 2016, you will see a link to your personalized online recertification application. Please submit this application no later than Dec. 31; include your Qualified Education credits and your community/civic and healthcare activities. For more information, please visit www.ache.org/Recertify. You may also contact the ACHE Customer Service Center at (312) 424-9400 Monday–Friday 8 a.m.–5 p.m. Central Time or email contact@ache.org.

Save Time and Money with ACHE Self-Study Program

Need to earn ACHE Qualified Education credits? Earn six hours by completing a course through ACHE's Self-Study Program. Self-Study courses are portable and ready for you anytime—at home, in the office, and more. Topics include finance, human resources, leadership and management. Take advantage of ACHE's special offer: purchase one self-study course and receive a second course at 50 percent off. To review a list of available courses and corresponding Health Administration Press books and to place an order, visit www.ache.org/SelfStudy.

ACHE Physician Leader resources

ACHE also offers curated content for physician leaders from our Elevating Leadership newsletter and Healthcare Executive magazine. View select physician leader articles under the "Additional Physician Resources" section of the physician leader website, www.ache.org/physicianleader.

Offering a Postgraduate Fellowship? ACHE Can Help

ACHE would like to know if your organization is offering a postgraduate fellowship for the upcoming year. If so, we encourage you to add it to the complementary Directory of Postgraduate Administrative Fellowships at www.ache.org/Postgrad.

As a healthcare leader, you know how crucial it is to attract and develop highly qualified professionals in your organization. Gain exposure and start attracting top-notch applicants by posting your organization's program on ACHE's Directory. You may add a new listing or update a previous one at any time by completing the Online Listing Form at www.ache.org/postgrad/listing_2011.cfm.

GAHE NEWSLETTER SUBMISSION GUIDELINES and CALL FOR CONTENT

Audience and Focus

The GAHE newsletter is published quarterly, with each issue focusing on topics relevant to both professional development and healthcare administration. The newsletter is distributed electronically to all GAHE chapter members. Previous issues of the newsletter can be found on the GAHE website. Contributions to the newsletter may include: Articles on healthcare laws, regulations, finance, leadership, innovation, professional development, or healthcare administration; Member and GAHE event news; GAHE members who have moved to a new position, received a promotion, or other professional accomplishment ; Photographs from GAHE events.

Content Submission Requirements/ Deadlines

Content submissions to the GAHE newsletter are for reviewed for appropriateness by the Communications Committee. Please send your contributions, including articles, news, member accomplishments and photos to kmanno AT gahe.org, no later than close of business by the 10th day of the last month of each quarter (March, June, September, December). Approved submissions made after this date will be placed into the next newsletter.

Please note that GAHE reserves the right to reject submissions that are not consistent with the goals and purposes of the organization. Articles that endorse or appear to endorse specific products, businesses, services, and are self-promotional or advertorial will not be accepted. Subjects that are appropriate deal with healthcare industry news (national and local), career management, leadership, mentoring, diversity and other professional topics. If you are not sure, please ask.

Article Submission Instructions

Articles submitted for the newsletter must be relevant to professional development or healthcare administration. Please format content in a Microsoft Word document, left justified, and be 1-2 pages in length. The content of the article must include: title; name of the author; the source the article was obtained from; full URL that links to the article (if applicable). Please submit photographs as email attachments in JPG file format. Please do not embed photographs in your article text. Provide name and affiliation of any person shown in photographs along with a brief caption. When using a reprint article, please provide credit to the author and/or obtain permission to use the article before submission.

Article Editing

GAHE reserves the right to edit, change or omit certain content (including photographs) because of length, style, relevance, or simply due to lack of space as deemed appropriate.