October 2018 Newsletter



An Independent Chapter of



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PRESIDENT'S LETTER

Now it's fall, and I am reminded that fall is probably my single favorite season of the year. One of the major reasons is that I love college football. The reasons that I enjoy this sport are many, but a few of the most important drivers are:



- It's a team sport, requiring execution and discipline at the highest levels.
- The talent on the team changes each season, so the players must be fully engaged in the off-season learning the playbooks and building camaraderie.
- The most successful coaches instill cultures where the expectation is that championships will be sought each year.

Perhaps my favorite part in all of this are the leadership lessons that can be taken from the college football field (regardless if you wear red and black, blue and gold, or any other sets of colors on Saturdays) and applied in our own lives as healthcare leaders. What's also equally compelling is the need to build a diverse team to maximize the chances of success. To continue the analogy, fielding eleven linebackers or eleven wide receivers each down isn't going to score many points or prevent many touchdowns. Each team member must know his or her role, and execute accordingly. Taking this yet another step further, the coach must recruit well and use the tools at his disposal (like executive coaching, personality assessments, 360-degree evaluations and leadership style inventories) to get the most out of each player, build a high-performing group and put the team in a position to win each Saturday.

We should expect discipline in the execution of our work each day. We should expect that our teams will evolve over time with new people who bring new strengths and weaknesses. We should expect a commitment to lifelong learning from each of them. And

not only should we expect all of this from our team members, but we should expect it of ourselves. As the team evolves and perhaps most importantly as healthcare leaders, we should hold ourselves to the highest levels of expectation around the culture within the organizations we serve. We 'set the bar' that our teams should achieve the highest levels of performance for those that we serve each shift, each day, each month and each year.

While most of us won't generate the income that the highest-compensated college football coaches will, we are called to an even higher vocation: helping other people at their greatest levels of need. I simply don't know what better calling there could be. So again, regardless of who your team is (or if you could care less about college football!), I challenge you to take the best lessons from leaders around you and put them to work in your own lives. I challenge us all to be better than the day before, and I hope for each of us that we continue to grow as leaders.

To lifelong learning, continued coaching and building great teams,

Timothy A. Slocum, FACHE 2018 President, Georgia Association of Healthcare Executives

Member News

Committee Spotlight: Career Development

In this issue we feature GAHE's Career Development Committee

By Sonja McLendon, FACHE, Career Development Committee Chair

GAHE's Career Development Committee is comprised of two subcommittees, the Mentorship Committee and the Higher Education Network (HEN) Committee, and both have had a busy year helping to bring students and early careerists together with experienced executives in our support of ACHE's mission of advancing our members and healthcare's management excellence and specifically our core value of lifelong learning. The Mentorship Committee launched GA-HE's inaugural Mentor/Mentee program in January of this year, with 100 participants from across the state representing a wide variety of healthcare fields, demographics, and years of experience. The official program ended in June but many matches are continuing their partnerships. We are gathering feedback now from participants and will kick off the 2018/19 program in the early fall.

The HEN Committee hosted a luncheon in March with MHA students at Georgia Southern/Armstrong University and a group of healthcare executives who shared insights about their leadership journey. The event was wildly successful, garnering positive feedback from both students and leaders, and we are planning a similar event with Georgia State University later this year.

We are seeking executives at both the mid and advanced career levels to participate in this and other events with our HEN schools, and also to serve as mentors for the mentorship program. If you'd like more information about how to "pay it forward," and help the next generation of healthcare leaders, please contact Sonja McLendon at sonja.mclendon@nghs.com.

GAHE leaders at ACHE's 2018 Chapter Leaders Conference

GAHE board members attended the annual ACHE Chapter Leaders Conference in September for inspiring exchanges with leaders of other ACHE chapters and have returned with excitement for the rest of 2018 and much more for 2019!



At the ACHE Chapter Leaders Conference: John W. Henson, MD, FACHE, GAHE Board Member & PEG Chair, presents on GAHE's Physician Executives Group (PEG) and how other chapters can start their own such group.

Connect with GAHE

GAHE is on social media - so remember to connect with us for the most up to date news and photos...

• Linked In: www.linkedin.com/groups/1121747

• Twitter: @GAHEConnect -- twitter.com/GAHEConnect

• Facebook: <u>www.facebook.com/GAHEConnect</u>



MEMBERSHIP REPORT

(Third quarter 2018, as of 9/30/18)

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:

James S. Zacharias, MBA, CMPE, FACHE Boykin Robinson, MD, FACHE Robecca L. Quammen, DBA, FACHE Domingo Valpuesta, FACHE Jennifer E. Garber, FACHE

We recognize the following members who recently recertified their Fellow status:

Pelham L. Harris, FACHE M. Lisa Haynes, FACHE Anna H. Ivory, FACHE Greg K. Johnson, Sr., FACHE Kyle L. McCann, FACHE Sabrina Shannon, FACHE David L. Tabor, FACHE Joan Wilson, FACHE
Laura J. Caramanica, PhD, FACHE
Louis D. Simmons, FACHE
Bradley J. Tate, FACHE
J. Larry Tyler, FHFMA, CMPE, FACHE
Jeffrey H. Whitton, FACHE
Philip R. Wolfe, FACHE

Michelle M. Breitfelder, RN, FACHE Christopher M. Cornue, FACHE Jessie T. Shepherd, FACHE Louis W. Goolsby, MD, FACHE Michael L. Purvis, FACHE Candice L. Saunders, FACHE Thomas C. Wohlford, III, FACHE

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

Brandi Allen Kelsey Ankrom Stephanie M. Black, MBA, BSN, RN Amanda Bonser, MBA

Tracy A. Bryant
Paola Buitrago
Michael Burguillos
Melody E. Burton
Valerie D. Campbell, RN

Valerie D. Campbell, RN Roderick H. Cantey, III Leang Chhun

Rashida Cloud Glenda A. Ellis Jennifer Eubanks Marisa Gillies Elizabeth Harris

Esther H. Lim, MD, MBA Jason Miles, MBA

SFC Travis B. Osborne, Sr.

Deidre M. Pierce

Thomas F. Rockenbach, Jr. Gabriella Rozenblat

Regine Thigpen

Helen Forrest Vacher, MBA, BSN, RN

Tauheedah Womack Charles L. Adams, MHA

Noreen T. Bernard, EdD, RN, NE-BC

Naomi R. Brown Matthew Evans Vince Faridani, MD Charles Flavio Roschanda Fletcher Ayshia E. Hatcher

Jacqueline Herd, DNP, RN Adrienne T. Hunter, DHA

Craig Hunter

PO3 Richard L. Kelley, MHA

Preston L. Kelly Artrice Love, RN Sumir Patel, MD, MBA

Julia B. Pollard

SrA Regine C. Richardson

1Lt Dante Ricks
Nicholas C. Townsend
Jeorgia Whittaker
Lola Ashimi
Rocky Baker
Hugh S. Brennan
Denise Brewer, PhD
Kavanaugh Chandler
Jonathan J. Conner, Jr.
MAJ Vincent L. Duncan

Jamil Facdol Laura T. Gentry

Addison Giannini, MBA MacMillian R. Grainger Brandon M. Halulka Samer Hamde Terrance Hayslett Dallas Hughes Teandra M. Lassiter

Adrian Lewis

Monique N. Nix, MS, RN

Muki Pederson Justin Roepe Stever Shever, MBA Rashida Stone Chelsea Thomas Pamela Weigandt, MD Alexander Beard

Christopher M. Boyd Lt Col Bryan W. Castle David E. D.O., DO Rich Dettmann Danielle Epps Crystal M. Faucett Debora Fisher Ryan L. Franks Jason Goins

Laura A. Hochwalt, RN LTC Thwana F. Johnson

Andre Jones YOLANDA MARSH Amanda J. McCrary COL Michelle Munroe

Olayinka A. Ogunmoyero, MBA, BSN,

RN

Brian Rogers

CDR Melanie R. Ross Lawrence Wade Lynn Walton

GAHE by the numbers

Following are our chapter metrics reported by ACHE as part of the standards for all chapters (third quarter, as of publication date 9/30/18)

Award of Chapter Excellence Indicators				
Indicator	Measure	2017 Actual	2018 Actual-to-date	2018 Standard
Member Satisfaction	Chapter Member Needs Survey	4.0	4.1	4.1
Education & Networking Performance	Indexed attendee hours	25.6	9.7	13.7
Net Membership Growth	Percent increase in total chapter membership	(1.8)	(6.0)	7.7
Advancement of Eligible Members	Members who have passed the Board of Governor's Exam and advanced to Fellow		14	15

Upcoming Events

Get the most current details and register for all GAHE events on the <u>"Events" page at www.gahe.org</u> (list below accurate as of publication date 9/30/18):



Community service volunteering

Saturdays at Medshare, Atlanta
Dates coming up: October 20 (afternoon); November 17 (morning); December 15 (morning)



Friday, October 5 in Columbus - Lunch with the CEO

Piedmont Columbus Regional @ 12:00 - 1:30 PM | Columbus Featuring Scott Hill, FACHE at Piedmont Columbus Regional

P.E.G.

Tuesday, October 16 - Physician Executives Group Dinner

Piedmont Cancer @ 6:00 - 8:30 PM | Atlanta Networking evening for Physicians and Senior Executives: "How CareSource is Improving Care for Medicaid in Georgia" with Seema Csukas, MD, PhD, FAAP - Medical Director, CareSource



Tuesday, October 16 - Partner event: GA HIMSS Annual Conference

Cobb Galleria @ 7:30 AM - 6:30 PM | Atlanta



Thursday, October 18 – Meeting: "Using the Baldrige Criteria to Improve Your Organization's Performance and Quality"

Maggiano's Little Italy @ 11:30 AM - 2:00 PM | Atlanta 1.5 CEUs Face to Face Education



Thursday, November 15 - GAHE Annual Meeting: "Industry Transformation and Strategic Partnership Implications"

Maggiano's Little Italy @ 11:30 AM - 2:00 PM | Atlanta At this meeting we will elect the 2019 Officers and Board CEUs TBA



Thursday, November 27 - Senior Executives Dinner

The Buckhead Club @ 6:00 - 8:30 PM | Atlanta With Ninfa Saunders, FACHE - President & CEO, Navicent Health and Gene Woods, FACHE - President & CEO, Atrium Health



Monday, December 3 in Macon - Annual GAHE Minicluster

Mercer University @ 8:00 AM - 4:30 PM | Macon 6 CEUs



December (date TBA) – Holiday Networking Evening

Location TBA@ 6:00 - 8:30 PM | Atlanta

Recent Events Recap

Photos by GAHE Communications Committee Chair Sepi Browning and GAHE Administrator Karen Manno



Summer Networking Evening in June with speed networking sessions led by Chris Kane, Progressive Healthcare; Monte Wilson, WellStar Health System



Summer Networking Evening in June with speed networking sessions led by Chris Kane, Progressive Healthcare; Monte Wilson, WellStar Health System; Kim Chastain, Crabapple Physical Therapy; Will Hall, HIPnation Operations & Solutions; Chip Nagle, Tyler & Company





Summer Networking Evening in June with speed networking sessions led by Chris Kane, Progressive Healthcare; Monte Wilson, WellStar Health System; Kim Chastain, Crabapple Physical Therapy; Will Hall, HIPnation Operations & Solutions; Chip Nagle, Tyler & Company



July's meeting topic was "Making A Difference: Ethical Leadership in Today's Healthcare Climate" featuring Jason Lesandrini, WellStar Health System



August's meeting featured Chuck Stokes, FACHE speaking on "Commitment to Zero Harm: Memorial Hermann Health System"





The August Senior Executive Dinner featured ACHE Immediate Past Chairman Chuck Stokes, FACHE; at right – Larry Tyler, FACHE (at podium) introduces Chuck (seated)





A big turnout for September's meeting on "Rethinking the Ambulatory Care Network". Our panel was moderator Wendy Weitzner, FACHE - The Innova Group, and panelists Tom Bat, MD - North Atlanta Primary Care; Bryant Cornett, FACHE - DTSpade; Joe Brywczynski - WellStar Health System; Joe Krumdieck - Realty Trust Group.





The Carter Center and Presidential Library was the setting for the September Senior Exeuctives Dinner with ACHE 2018 Chairman Heather Rohan, FACHE. Heather (right) was introduced by GAHE's Immediate Past President, Mary Germann, FACHE

Giving back to our community – Community Service/Civic Engagement with GAHE

We are holding monthly community service events this year at the facilities of MedShare in Decatur, Georgia. Each date our volunteers sort and pack medical supplies that, instead of going to a landfill, will serve patients at clinics in developing countries world-wide. Here's our amazing statistics!

- June 10 volunteers helped pack 141 boxes of 806 pounds of medical supplies to serve about 1,762 patients in one or more of the following countries: Nigeria, Swaziland, Ecuador, Haiti, Philippines and Malawi.
- August 13 volunteers helped pack 90 boxes of 1,071 pounds to serve 1,125 patients in Nigeria, Cameroon, Somalia, Kenya, Guatemala, Swaziland, Vietnam, Philippines and Papa New Guinea.
- September This month we collaborated with members of NAHSE Atlanta. 12 volunteers helped pack 181 boxes of 1,600 pounds to serve 2,266 patients Cameroon, Nigeria, Somalia, Guatemala, and Vietnam.

GAHE members who attend our community service events receive a free GAHE "Be The Change" t-shirt! Learn more about Medshare and its mission at www.medshare.org. More opportunities are coming up in October, November and December – check our events calendar to register at www.gahe.org/events.



June – volunteers Lauren Littlejohn, Brock Beisel, Hugh Jackson, Ariana Bryant, Wyn Mortimer, Tatjana Romanko, Loretta Hicks, Al Hicks, Tara Underwood, Mia Willhite



August volunteers



September – volunteers Yinka Ajirotutu, Alexander Beard, Laura Caraminica, William Crowe Jr., Kenyatta Joseph, Esther Lim, Rene Morrow, Shinal Patel, Calvin Pegus, Angela Raphael, Carmen Wiliams, Karen Kasowski

Military To Civilian Workshop presented

GAHE was proud to present its first workshop for our members in the military healthcare sector, "Military to Civilian—The Healthcare Leader's Career Transition" on September 21. Our attendees heard first-hand from GAHE healthcare leaders sharing their experience in making the successful transition into civilian healthcare leadership. Many thanks to our panelists for this valuable offering: Don Avery, FACHE - Fairview Park Hospital; Lorraine C. Smith - Monroe County Hospital; John Quinlivan, FACHE - Redmond Regional Medical Center; Sepi Browning — Brighthour; Doug Gregory - Wellstar Kennestone; Lance Wersland - MAK Anesthesia; James Frizzi, MD - Acute Surgical Care; John Farr, MD — Doctors Hospital of Augusta; Dominic Ubamadu, FACHE - Desir Group Executive Search. And thank you to our sponsors for helping make this special event possible: Burn and Reconstructive Centers of America, and Doctors Business.

Career Corner

Take charge of your career – so others don't!

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

Who is in charge of your career? Are you making the decisions about your career or are you allowing others to make the decisions for you?

The job board asks you to send in your resume. The submittal is to an unknown person and you have no idea of who to call or contact. Who is in charge? The person who receives your resume. They also can easily reject you with no personal remorse or connection with you.

A job search is all based on rejection and / or filtering. Everyone is looking for reasons to filter out resumes thereby narrowing the pool quickly. You want to stay in the game. Here are some tips:

- 1. "You're over qualified" for the job". Says who? Benchmarked against what level? Does that mean the organization wants mediocre or under qualified people rather than "well qualified"? Consider communicating that you are excited to hit the ground running as a well-qualified resource. Simply accepting someone else's opinion about you allows the other party to be determining your future. Are you taking the lead or letting someone else own your career?
- 2. **The anonymous job board submittal is impersonal**. Do your best to identify a connection within or outside of your network who is employed by or associated with the company. Make a personal connection. Also, use sources such as LinkedIn to identify people you may know at specific companies. Call the HR department and get a name of the individual with whom you could follow up.
- 3. "Site unseen!" Rather than using anonymous job postings on job boards, seek out the company web site. Often the company has a "career" link and this is the primary path for submitting your candidate information. Making an application electronically to the company demonstrates a high level of interest. Research show that companies prefer this method because it demonstrates initiative that you have researched the Company and not just posting up -and down the job boards.
- 4. **Send a hard copy resume and cover letter unless instructed otherwise**. The process of opening the letter and having a hard copy document may help get you noticed. When supplemented to the electronic application, the visibility is increased.
- 5. Outside influences. Do not allow others friends or colleagues to decide for you whether the job or company is a

fit. Everyone has opinions and you will need to decide which to adhere to and which to ignore. Nobody knows yourself like you do. Listen to the advice others offer but make your own decisions – and learn from them for better or worse.

- 6. **Be prepared.** Prepare solid explanations for obvious questions such as:
 - What makes this opportunity an important step in your career?
 - What experience applies directly to the requirements of this position?
 - Why are you taking a step back in your career?
 - Why are you willing to take less salary than your previous job?
 - Why are you applying for a job in which you have little experience?
 - Why are you applying for a position in a substantially different size organization?

Interviewers often focus on specific parts of a resume that represent unusual variations. If there are periods of time that you were not employed, you need to have a clear story or explanation for this period of your life.

- 7. **Personal Branding Matters**. Each interaction you have with the prospective employer represents an opportunity to demonstrate your personal brand. Brand definition and differentiation requires thorough preparation before, during and after interviews. The initial review of communication skills will be 60 to 90 seconds max. You must have easy "grabbers" to get your message across quickly.
- 8. **Online resources is huge.** Some search firms are using LinkedIn and other online career services tools almost exclusively to locate and place candidates. Site search engines allow the Consultant to seek people who are in jobs, who may not be looking in the job market, but have the criteria being sought. Keep your information online up-to-date and ensure that it truly speaks to your experience.
- 9. **Network.** Develop relationships relentlessly to have contacts throughout the industry. The majority of jobs are still found based on "who you know." Develop a system for tracking contacts including career and personal information. Manage your network regularly and ensure that you maintain contact with individuals over time. Make the system easy to use daily and back up the data regularly.
- 10. **They never call back!** Take charge. You call them. Make the first move and then appropriate periodic follow up contacts. Do not sit back and expect to be called.

You may not always have a contact name and phone number. But with relentless research, you will have many of them. If you allow others to reject you without you providing the reasons to keep you in the game, then they are determining your future. Who is best to be in charge? You!

Healthcare Trends

Increase in Healthcare M&A Activity Continues in 2018

The number of hospital and health system partnership transactions continues to climb, with a total of 50 transactions announced in the first half of 2018, according to a recent analysis by Kaufman Hall.

Activity remains particularly strong among not-for-profit hospitals and health systems, with 16 of 21 transactions announced in the second quarter involving acquisitions by such organizations, compared to five transactions by for-profit acquirers. When combined with first-quarter results, more than 76 percent of deals announced in the first half of 2018 involve not-for-profit acquirers, while less than 24 percent involve for-profit acquirers.

"Not-for-profit hospital and health system leaders nationwide are moving aggressively to broaden their organizations' base and expand their presence, extending capabilities across larger geographies in order to address continued uncertainty in the industry," said Anu Singh, managing director at Kaufman Hall. "Partnerships provide them the size and enhanced positioning within their markets to help ensure that these legacy organizations can continue their missions of

providing vital care in the communities they serve."

Here are four additional findings from the report:

- Two transactions announced in the second quarter are among larger organizations with revenues between \$500 million to \$1 billion.
- Three transactions announced in the second quarter involved religious-affiliated organizations acting as acquirers, and one involved a religious-affiliated target.
- Three transactions involved academic health systems acquiring other organizations.
- Three deals involved less than fully integrated transactions with the establishment of management services agreements.

—Adapted from "<u>Hospital Merger and Acquisition Activity Continues to Rise, According to Kaufman Hall Analysis</u>," Kaufman, Hall & Associates, July 12, 2018.

IHI Publishes Guide for Providing Safe Home Healthcare

Millions of people are recovering from acute illness or coping with chronic conditions in their own homes, but their care may not always be delivered under the safest of conditions, according to a new report from the Institute for Healthcare Improvement.

Care in the home is increasing due in part to rising healthcare costs, an aging population, patient preference and advances in technology that allow for some complex care to be administered locally.

Home care has its advantages—including greater autonomy for care recipients, lower risk of certain complications (such as sleep disruption) and lower costs—but IHI cautions that in order to achieve these benefits, healthcare providers must be cognizant of risks of harm in the home setting as well. Potential issues include injuries due to physical hazards or medical equipment, pressure injuries, infections, poor nutrition, adverse events related to medication or other treatment, potential abuse or neglect, and healthcare worker burnout.

To help promote safe, person-centered care in the home, IHI's report outlined the following five guiding principles:

- 1. Self-determination and person-centered care are fundamental to all aspects of care in the home setting.
- 2. Every organization providing care in the home must create and maintain a safety culture.
- 3. A robust learning and improvement system is necessary to achieve and sustain gains in safety.
- 4. Effective team-based care and care coordination are critical to safety in the home setting.
- 5. Policies and funding models must incentivize the provision of high-quality, coordinated care in the home and avoid perpetuating care fragmentation related to payment.

As the numbers of people receiving care at home continue to increase, we hope this report will serve as a useful reference for those committed to building on that foundation," said Tejal K. Gandhi, MD, CPPS, chief clinical and safety officer for IHI.

—Adapted from "<u>Health Care Services At Home Outpacing Attention To Safety</u>," by Joanna Clark, Institute for Healthcare Improvement, July 16, 2018.

ACHE National News

Are You Leading for Safety?

Healthcare leaders are guided by the highest calling—to care for those who entrust their care to us. This means that we must keep our patients and workforce safe. Improving healthcare safety requires leaders who are committed to take a stand.

That is why ACHE has partnered with the Institute for Healthcare Improvement/National Patient Safety Foundation Lucian Leape Institute and other safety experts to help healthcare leaders take a stand.

Join us and commit to leading for safety by signing the We Lead for Safety pledge online at <u>ache.org/Safety</u>. While you are there, you can find resources, tools, self-assessments and best practices to help your organization measure, build and sustain a culture of safety.

Maximize Your Leadership with ACHE's CareerEDGE

Are you taking advantage of your complimentary access to <u>ACHE's CareerEDGE</u>? More than 4,300 of your fellow ACHE members have registered for this unique and interactive tool designed to support you in planning and managing your career. Early careerists and senior executives alike can use the tool to support their own career development as well as those they lead. CareerEDGE includes free assessments and tools to enhance your self-awareness as well as a comprehensive framework that makes it easy to map a plan to achieve your goals. Visit the <u>CareerEDGE webpage</u> to login and explore.

Offering a Postgraduate Fellowship? ACHE Can Help

If your organization is offering a postgraduate fellowship for the upcoming year, we encourage you to add it to the Directory of Postgraduate Administrative Fellowships at 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 the directory. You may add a new listing or update a previous one at any time by completing the Online Listing Form. For questions please contact Audrey Meyer, membership coordinator, Division of Member Services, at (312) 424-9308 or email ameyer@ache.org.

ACHE Communities Can Enhance Members' Experience

ACHE offers four community groups that align with members' professional backgrounds and commitment to diversity and inclusion. Encourage members in your area to join any of the communities that meet their professional needs and goals (pending satisfaction of eligibility requirements).

ACHE Forums: Asian Healthcare Leaders | LGBT | Healthcare Consultants | Physician Executives

Join or renew one or more of these groups for an annual fee of \$100 each in addition to your ACHE membership dues. All benefits are accessible online and include a quarterly newsletter, an exclusive LinkedIn Group and special designation in ACHE's online Member Directory. For questions please contact Liz Catalano, marketing specialist, Division of Member Services, at ecatalano@ache.org or (312) 424-9374, or Erika Joyce, assistant director, Division of Member Services, at ejoyce@ache.org or (312) 424-9373.

Are You Due to Recertify Your FACHE Credential in 2018?

Demonstrate your continued dedication and commitment to lifelong learning by recertifying your FACHE credential. Login to my.ache.org to learn when you are due to recertify. 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 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.



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Tomorrow is here Today

Call For Content

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.

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
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