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Healthcare Executive Forum, Inc. Newsletter—2nd Quarter 2015



From our President

Summer is a time where many people are having family events such as reunions or barbeques. People are traveling for vacation or spending time with friends. Fireworks will be forthcoming as we celebrate the birth of the United States. While we were not all born here, we choose to live here today. The sun is shining and people are happy. One thing that comes to mind is safety. I hope you all are making sure that no matter how you choose to enjoy summer, safety is a top priority.

Healthcare Executive Forum, Inc. has been busy bringing more events to our members. Just recently, we learned about CJ Urlaub, ACHE member and CEO of Mercy Hospital during our Conversation with an Executive series. You can read more about that and see pictures of the event later on in the newsletter. I would like to recognize Tauheedah Scott, HEF program committee co-chair, for organizing the event.

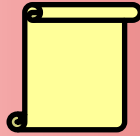
We will be collaborating with several other chapters to bring you a 6 credit face to face educational event. Stay tuned for more details from our program committee. One of the many benefits of belonging to ACHE is the educational offerings on a multitude of relevant topics. There is such value in being an ACHE member. I have found that value increases with time and taking advantage of participating at the local and national level. Please consider making a contribution to the Fund for Innovation in Healthcare. This allows ACHE to bring highly discounted programs to its membership. You can also show your support for diversity in healthcare by contributing to the Thomas C. Dolan Fund for Diversity in Healthcare.

Speaking of diversity, we are having our annual summer networking event at Acqua on July 7th. All are welcome! Please join us for drinks, food, and fun at 6p. Networking is an important activity for personal and professional development. Come out and meet or reconnect with your colleagues and the chapter leadership. We always have a great time.

Please visit our new website at <http://hef.ache.org>. JuYi Chen, communications committee co-chair, recently updated our site to have a new look. A huge thank you to her for her efforts. As always, Jay Nair, communications committee co-chair, makes sure we get all of our communications out on time, creates our flyers, and maintains our social media sites. They are an integral part of our chapter. If you would like to give of your time and talents, please feel free to contact anyone on the board of directors for Healthcare Executive Forum, Inc. As always, you can reach out to me directly with any questions or requests at vantrum1@yahoo.com.

Vi-Anne Antrum, RN, MSN, MBA, FACHE

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William A. Nelson,
PhD, HFACHE

Making Ethical Decisions

A six-step process should guide ethical decision making in healthcare.

No one would deny clinical and administrative healthcare professionals regularly encounter ethical challenges. For clinicians, the challenges may relate to a conflict regarding withholding or withdrawing life-sustaining interventions or breaching patient confidentiality. For the executive, the conflict may involve a decision concerning a needed service that is a financial drain on the organization or the abusive behavior of a highly productive administrator.

Ethical conflicts are best addressed when all the people who are legitimately involved have an opportunity to discuss their values, perceptions and concerns in an open and respectful environment.

What is the same for clinician and executive decision makers is the potential for an ethical conflict or controversy. All ethical conflicts are characterized by a number of common components. An ethical conflict occurs when an uncertainty, a question or a controversy arises regarding

competing ethical principles, personal values, or organizational and professional ethical standards of practice. Examples of such standards include the American College of Physicians' *Ethics Manual* or the American College of Healthcare Executives' *Code of Ethics*.

Once an ethical conflict is identified, the challenge becomes how healthcare leaders and other staff involved in the situation should respond. The use of a systematic process can enhance the analysis leading to a response that is ethically justifiable. For the clinician, executive or ethics committee member, applying a systematic process can diminish the possibility of making quick decisions lacking thoughtful reflection and sound ethical reasoning.

The Importance of a Standard Process for Resolution

A little over a decade ago, I was changing positions. Because I talked frequently about the importance of systematic ethical reasoning, during a farewell gathering, I was given a small poster that hangs in my office today. It reads, "Ethics, schemethics; flip the damn coin." The cynicism serves as a constant reminder of the need for the

opposite—to *always* apply a carefully developed process to address ethics conflicts. The process will take time and effort, yet it can lead to ethically defensible decisions rather than convey the general attitude, "Because I said so." The process can foster a focused application of ethical principles, institutional values and policies to ethical conflicts. It promotes thoughtful and, hopefully, respectful dialogue between the parties involved in the ethical conflict.

Unlike some decision-making models, the application of a uniform systematic process for addressing both clinical and administrative issues is a subtle-but-important distinction. It emphasizes that a process should not be based on such a distinction, in no small part because the distinction between clinical and administrative issues can be fuzzy, leading to challenging questions regarding which process is the most appropriate to follow in any given ethics situation. Therefore, using one process to address either type of conflict has clear benefits.

In a July/August 2005 *Healthcare Executive* column, "An Organizational Ethics Decision-Making Process," I described a process for facilitating systematic ethical reasoning in response to an ethical conflict. I still adhere to the basic elements of that process; however, after teaching and applying the process in practice, I recognize the need for refinements.

The following is an updated decision-making process for making ethical decisions.

Recognize the background (the circumstances leading to the ethics conflict). Identify all the relevant factors contributing to the ethical conflict. For a clinical case, it's important to understand the medical issues involved, such as the patient's diagnosis, prognosis, treatment options and goals of care. Additional key factors are the patient's preferences; personal values; decision-making capacity; and, when the patient lacks that capacity, determination of the appropriate decision maker. Each individual with a stake in the decision—the patient, the patient's family and staff members—should have an opportunity to express his or her perspectives regarding the various factors surrounding the ethical conflict. This discussion can take place during a group conference or in individual meetings. The importance of these discussions cannot be minimized to clarify the various perspectives. Additionally, understanding the relevant economic, policy, social and legal implications is essential. In this step, all the relevant factors from the perspective of all involved should be reviewed.


After identifying all the conflict-related factors, situations may arise in which it becomes clear the perceived ethical conflict is really a disagreement about the facts of the case. In exploring the factors giving rise to a clinical ethics conflict, such as with the nurses, patient, family and physicians, it can become obvious there are different interpretations of the facts. For example, in an end-of-life-care situation, the family may have a different understanding of the patient's prognosis than the physicians. This

can be similar for organizational ethics situations. If the involved parties reach agreement concerning the facts, the ethical conflict may be diminished or even eliminated; however, in situations where the discussions reinforce that a conflict exists, the parties should move to the next step.

Identify the specific ethical question that need clarification. After determining all the facts, the various competing value perspectives and the contextual issues related to the ethical conflict, the next step is to specifically articulate the ethics conflict. Because these occur when competing values are at play, the ethical question should focus on identifying and agreeing on the competing values.


For example, are healthcare professionals morally obligated to provide an intervention requested by the patient they deem to be nonbeneficial—the conflict focuses on the underlying issue of whether patient autonomy should be limited in any way? Ethical questions should be identified and reviewed in such a way that consensus is reached among all the relevant parties. Failing to identify the specific ethical conflict(s) creates significant barriers to achieving a clear response to that conflict.

Consider the related ethical principles and/or organizational values. The next step is to acknowledge the relevant ethical principles and/or the organization's values related to the



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ethical conflict. Do any particular organizational policies or, in some situations, legal perspectives, relate to the ethics question?

This step is an extension of the previous step—and in some situations, this step can be addressed at the same time as when the ethical question is identified. The precise order in this portion of the process is less important than ensuring that clear identification of the specific competing values is achieved.

Determine the options for response. In this step, the decision makers should recognize all the potential options for responding to the ethical question. This step includes reviewing the ethical justification for each option. What are the arguments for and against each option? Many people avoid this step or rarely look beyond the first suggested option. Such an approach can be attractive from a time perspective; however, it can lead to a decision lacking a critical analysis. Ethical decision making is more than following the steps in a quick, lock-step manner; it involves an appreciation for the complexity of each step and how each relates to the others.

Recommend a response. Following a thoughtful review of the various options and the ethical justification for each, decision makers should propose a response. One aspect for determining which option is morally justifiable is to assess the likely consequences of each option along with the underlying intention. This step is intended to prioritize the ethical principles or values related to each of the options. Ideally, consensus

should be reached around the recommended option.

Once a recommended option is selected, it should be shared with all involved parties. The ethical justification should be included in the recommended course of action. For a clinical ethics case, the recommendation should be noted in the patient's chart or EHR.

Anticipate the ethical conflict.

Unlike many decision-making models, this multiple-step process does not end with the resolution of the conflict response. I encourage this final step in the process—which, in some situations, may be the most challenging step in a systematic ethical-decision-making process.

Most ethical challenges focus not on isolated events, but on recurring issues. The presence of recurring ethical conflicts can undermine quality of care, staff morale, efficiency and productivity, operational costs and the organization's culture. Due to the recurring nature and impact of ethical conflicts, clinical and/or administrative staff—with assistance from the ethics committee and quality improvement program—should pursue an inquiry to determine how future conflicts can be prevented. To do so requires a thorough exploration of two fundamental questions:

- Why did the ethical conflict occur?
- What can be done to prevent the situation from recurring?

Exploring these questions can lead to a better understanding of how administrative and clinical leaders can develop

strategies for anticipating and preventing similar conflicts before they escalate. This approach, as described in "Preventing Ethics Conflicts and Improving Healthcare Quality Through System Redesign" (Nelson, W.A., et al., *Quality and Safety in Health Care*, 2010), features the application of methods and tools familiar to quality improvement. The process could lead to the development of ethics practice guidelines that can diminish the presence and impact of ethical conflicts throughout the organization.

Final Thoughts

Because no healthcare decision is made in a vacuum, ethical conflicts are best addressed when all the people who are legitimately involved have an opportunity to discuss their values, perceptions and concerns in an open and respectful environment.

Depending on the situation, greater or lesser attention may be required for a particular step in the process; however, no step should be ignored. The process is not an algorithm providing one clear answer to every ethical conflict, but rather it is a method for understanding different perspectives on the conflict and enhancing ethical reasoning. Just as ethical reasoning is not limited to the purview of healthcare ethicists or ethics committee members, the process can be applied by any healthcare professional when confronted with an ethical conflict. ▲

William A. Nelson, PhD, HFACHE, is an associate professor at Dartmouth Institute for Health Policy and Clinical Practice, Geisel School of Medicine at Dartmouth College. He also serves as adviser to the ACHE Ethics Committee (william.a.nelson@dartmouth.edu).



Career Corner— An ACHE special

How to Write a Winning Resume

Good resume form won't guarantee a homerun, but bad resume form can take you out of the game.

Reed Morton

Whether your organization is downsizing or reengineering and you are faced with job uncertainty, you are just entering the job market, or you wish to change careers, you must not underestimate the importance of a well-written resume. With the stream of resumes flowing across a prospective employer's desk, it's important to set yourself apart from the competition. Good resume form won't guarantee a homerun, but bad resume form can take you out of the game.

The Basic Resume.

Most people who are staying in the same field and have a work history that shows growth, development, and accomplishment will find that a chronological resume is an appropriate and simple way to market themselves for a new position. Key elements of the resume include your name, address, phone number, work experience, and education. Additional information is optional.

Experience. The experience section of a chronological resume is the most crucial. The focus should be your achievements and accomplishments, since the past helps predict how well you will perform in the future. Although prospective employers are concerned about what you have achieved, they want to know what you can do for their organization. Don't be modest, but don't overstate your strengths either. List each job title, place, and years of employment in reverse chronological order, beginning with your current position. There is no need to add month and day designators to your resume unless you have limited work experience or have changed jobs often. Then, provide a detailed description of your key responsibilities and major accomplishments for each position. Be sure to quantify accomplishments when possible. Saying that you exceeded a goal is one thing, but if you can tell the reader that member enrollment in your managed care plan increased 15 percent under your direction, he or she will surely be more impressed. Choose your language just as carefully as you do in your daily business communication; each item should promote you in the employer's eyes. Also, avoid an overabundance of qualifiers, such as "had exposure to" and "knowledge of." Use action verbs instead. Most importantly, avoid verbose writing. Tight, concise phrasing is the best way to provide valuable information in a format that is easy to read.

Education. For most job hunters, the education section of a resume should follow the experience/accomplishments section or functional headings. Simply list each school, degree, year of graduation, and major.

Recent graduates may wish to add relevant course work that demonstrates their training. They may also choose to list professional development programs they have attended, such as the Congress on Healthcare Management, making sure to add a description of the event if the title does not reflect the content.

Optional elements. A "personal" or "interests" section is certainly optional and may be best-suited for entry-level applicants who wish to show interests and capabilities beyond their education and work experience. Nevertheless, if you opt to add such a section, avoid trivia and extraneous information by listing only items relevant to the job for which you are applying.

Other optional items include awards and honors, certificates and licenses, publications and speaking engagements, and a section for memberships and affiliations. If you feel strongly that such information is pertinent to your candidacy for a position, by all means add them. If you are a Fellow of ACHE, be sure to include your FACHE credential, a recognized hallmark of excellence in the field. You may also opt to use the FACHE credential after your name at the top of your resume.

The Functional Resume

Another traditional format is the functional resume, which is appropriate if you wish to transition into a different healthcare sector—from acute care to long-term care, for example—or are graduating from a health administration program. The functional resume emphasizes your demonstrated abilities first, then details your work experience. By cataloging your experience and capabilities by areas of physician relations or network development, for example—each with a separate headline, you can present your experiences in order of importance as they pertain to the job you

are targeting. This also allows you to pool skills and responsibilities from several jobs and list them below one headline. Then, in your experience section, you will merely need to cite the title, employer, and dates of employment in reverse chronological order.

Regardless of which resume format you choose, always customize the resume to the job you are seeking, highlighting those strengths that will qualify you for the position.

Resume Design

When preparing your resume, focus your efforts on the content rather than the design. Although you will most likely hire a professional desktop designer, keep in mind that there are a few design essentials that apply to a good resume.

Make good use of white space by using a minimum of a one inch margin on all sides and be sure to leave ample space between sections. Also, use a type size that is easy on the eyes; a densely written resume is

difficult to read. To add emphasis, use bold type or all capital letters in section headings. Underlining and italicization should be used sparingly. For your experience/accomplishments or functional section, indent text if you choose to write in paragraph form, or use bullets for lists. Both are good ways to offset text. Always thoroughly proofread your resume, then ask someone else to scrutinize it for typographical, spelling, and grammatical errors. You should make sure to check the accuracy of company names and other factual information with which your proofreader may be unfamiliar.

Most importantly, remember that excessively lengthy resumes may automatically be rejected by a prospective employer. Although many experts believe that a resume should be limited to one page, nearly all executives will find they quickly outgrow one page, and possibly even two. Nevertheless, a resume is not a comprehensive curriculum vitae. You should limit the amount of information you wish to convey and, if possible, contain your resume to a single page, two at the most. Once you have taken these suggestions into consideration and have rolled up your sleeves to start writing your resume, you will find the process less daunting. In the end, the results of your effort should be a well-planned, well-written, and error-free personal sales pitch that meets its objective: opening the door to an interview with your prospective employer.

Resume assistance is available to ACHE members through the Career Resource Center's Resume Review/Critique Service. The service provides participants with a personalized critique of their resumes as well as sample resumes to aid in the revision process. For more information, [click here](#) or contact the Career Resource Center at (312) 424-9444.

Resume Review/Critique Service

Are you preparing to make a job transition? Before you enter the highly competitive job market, let CRC staff review and critique your resume and ensure that you present your experience and your strengths in the best way possible.

E-mail, fax or mail your current resume to the Career Resource Center, **making sure to include your next career objective.** The Career Resource Center staff will review your resume and send back a personalized critique. You will receive an email with a link to your digital audio and PDF files posted to your own confidential MY ACHE account. You will receive a personalized critique and sample resumes to consult as you improve your own. Typical turnaround time for a review is within five business days. This service includes further phone feedback on your resume once you incorporate recommendations from the initial review. To take advantage of this service, mail the registration form with payment to the Healthcare Executive Career Resource Center, ACHE, 1 N. Franklin St., Ste. 1700, Chicago, IL 60606-3529 or fax it to the attention of the Career Resource Center at (312) 424-9449. For information about e-mailing your resume or making a payment, contact CRC at (312) 424-9446.

Cost: Members \$200.00, Nonmembers \$235.00

Registration:

Register [online](#) for the self-directed option.

If you have any questions about this product, please contact ACHE's Customer Service Center at (312) 424-9400.



IN



FOCUS

Articles reprinted from ACHE—eNews

Employee Engagement During Conference Calls

Conference calls are commonplace in many organizations across the world. However, they aren't always popular among employees, who may sometimes work on other tasks instead of focusing on the conversation at hand. Below are guidelines to maximize time and productivity in setting up a call.

Allow for Limited Involvement

Be selective about those you invite—not every team member needs to be part of the call. Also, allow employees to leave the call early if they have pressing deadlines or are not needed for the remainder of the call.

Make Use of Video

Video calls can be more engaging than those held by phone. The ability to hold eye contact is a strong way to engage others. Participants can view each other's reactions and body language and then respond accordingly. And with video, you will be able to monitor everything that is going on.

Train Employees in Technology

Whether you're meeting via a video or phone conference, you need to make sure both you and your employees understand the technology being used so that they feel as comfortable in participating as possible. Doing so will eliminate disengagement and boredom caused by confusion and frustration.

Limit Telecommunication

Although setting up conference and video calls is simple and effective, it also is imperative to meet face to face with your employees. Limit these calls to issues that need the whole team's input and those where a final decision can arise by the end of the call.

—Adapted from *Communication Solutions* April 2015 newsletter,
www.communicationbriefings.com

12 Things Successful Leaders Never Tolerate

Tolerance, for the most part, is an excellent trait. Accepting difference enriches both lives and organizations. However, there are some aspects of life that should never be tolerated, most importantly because they can tear down your success. Start by making the below list intolerable both for you and those around you.

Dishonesty. Living honestly brings peace to you and others. Dishonesty places a false reality on your life and is an easy way to bring down success.

Boredom. It tends to be the case that successful people are usually exploring something new. Life is too short to be inactive and remain in your comfort zone. Get out there and do something you've never done before.

Mediocrity. Settling for less is a huge temptation, and one that is easy to take. What makes people stand out is their willingness to strive for more

and make tough decisions that can lead to a life of greatness.

Negativity. Every negative thought you have keeps you from being your best. If you hear yourself complaining either out loud or to yourself, find a way to shut it down and bring out the best in any situation.

Toxicity. Whether at work or at home, a toxic environment can leave you feeling ill. If something doesn't feel right, makes you tired or fills you with dread, either cut it loose or brainstorm ways to improve upon the situation.

Disorganization. Clutter and disorder cause stress and affects your emotional and mental well-being. Get rid of what you don't need and keep everything else where it belongs. Come up with an organizational system that works for you and stick to it.

Unhealthiness. Unhealthy food, relationships, habit—unhealthy anything—affects every aspect of your life. Remind yourself you deserve better and then give yourself better. Consciously make the decision that is healthiest for you.

Regret. Regrets are a fact of life, but dwelling on them will only bring you down. Find peace with yourself that whatever happens happens. Learn from it, right whatever you can—and then leave it behind.

Disrespect. Relationships are vital for success and respect is vital for relationships. Disrespect, no matter the form or who it may be directed toward, is one of the most destructive forces you can harbor. While cliché, it's important to think of the Golden Rule: Treat others how you would want to be treated.

Distrust. This can be bred through a succession of tiny compromises over time, so be mindful. Focus on growing your own integrity and surround yourself with others who do the same.

Anger. Anger is something none of us can avoid, and used positively, it can motivate you to action. But holding onto it is paralyzing and accomplishes nothing. Learn to direct anger toward problems, not people, and then work to get over the thing that made you angry in the first place.

Control. There are some things you will never be able to control. Focus your energy on what you can and learn to let go of the rest.

—Adapted from "12 Things That Successful Leaders Never Tolerate," by Lolly Daskal www.inc.com

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Your local ACHE chapter is HEF-WNY

As of January 1, 2008, all members of The American College of Healthcare Executives (ACHE) are automatically members of Healthcare Executive Forum of Western New York if they work in the HEF service area (Allegany, Cattaraugus, Chautauqua, Erie, Niagara, Orleans and Wyoming) or if they notify ACHE that they wish to be affiliated with this chapter. HEF no longer charges local chapter dues nor accepts applications for HEF-only membership.

ACHE—NATIONAL NEWS

[Apply for the Thomas C. Dolan Executive Diversity Program by July 2](#)

The deadline to apply for the 2016 Thomas C. Dolan Executive Diversity Program is Thursday, July 2.

During this year-long program scholars will benefit from specialized curriculum opportunities addressing barriers in career attainment and developing 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. Please direct any questions about the Thomas C. Dolan Executive Diversity Program to Terra L. Levin, FACHE, CAE, regional director, at tlevin@ache.org or (312) 424-9329.

The Foundation of ACHE's Fund for Innovation in Healthcare Leadership is accepting donations to the Thomas C. Dolan Executive Diversity Program. Gifts—no matter the amount—will help shape the future of healthcare leadership. Visit ache.org/Innovation to make a donation.

[New Video Details ACHE's Strategic Plan](#)

A video revealed during ACHE's annual Congress on Healthcare Leadership detailed ACHE's 2015–2017 strategic plan. The organization adopted the plan to ensure its ongoing value in today's rapidly changing healthcare environment. Based on input from members, chapter leaders and Regents, the ACHE Board of Governors created the plan to direct the organization's focus during the next three to five years. Watch the [highlight video](#) and read more about [ACHE's 2015–2017 Strategic Plan](#).

[Apply for Fellow Now Through June 30 and Save \\$200 on Exam Fee](#)

ACHE is pleased to once again offer the Board of Governors Exam fee waiver promotion to ACHE Members who apply for the FACHE credential between March 1 and June 30. Members must submit their completed Fellow application and \$250 application fee during the promotion period. Pending application approval, ACHE will waive the \$200 Board of Governors Exam fee. All follow-up materials (i.e., references) must be submitted by Aug. 31 to receive the waiver. For more information on the promotion, go to ache.org/FACHE.

[Exam Online Community Offers a Complimentary Interactive Learning Platform](#)

Members preparing for the Board of Governors Examination can access the Exam Online Community as a complimentary and supplementary resource that can boost their confidence and help them succeed. The online community is an interactive platform to learn and glean study tips from other Members taking the Exam. Plus, there is the opportunity to discuss Exam topics with experts for a higher level of understanding and the option to participate in study groups. Interested Members can join the Exam Online Community at bogcommunity.ache.org.

[ACHE Launches New Social Media Accounts](#)

ACHE has expanded its social media presence once again by relaunching its Facebook and Twitter pages. We will now share news about healthcare management and insight from our organization year-round, in addition to news related to the annual Congress on Healthcare Leadership. ACHE will post on topics relevant to healthcare leaders and share the organization's content and resources for members and events happening within ACHE.

Join ACHE's more than 4,000 fans on Facebook by "liking" the [American College of Healthcare Executives](#) page. You can also follow ACHE on Twitter at our recently relaunched account, [@ACHEConnect](#).

[Healthcare Consultants and Physician Executives Forum Education Programs](#)

The [Physician Executives Forum](#) and [Healthcare Consultants Forum](#) provides 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:

Healthcare Consultants Forum Education Program—Sept. 11, 2015, Hyatt Regency O'Hare, Rosemont, Ill.

More details available at ache.org/HCPProgram

Physician Executives Forum Education Program Oct. 10, 2015

Hyatt Regency Washington on Capitol Hill, Washington, D.C.

More details available at ache.org/PEProgram

[Tuition Waiver Assistance Program](#)

To reduce the barriers to ACHE educational programming for Members experiencing economic hardship, ACHE has established the Tuition Waiver Assistance Program.

ACHE makes available a limited number of tuition waivers to Members and Fellows whose organizations lack the resources to fund their tuition for education programs. Those in career transition are also encouraged to apply. Tuition waivers are based on financial need and are available for the following ACHE education programs:

1. Congress on Healthcare Leadership
2. Cluster Seminars
3. Self-Study Programs
4. Online Education Programs
5. Online Tutorial (Board of Governors Exam preparation)

ACHE Board of Governors Exam Review Course

All requests are due no less than eight weeks before the program date, except for ACHE self-study courses; see quarterly application deadlines on the FAQ page of the tuition waiver application. Incomplete applications and those received after the deadline will not be considered. Recipients will be notified of the waiver review panel's decision no less than six weeks before the program date. For ACHE self-study courses, applicants will be notified three weeks after the quarterly application deadline.

If you have questions about the program, please contact Teri Somrak, associate director, Division of Professional Development, at (312) 424-9354 or tsomrak@ache.org. For more information, visit ache.org/Tuitionwaiver.

[2015 Fund for Innovation in Healthcare Leadership Education Programs](#)

The 2015 ethics program, "An Ethical-Basis Move from Volume to Value," will be led by William Nelson, PhD, HFACHE, associate professor of community and family medicine, The Dartmouth Institute for Health Policy and Clinical Practice and the Department of Psychiatry at the Geisel School of Medicine at Dartmouth. Offered in conjunction with ACHE's New York City Cluster on Aug. 7, this half-day session will explore effective, intentional and practical ways for healthcare leaders to strengthen their organization's focus on making the best decision when moving from volume- to value-based care. A select panel of healthcare leaders including Theresa Edwards, FACHE, president, Sentara Leigh Hospital, Norfolk, Va.; Nicholas Wolter, MD, CEO, Billings (Mont.) Clinic; Deborah Zastocki, DNP, FACHE, president, Chilton Medical Center, Pompton Plains, N.J.; will react to Nelson's remarks and share experiences and lessons learned during changes within their organizations. Full details are available at ache.org/Ethics.

The 2015 innovations program, "Thriving in Today's Healthcare Marketplace: Preparing for Tomorrow's Payer and Purchaser Expectations," will be led by Andrew S. Cohen, senior vice president Kaufman, Hall & Associates, LLC. Cohen will share examples of new business models in today's healthcare environment. A panel of healthcare leaders also will share their new models, challenges and various considerations they have made during transitions. This half-day program will be offered on Sept. 11 at the Hyatt Regency O'Hare in Rosemont, Ill. Full details will soon be available at ache.org/Innovation.

Both programs qualify for ACHE Face-to-Face Education credits.

These programs are funded in part by ACHE's Fund for Innovation in Healthcare Leadership. Your contribution matters. For more information on the Fund for Innovation in Healthcare Leadership, and to donate today, visit ache.org/Innovation.

OTHER ARTICLE LINKS

1. [2014 Hospital Executive Salary Information](#)
2. [Outplacement Firm Links](#)
3. [Mentoring and Networking](#)
4. [Career transition resources](#)

Watch the latest ABOUT ACHE 2015 video here. Click on link below





Event Highlights 2nd Quarter 2015

April 21st, 2015, Conference Center, Niagara Falls, NY.

Healthcare Executive Forum and Niagara University presents
**Technology Innovation: Changing the face of
 Healthcare Delivery**
Leveraging the Impact of Technology in your Organization

In collaboration with Niagara University, this is part of our very popular Panel series that discussed the effect of technology innovation on healthcare delivery. Prominent health care experts from the area, Mr. Joe Winter, Assist. Prof. NU, Joseph Ruffolo, President/CEO of Niagara Falls memorial hospntl, Kristine Principe, Niaraga Uni-

versity, Tony Pappagallo, Catholic Health, Todd Folsom, Kaleida Health, were among the principal speakers at this widely attended event.

June 23rd, 2015: Mercy Hospital, Buffalo, NY.

On June 23, we got the pleasure to learn about CJ

CONVERSATIONS WITH AN EXECUTIVE

Featuring

Charles J. Urlaub, MBA

CEO and President, Mercy Hospital

Urlaub and his career progression. It was a fascinating journey. We heard a lot about his time spent in quality improvement and turn around events. CJ heartily endorsed networking as a must for career success and recommended ACHE as one way to accomplish that.

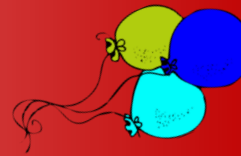
Many early careerists took advantage of the opportunity to connect with a C-suite level senior executive in a more relaxed, informal setting. The Conversation with an Executive series affords senior leaders the opportunity to give back to the healthcare community and help foster the next generation of executives. It gives early careerists exposure to different career paths and advice from those who have “climbed the mountain.” Previous executives have included Rich Cleland, FACHE, CEO of ECMC; Jamal Ghani, EVP and System COO for Kaleida Health; Our regent, Betsy Wright, FACHE, President and CEO of WCA Hospital; Joyce Yasko, former COO Roswell Park; coming in September, we have Patty Ahren, RN, FACHE, of Hospice. All are welcome to take advantage of these opportunities. It is a wonderful way for students and early careerists to get helpful hints, advice, and wisdom from those who have already walked the



road.



UPCOMING EVENTS



SUMMER NETWORKING 2015

July 7th, 2015

At

Acqua Restaurant, 2192 Niagara st., Buffalo, NY

This is a free event courtesy of HEF, NY
An ACHE chapter at Buffalo. Register at
<http://summernet2015.eventzilla.net>

Celebrate this summer by getting your colleague an ACHE membership.

Healthcare Executive Forum Inc. (HEF) is an independent Chapter of the American College of Healthcare Executives (ACHE) in the Western New York Region.

The chapter territory includes the following counties in NY - Allegany, Cattaraugus, Chautauqua, Erie, Niagara, Orleans, Wyoming

The mission of the chapter is to advance healthcare leadership and management excellence by providing professional development opportunities, networking and continuing education programs to our members.

VISIT US AT <http://hefwny.ache.org>

