

Georgia Association of Healthcare Executives

An Independent Chapter of



American College of
Healthcare Executives
for leaders who care™



Newsletter – Summer 2017

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PRESIDENT'S LETTER

By Mary Germann, MN, FACHE, SFHM

One thing we can always count on in life is change. The world of healthcare is no different. Healthcare change is constant and we must continually strive to adapt to the new and challenging situations we face. We have a choice, the parade is moving and we can lead it or follow it.



GAHE also finds itself changing and growing to provide the membership the tools it needs to successfully lead the new future of healthcare. This year the board has chosen to get out in front of the change and create an organization that reaches out to our diverse membership. The adage “one size fits all” is no longer relevant to support our cause so we must find ways to bring value and communicate that value to students, early-mid careerists, senior executives and physicians.

Communication is critical in reaching out to our membership so they can fully understand the value of GAHE. We face several communication challenges. As a large chapter covering 254 counties we need multiple and different communication vehicles for our large and diverse membership population. Our call to action is all about effective communication and identifying and utilizing strategies that will drive engagement. A select team is working behind the scenes on branding, website redesign, communication media and technology strategies to reach our membership. I am excited to say that we are poised to launch new communication tools this July.

Concurrently, the board is developing, enhancing and implementing strategies to bring value to our membership. These strategies focus on providing opportunities for networking, learning, advancing and leading to help each level of membership develop critical leadership skills, allowing them to stand out as dynamic Georgia Healthcare leaders.

We are also implementing additional networking and learning opportunities targeted **for Senior Executives** only. This will provide an opportunity for Senior Leaders to consider, not only their own differentiated knowledge transfer needs, but also consider future leaders’ needs in the areas of mentorship, coaching and supporting their staff in leadership development and certification and promoting participation in GAHE.

Physicians have an equally compelling need to pursue skill sets which can best augment their leadership skills. As we contemplate on how we can best align with our physician colleagues we must continue to reach out, network and consider reciprocal knowledge exchange with them. GAHE’s Physician Executive Group (PEG) is a national leader in this strategy.

As our **early-mid careerists** continue to develop their leadership skills, GAHE is here to provide them valuable resources to become more effective professionals, including assistance in earning FACHE credential. Our events will provide them the opportunity to attend cost effective, close to home educational and networking

sessions. They will also have the opportunity to meet and develop relationships with peers and seasoned executives.

Last but certainly not least **are our students**, the healthcare leaders of our future. GAHE is here for you to network and learn from the best. We are passionate about our resolve to help you grow into a professional dynamic healthcare leader. Opportunities include discounted attendance fees, career counseling and expanding your network.

Membership involvement will be a key factor in our success and we need each of you to assist us in growing the membership. Reach out—I am confident that each of you, our members, can “bring along” someone who would benefit from the value GAHE brings to your career.

So as our healthcare landscape changes we too must change. We must not simply watch and adapt, we must be actively engaged and lead the change.

Thank you for allowing me to serve as your President and as always feel free to reach out directly to me or any of our board members. Have a great summer!!

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MEMBER NEWS

Seen at 2017 ACHE Congress

At the Congress reception for the Fund for Healthcare Leadership are: (second from right) GAHE and PEG member **Lily Henson, MD, FACHE** (Thomas C. Dolan Executive Diversity Program Class of 2016), with (L-R) Larry Chadwick (Class of 2015), Thomas Dolan, ACHE President and CEO 1991-2013, and Deborah Bowen, ACHE President and CEO.



PEG recognized at national level

Excerpt from ACHE Chapter Leaders Update, May 2017:

People say all politics is local. Similarly, all networking is local, and this is a major motivating factor behind the Georgia Association of Healthcare Executives’ decision to form a Physician Executive Group. GAHE is home to more than 1,600 members, of whom more than 80 are physicians. The officers and board of GAHE approved the formation of the Physicians Executive Group (PEG) in 2016 to foster networking and other activities among these members. The PEG is developing its mission from a short online survey that provided a number of suggested values for the group and through solicited creative suggestions. Ideas presented in the survey include:

- Networking opportunities with other physician leaders and non-physician healthcare leaders
- Leadership education/development on physician issues or more general healthcare topics
- Technical education (e.g., finance)
- Achievement of board certification in healthcare management as an ACHE Fellow
- Mentoring opportunities (as mentor or mentee)

- Sharing contact information with other PEG members
- Interest in a special PEG networking session prior to GAHE meetings

John W. Henson, MD, FACHE, a GAHE board member, said contacting and surveying the physician executives in the chapter was the first step to take after creating the group. After the survey and idea sharing, the group organized programs that included education but offered ample time and opportunity to network. The hope is this group becomes a home for physician executives. The committee’s goal in 2017 is to increase the number of physician executives in the chapter to 100. To accomplish this goal, the committee is reaching out personally to more than 400 CMOs throughout Georgia to join ACHE and participate in the chapter’s programs. Henson believes other ACHE chapters could easily adopt a PEG.

Chapter President **Mary A. Germann, RN, FACHE**, said, “We at GAHE have recognized the importance of physician alignment to our healthcare organizations and to the future success of healthcare delivery. Our goal is to be the leading example of what successful alignment looks like through the development of support programs specifically for physician leaders. We see our program only as continuing to grow and a great opportunity for us to continue to foster collaboration with our physician partners.”

-> **GAHE was also featured by ACHE President Deborah Bowen, FACHE** in her “Perspectives” column of the **May/June 2017 issue of Healthcare Executive** for the work of our Physician Executives Group (PEG).

Photo – GAHE Vice President Tim Slocum, FACHE, President Mary Germann, FACHE, and Regent Larry Tyler, FACHE with our plaque for ACHE Award of Sustained Chapter Performance 2017. (Picture by Communications Chair Alexandra Pieper-Jones)



GAHE Members publish in Frontiers

Congratulations to GAHE members **Candice L. Saunders, FACHE** and **John A. Brennan, FACHE**, co-authors of the article “Achieving High Reliability with People, Processes, and Technology” which was published in the latest edition of *Frontiers of Health Services Management* journal (Vol. 33 No. 4 Summer 2017).

Becoming a Fellow of ACHE (FACHE)

Save \$200 – BOG Exam Fee waiver EXTENDED THROUGH JULY 31

Now is the perfect time to apply for Fellow status in ACHE. When you submit your completed application by JULY 31, 2017, along with the \$250 application fee and all supporting documents, ACHE will waive the \$200 fee for the Board of Governors Exam if you take the test within six months after your application has been approved. For information on the requirements and procedure for becoming an ACHE Fellow and this fee waiver promotion, go to ache.org/FACHE.

Fellow Advancement information webinars — ACHE offers informational webinars once per quarter which provide a general overview of the advancement to Fellow process, including the Board of Governors

Examination and allow participants to ask questions about the advancement process. All sessions are held 1:00–2:00 p.m. Central time. For more information, contact ACHE’s Customer Service Center at (312) 424-9400. Upcoming sessions this year are September 14 and December 14.

GAHE offers BOG Exam Tutorials – GAHE is offering two intensive workshops this year to help you prepare for the Board of Governor’s Exam: July 14-15 in Atlanta and September 15-16 in Macon. See our Events page for details and registration.

MEMBERSHIP REPORT *(Second quarter 2017, as of publication date 6/30/17)*

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:

David T. Early, FACHE

Lauren E. Ford, FACHE

Maj Derek L. Felder, FACHE

Jean C. O’Connor, JD, PhD, FACHE

Maj Mark C. Jones, FACHE

We also congratulate **Fellow Designate members Marie A. Dominguez, MD and James D. Forstner** 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**:

Stephan Davis, DNP, FACHE, Sharon E. Mimbs-Bromley, FACHE, Victoria L. Humphrey, RN, FACHE, Rosalyn R. McLeod, FACHE, Kermit S. Randa, FACHE, Terry L. Thompson, FACHE, Craig J. Tindall, FACHE, Jeani Van Someren, FACHE

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

Dara Spector, Jaeda Bennett, Cherrie Carney, Rebecca Cowens-Alvarado, Joe Digiugno, Jessica Henderson, Winston Liburd, Brian McCarron, Karen McColl, MD, Sean E. McLoughlin, COL Lisa Miller, Scott Murray, Natalie Phillips, Stanley Russell, James H. Shepherd III, Karl J. Simon, Tadesse S. St George, Aaron J. Suggs, James Thomas, PhD, MSG Lennox A. Wildman Sr., Chad Anderson, Jodi Ashman, Jamie Baker, SGT Pamela D. Beasley, Charles B. Cook, Karen A. Daniels, Kevin Dotson, Angela K. Hullander, Sarah H. James, Jessica Johnson, Joan Krall, Felicia LeRay, JD, RN, Andrea G. Markum, Shari McDowell, Kara L. Miller, Patricia Moorhead, Erin Roberts, RN, Alvin Rosado, Martin Slack, CPA, Ebony A. Smalls, Raymond L. Smith Jr., Devin Sperle, Paul Barkley Sr., Jennifer Becker, Lisa C. Dickerson, RN, Craig Furr, Ann Preston Z. Hendrickson, Ryan Korchinski, Leta Langfeldt, Lori McGinley, PharmD, Katie M. Mercer, DrPH, Charles Milton, Capt Winnie A. Odhiambo, Ben Seals, Lt Col Mable Smith, JD, PhD, Vincent Williams

→ **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. Photos are encouraged but not required.*

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UPCOMING EVENTS - Atlanta, Athens, Macon and more!

Get the most current details and registration for all GAHE programs on the [“Events” page](#) (list here accurate as of publication date 6/30/2017)

- **BOG Exam Tutorial Workshops** – Registration cost rebated to members who pass the Exam after taking this tutorial!
 - Friday and Saturday, **July 14-15** in Alpharetta (Atlanta area)
 - Friday and Saturday, **September 15-16** in Macon
- **Tuesday, July 18 – Meeting AT 103 WEST** in Atlanta – Topic: “Leading Exceptionally in the Era of Consolidation” featuring Kevin Lofton, FACHE – CEO, Catholic Health Initiatives
SPECIAL EVENT SPONSOR: ApolloMD
- **August 9-11 – UAB 37th National Symposium for Healthcare Executives** at Hilton Sandestin Beach Golf Resort & Spa, Florida. GAHE is a co-sponsor of this event.
- **Friday, August 11 – Lunch with the CEO** featuring Don McKenna, FACHE at St. Mary’s Health Care System, Athens Special opportunity reserved for early to mid careerist Members!
- **Thursday, August 17 Meeting- “Bundled Payments”** – lead by Kevin Lieb of Vizient, as featured speaker, plus a panel discussion by topic experts
- **Thursday, September 21 Meeting – “Pandemic Influenza”**
- **Wed., October 25 – Senior Executive Dinner with Chuck Stokes, FACHE** – EVP and COO of Memorial Hermann Health System in Houston, and 2017 ACHE Chairman. Location: at Dunwoody Country Club, By Invitation Only
- **Thursday, October 26 Meeting featuring Chuck Stokes, FACHE** – EVP and COO of Memorial Hermann Health System in Houston, and 2017 ACHE Chairman
- **Thursday, November 16 – GAHE Annual Meeting, “Diversity in Leadership”**. At this meeting we will also elect the GAHE 2018 Officers and Board.
- **Monday, December 4 – GAHE Annual Mini-Cluster, 6 CEUs, in Macon**

-> Register for all events at gahe.ache.org/events/

RECENT EVENTS RECAP

Patient Experience program taken state-wide

Report by GAHE Communications Committee vice chair Natasha Martinez, MBA and others

One of the most requested program topics which GAHE has addressed this year is The Patient Experience — how to improve satisfaction and engage patients in a way that goes beyond the surveys. Select panels of speakers have brought their expertise to this issue in 3 Georgia locations this year (Atlanta, Augusta and Macon). Five short videos of true-life stories by patients in Georgia were created to stimulate the discussions with great feedback from the audiences. This topic will also be presented at the UAB National Symposium for Healthcare Executives on August 9-11 at the Hilton Sandestin in Florida. Many thanks to all our volunteer panelists who have graciously contributed to GAHE’s efforts to bring its programming state-wide.

OUR PANELISTS

On February 16 in Atlanta:

Brian Unell, FACHE,
Colleen Thornburgh, Kevin Rhodeback RN, Jeremy
Nelson MD, Marj Bogaert RN



On May 16 in Macon:

Kirsten Jones, Cynthia
Busbee, LaDawn Bradley,
Patti Jones, Leah Everson



Photos by Alexandra Pieper-Jones, GAHE Communications Committee Chair

Regent's Newsletter

What it's Like to be Regent and Why You Might Consider the Role

*By J. Larry Tyler, FACHE, FHFMA, CMPE
Regent for Georgia / Chairman and CEO, Practical Governance
Group tyler@pgghealthcare.com*

Just for the record, this isn't a swan song or final word rendered in anticipation of retirement or death. There's a legend that a swan would sing beautifully just before its death, having been silent most of its life. I've never been silent during my life, nor am I dying or retiring. However, my term as Regent of ACHE's Georgia chapter comes to a close March 2018.



This fall we'll begin the process of electing a new Regent for Georgia. Deadline for the letter of intent to run for the office is Aug. 25, 2017, and the ACHE Board of Governors approves new Regents in November. Since August quickly approaches (and no doubt some of you wonder what I do with my time), here's an overview of what it's like to be Regent. Eventually I'll write a swan song, just not today.

– **Time and Expenses** – The job of a Regent is a part-time, unpaid position that lasts three years. If you'd like the post, you must be able to devote the time and have personal or employer-based monetary resources. Regents receive an allocation check that helps with expenses, but it doesn't cover all of the expenses you incur to do the job right. It helps to have an employer who is supportive of ACHE and affords you the time and money to engage in ACHE's activities; I'm thankful for my previous employers, Tyler & Company and Jackson Healthcare.

The bulk of expenses comes from attending meetings. For example, there are two meetings in Chicago every year. One is a Regent's meeting that takes place the weekend before Congress. Then, there's a meeting in the fall associated with the Chapter Leaders Conference. There also are chapter meetings held in various locations around the state. It's virtually impossible to attend every state meeting, but the Regent is expected to "fly the flag" as much as possible.

– **GAHE's Board of Officers** – By virtue of the office, the Regent is a member of the GAHE Board. This has been a great experience, as in my case, the board and chapter presidents regard me as a senior member. They afford me extra respect and opportunities for input. (Figure it's because of my experience, not my mature age or senility.) I truly believe our chapter has been graced with effective and energetic leadership, resulting in award-winning performance.

– **Meetings** – In addition to those mentioned previously, we hold monthly board meetings. The Regent sits on the Executive Committee, which meets periodically depending on the president's needs. The Executive Committee also doubles as the chapter's Nominating Committee. Some board meetings are face-to-face, but most are teleconferences that last about an hour. We also hold meetings twice a year with the Executive Committee of Healthcare Financial Management Association due to our common issues and several joint initiatives. We informally call this "The Meeting of the Minds."

– **Correspondence** – The Regent receives letters to send to new Fellows, recredentialing Fellows and new members. GAHE is a larger chapter, and I receive about 30 to 50 letters every month. It takes me a little while to go through these, as I try to write a personal note to each person I know. The Regent also receives other correspondence from ACHE. Some of it requires action and others can be read and discarded. For the conferences in Chicago, prepare to be overwhelmed with information; the number of reports and charts is mind-boggling. You can download them to your computer or tablet, but for me, it's still hard to keep up.

– **Liaison** – As Regent, you are the primary liaison with your chapter and headquarters in Chicago. For Georgia, your primary contact is Terra Levin, FACHE, the Senior Regional Director who oversees District 2. If you have a question or need help, she's within an arm's reach and is extremely knowledgeable and responsive. If she's stumped, Terra finds someone with answers. My advantage is that I know and knew many people at headquarters, including the president. Nevertheless, turnover and retirement bring new faces to the forefront, and I find myself calling Terra about one thing or another.

Sometimes a problem arises between the chapter and headquarters. You will be tasked to address the issue and get resolution, so diplomatic skills are needed occasionally. I don't always get my way, but they are ever gracious in my defeat.

– **Advisors and Awards** – A Regent can name his/her Regent's Advisory Council (RAC). I've held the same council members every year, with the exception of one or two new executives. My RAC includes our current chapter president, as well as our two immediate past presidents. I've also served on several RACs. I ask my council to help decide winners for Regent's Awards, some of which are based on ACHE's criteria. At our annual GAHE meeting, we usually honor one senior leader and one "up and comer." However, a Regent can create awards for any purpose.

My RAC also advises on issues I face and how GAHE is doing. We conduct quarterly conference calls to accomplish our business. Most people are willing to serve, and they receive a year of RAC service for the purpose of the ACHE Recognition Program.

In 2016, we created the Senior Executive Advisory Team (SEAT), which I chair. This group advises the chapter on how to attract more senior executives to our meetings, as it's one of GAHE's strategic initiatives. I don't see this effort going away, so future Regents likely should establish their own group or incorporate SEAT members. GAHE has a committee devoted to this effort, and the committee chair sits in on SEAT meetings. No pun intended.

– **University Connections** – The Regent also is responsible for speaking once a year to each university within ACHE's Higher Education Network (HEN). In Georgia, we have Armstrong State University, Georgia Southern University, Georgia State University, University of Georgia and Valdosta State University. It takes a little coordination to accomplish this task, but ACHE believes Regents should introduce students to ACHE to encourage lifelong learners. Students also enjoy benefits not available to other member types.

– **Expanded Network** – Being Regent gives you opportunities to meet Regents from other states, as well as ACHE's Board of Governors and GAHE's Board. You'll also meet ACHE's senior staff members, as well as many junior ones. These new acquaintances establish friendships that build relationships, which is key to a successful career in healthcare.

– **Regent's Message** – This article is published quarterly in GAHE's newsletter. Chicago does a great job reminding Regents of deadlines. Some Regents recast information from Chicago and their local chapter. Others compose their articles from scratch.

– **Perks** – As you can see, being Regent is a lot of work. But there are tremendous rewards. For example, I help people with their professional development due to my background in executive search. Beyond these psychic and emotional rewards, Regents enjoy complimentary registration to Congress and complimentary registration to one cluster per year.

– **Criteria** – To be a Regent, you must be a Fellow in good standing and hold a position in healthcare management. If you qualify and are interested, complete and return the [Letter of Intent form](#) found on ACHE's website by Aug. 25, 2017. If you need further insight into the job, please call me. A special thanks to my predecessor, Glenn Pearson, FACHE, who provided a great orientation and explained everything when I became Regent. I stand ready to do that for our next Regent.

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 our local chapter, Georgia Association of Healthcare Executives (GAHE); and promoting the benefits of earning a Fellowship to CEOs who are not yet credentialed.

CAREER CORNER

Let's Celebrate the Good Things!

*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*

So many good things happen in healthcare every day. Yet, we generally hear only about the problems, adverse events, and less than ethical behavior of some healthcare executives. Bad news sells the media outlets.

Witness the many examples of CDC in Atlanta, working with healthcare providers, to coordinate and cooperate world-wide to identify, track, contain, and offer a public awareness position for the various disease outbreaks. Further, efforts to perhaps develop tests for the diseases have traveled at “warp” speed. Leadership was needed to cross the worldwide political and geographic boundaries to move at an astounding pace to limit the very serious disease. Medical personnel and researchers contributed to the effort. That could never have happened in the past. Good things are happening through the leaders in such situations.

There are many advances coming from the armed conflicts in the Middle East which are translating into improvements in trauma care. Coupled with the rapid transportation system, this gives patients an extra edge for survival.

Leaders are needed more than ever in today’s health care systems. We hear of the strategies to get rid of the failing current system and must start a new system with enhanced features, while learning from the old system. In most every system, there are many good features to retain that we tend to forget that the obstacles we face today are the opportunities of tomorrow.

At the ACHE Congress in March, the energy that was apparent with many of the young and mid-careerist was electrifying. Highly visible was the death rate from hospital care and the focus of “doing no harm” for the patients. There is much to learn and much to target for improvements. The senior executives who claim, “it is not fun anymore” should consider all the positives, or get out into a new job they find fun. Leave the challenges to others who will find the fun in giving to the community and the patients we serve. There is a certain amount of joy to installing new programs and services which make a difference in the health and well-being of patients.

There are givers and takers in this world. Do not be a prisoner of the past but instead, look to the future. Give more effort to the leadership needed to make a difference.

There are always choices. We live with whatever choices we select. Yes, you should have changed jobs some years ago but did not. Yes, that new program would really make a difference to the patients but the Board said no. So what is the next choice? Maintaining a great attitude and perseverance may make all the difference for your personal career and the organizations you lead. Gripping, moaning, and whining are not management principles. Execution to achieve results to make things better for the patients and the community is essential. There are so many achievements to celebrate and more to come.

Today’s choices are your credentials for the future. The good things you accomplish today, the character building decisions of honesty and integrity, the giving of oneself to help others will all add up to the personal definition of your leadership style. The reward comes from employees, peers, colleagues, and the community who say “you really made a difference and did it with character.” Let’s celebrate the good things!

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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HEALTHCARE INDUSTRY EXTRACTS

Compiled by Carrie Montagna, GAHE Communications Committee member

SAFETY

Start Making Safety Gains Now With the New ACHE/NPSF Resource Guide

Author: ACHE

BLURB: ACHE and the National Patient Safety Foundation's Lucian Leape Institute have released *Leading a Culture of Safety: A Blueprint for Success*, a new resource to guide healthcare leaders in creating a culture of safety for their organizations.

Read full article: <http://www.npsf.org/page/cultureofsafety>

CAREER

Hospitals nationwide face unprecedented turnover

Author: Ilene MacDonald

BLURB: Hospitals face unprecedented turnover, particularly among clinical administrators, physicians, nurses and members of the C-suite, according to a new report.

Read full article: <http://www.fiercehealthcare.com/healthcare/report-hospitals-nationwide-face-unprecedented-turnover>

CAREER

'Soft skills' critical for new generation of facilities management leaders

Author: [Beth Burmahl](#)

BLURB: While the career path for facilities managers has never been clear, those who entered the field decades ago most likely shared some similar credentials. Many learned a trade and entered health care right after graduating or after working in private industry or the military. Promotions usually came after years of service, and many were automatic. Many lacked degrees or business training. The new generation of facilities managers still needs the technical skills, but likely will also need a degree as well as a full roster of soft skills that are harder to quantify but are incredibly important to career advancement.

Read full article: <http://www.hfmmagazine.com/articles/2851-soft-skills-critical-for-new-generation-of-leaders>

SAFETY

Leapfrog Group Releases 2017 Hospital Grades

Author: HealthLeaders Media Staff

BLURB: [The Leapfrog Group](#) released its latest "safety grades" in mid-April for the 2,639 hospitals participating in the group's annual survey. Of that group, 31% (823) earned an "A" and 27% (706) earned a "B," according to the nonprofit, which advocates for quality and safety in healthcare.

Read full article: <https://www.scribd.com/document/344997315/Spring-2017-Leapfrog-Hospital-Safety-Grade-State-Rankings>

LEADERSHIP

10 Common Themes in Health Care Leaders' Strategies

Author: [Ian Morrison Ph.D.](#)

BLURB: While America's health care policy is still uncertain, the strategic direction of most hospitals remains fundamentally unchanged. Nevertheless, there remain many uncertainties, not only about the future of Medicaid and coverage, but also about the commitment to payment reform like the Medicare Access and CHIP Reauthorization Act and bundled payment initiatives. This uncertainty has caused leaders to evaluate their overall commitment to risk-bearing strategies and the pace of change for payment and delivery reform.

Read full article: <http://www.hhnmag.com/articles/8256-common-themes-in-health-care-leaders-strategies>

PATIENT EXPERIENCE

Case Study: Using a "Nursing Bundle" to Achieve Consistent Patient Experiences Across a Multi-

Hospital System

Authors: Susan M. Robel, RN, BSN, MHA, NEA-BC – Executive Vice President, System Chief Nursing and Patient Experience Officer, Geisinger Health System and Denise A. Venditti, DNP, MHA, RN, NEA-BC, FACHE – Vice President, Patient Experience, Geisinger Health

BLURB: Geisinger Health System has evolved and grown in terms of diverse cultures, demography, and size over the past 4 years. We addressed inconsistent patient experience by creating a nursing bundle that helped make patients' experiences more consistent, and more consistently excellent, improving overall patient satisfaction and Geisinger's performance on standard assessments of patient satisfaction.

Read full article: <http://catalyst.nejm.org/nursing-bundle-consistent-patient-experience/>

LEADERSHIP – PHYSICIAN

A Parallel Pathway to Successful Transitions

Author: John W. Henson, MD, FACHE

BLURB: In the May/June "Physician Leadership" column, author and GAHE Member John W. Henson, MD, FACHE, discusses how executive colleagues can help new physician leaders succeed.

READ FULL ARTICLE: https://www.nxtbook.com/nxtbooks/ache/he_20170506/index.php?startid=68#/70

FULL ARTICLE: May/June issue of *ACHE Healthcare Executive* magazine

LEADERSHIP – PHYSICIAN

Why it takes a physician executive to ensure accurate risk adjustment

Authors: Brad Howard, MD, MHA, and John Kontor, MD

BLURB: Accurate risk adjustment influences your reimbursement under Medicare Advantage, Medicare Advanced Payment Models, and even some commercial contracts. The linchpin of successful risk adjustment is capturing patient complexity through adequately documenting patients' Hierarchical Condition Category (HCC) codes. We recently overviewed [risk-adjustment concepts for Medicare ACOs](#) in a primer, but the most important thing for ambulatory and population health leaders to know is that the responsibility for risk adjustment sits squarely on top of their physicians' shoulders. It takes physician leadership to ensure clinical benefits remain the focus of risk adjustment

READ FULL ARTICLE: <https://www.advisory.com/research/medical-group-strategy-council/practice-notes/2017/05/physician-executive-risk-adjustment>

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TOPICS IN LEADERSHIP

Tapping Community Physicians for Innovation Ideas

Community physicians who work outside major medical centers represent a wealth of expertise that could guide innovation efforts, if mobilized, according to Adam O. Kadlec, MD, a board-certified urologist at Western Michigan Urological Associates. Kadlec provided tips to help inspire community physicians to get more involved in a recent blog for *NEJM Catalyst*.

Learn the process. "Many physicians are simply unaware that innovation is a process and that entrepreneurship is a discipline ... Teaching community clinicians that there is a process—and that they can play a part—is the first step toward engagement," wrote Kadlec.

Look for meaningful partnerships. Many major healthcare and academic medical centers have launched innovation hubs in recent years. Community clinicians should be intentional about finding opportunities for innovation, and that may mean creating partnerships where innovation is already underway.

Network with like-minded physicians. Physicians who don't have access to major medical innovation hubs can check out virtual opportunities, like online matching programs, and conferences, such as Medicine X and TEDMED, to network with other passionate clinicians.

—Adapted from “[Engaging Community Physicians in Innovation](#),” by Adam O. Kadlec, MD, *NEJM Catalyst*, April 26, 2017.

6 Tips for Working With a Poor Team Player

Working with someone who isn't a team player is not just frustrating, it can also negatively affect an entire group's performance, according to a recent *Harvard Business Review* article. Susan David, founder of the Harvard/McLean Institute of Coaching, and Allan Cohen, a professor of management at Babson College, provided the following strategies for working with someone who isn't a team player.

1. **Avoid making assumptions.** It may seem natural to jump to conclusions about the reasons behind someone's actions but, the truth is, you never really know why people do the things they do. Instead of assuming someone is a slacker or has a bad attitude, explore first.
2. **Be open to talking.** Rather than making accusations, ask friendly questions. Working with someone who isn't a team player is an opportunity to practice your leadership skills and gain others' perspectives.
3. **Promote friendly group relations.** Problems can arise when team members turn on a colleague who isn't pulling their weight. To foster cohesion and discourage ostracization, consider taking your colleague out to coffee or lunch with a few teammates.
4. **Focus on the team's shared mission.** When working with a poor team player, leaders should take the opportunity to “have a conversation with the entire team about what the group's shared vision should be and the best methods for getting there,” according to David.
5. **Define duties and deadlines.** Sometimes, people who seem like poor team players are simply confused about what their role entails. Take time to review your expectations and your colleague's responsibilities, which eliminates ambiguity.
6. **Play to your colleague's strengths.** “People are highly motivated by not wanting to let their teammates down,” says Cohen. “Get them into the game, and they'll go to great lengths to perform better for the team.”

—Adapted from “[How to Work with Someone Who Isn't a Team Player](#),” by Carolyn O'Hara, *Harvard Business Review*, April 21, 2017.

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ACHE NATIONAL NEWS

Introducing Executive Diversity Career Navigator! See It... To Be It!

Specifically for diverse healthcare professionals, the **Executive Diversity Career Navigator** Version 1.0, which launched April 27, features an array of career development tools and resources (the vast majority are complimentary) designed to empower diverse healthcare professionals through every stage of their careers. Unlike any other career development website, EDCN features the “voice” of diverse senior-level healthcare executives, sharing the successful strategies they have developed through their unique career journeys. EDCN is

a collaborative effort between the following healthcare organizations dedicated to advancing executive diversity:

- **American College of Healthcare Executives**
- **Asian Healthcare Leaders Forum**
- **Institute for Diversity in Health Management**
- **LGBT Forum**
- **National Association of Health Services Executives**
- **National Association for Latino Healthcare Executives**

We invite diverse healthcare executives to visit edcnavigator.org, and let us know what you think! Please share news of this new resource with your diverse healthcare professional colleagues. We look forward to hearing from you.

The Thomas C. Dolan Executive Diversity Program—Now Accepting Applicants

Please help us spread the word about the open application period for the 2018 Thomas C. Dolan Executive Diversity Program (ache.org/ExecutiveDiversity). During this year-long program, scholars benefit from specialized curriculum opportunities to develop strategies for successful navigation of potential career challenges and enhance executive presence, one-on-one interaction with a specially selected mentor, and participation in formal leadership education and career assessments. Enhanced self-awareness, critical leadership skills, and an expanded network of leaders will help prepare scholars to ascend to C-suite roles in hospitals, health systems and other healthcare organizations. Visit ache.org/ExecutiveDiversity for more information or to apply. If you have questions about the program, please contact Cie Armstead, director, Diversity and Inclusion, ACHE, at carmstead@ache.org or (312) 424-9306. *The Foundation of ACHE's Fund for Healthcare Leadership accepts donations to the Thomas C. Dolan Executive Diversity Program. Gifts—no matter the amount—help shape the future of healthcare leadership. Visit ache.org/ExecutiveDiversity to make your donation.*

Run for ACHE Regent

ACHE is beginning the election process for new Regents, including Georgia, to serve on its Council of Regents, the legislative body that represents ACHE's more than 40,000 members. Serving as an elected official is a unique opportunity that allows you to exercise your leadership ability, share innovative ideas and act on behalf of ACHE members.

All Fellows who wish to run for election must submit a letter of intent to elections@ache.org by Aug. 25. The letter of intent must include a current business title, business address, email address and telephone number. If you submit your letter of intent and haven't received confirmation of its receipt by Sept. 1, contact Caitlin E. Stine, communications specialist, Division of Regional Services, ACHE, at (312) 424-9324 or cstine@ache.org.

Healthcare Consultants and Physician Executives Forum Education Programs

The Physician Executives Forum and Healthcare Consultants Forum provide added value to physician executive and healthcare consultant members via tailored resources to meet these groups' unique professional

development needs. A one-day education program is a cornerstone benefit of both Forums that offers an affordable learning and networking opportunity. Dates and location for these programs are as follows:

- **2017 Physician Executives Forum Education Program** – July 28, Grand Hyatt New York (held in conjunction with the New York Cluster). More details available at ache.org/PEProgram
- **2017 Healthcare Consultants Forum Education Program** – 22, Hyatt Regency O'Hare Chicago. More details available soon at www.ache.org/HCFForum

Forum Member Directory Connects Executives with Healthcare Consultants

ACHE is pleased to announce its latest member benefit exclusive to Healthcare Consultants Forum members... The new [Healthcare Consultants Forum Member Directory](#) is intended to serve as a resource for healthcare executives and organizations seeking the services of a healthcare consultant with a specific area of expertise. *Are you a healthcare executive searching for a consultant?* The Directory's robust search functionality can help identify ACHE Consultant Forum Members who may meet your needs. *Are you a consultant looking to gain visibility with decision makers?* Join the [Healthcare Consultants Forum](#), and select your primary area of expertise now! Questions? Please contact Liz Catalano, marketing specialist, Division of Member Services, ACHE, at ecatalano@ache.org or (312) 424-9374 or Erika Joyce, CAE, assistant director, Division of Member Services, ACHE, at ejoyce@ache.org or (312) 424-9373.

Forum on Advances in Healthcare Management Research 2018 Proposals Open

The American College of Healthcare Executives would like to invite authors to submit proposals to present their research at the 10th annual Forum on Advances in Healthcare Management Research. This session will take place during ACHE's 2018 Congress on Healthcare Leadership, March 26–29. The senior author of each selected proposal will receive a complimentary registration to the Congress. Please visit ache.org/Congress/ForumRFP.cfm for the selection criteria and submission instructions. Submit your up-to-400-word abstract by **July 10**.

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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](mailto:kmanno@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.

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.

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.

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