

HEALTHCARE EXECUTIVE FORUM, INC. (HEF)

The Western New York Chapter of the American College of Healthcare Executives (ACHE)

2019 Q3 NEWSLETTER

From Our Leader

Quarterly message from the chapter leader.



Dear Colleagues,

During the spring of 2019, our chapter embarked on career advancement via educational opportunities with the Harvard Business Club of Buffalo, earning 6 category 1 credit for chapter member attendees. Chapter activities also promoted diversity and inclusion to ensure that leaders of various facets of healthcare were engaged, hence enabling our chapter to be a true representation of the communities we serve.

In continuation of the spirit of engagement for chapter members, HEF partnered with LMFW & CHIA DEX to host a program on Digital Health and Mergers & Acquisition – which were relevant to evolving healthcare landscape in WNY communities at large. Attendance at this event signaled the validity of the topic to community. Other activities also included outreach efforts to silent chapters members to re-instatement & re-enjoyment. As we reflect on these activities, we're grateful to everyone who has been working with us in achieving these goals.

With the summer transitioning to the fall, HEF is pleased to announce its annual Summer Networking Event to be held on September 19th, 2019 at Templeton Landing, providing yet another opportunity for close interaction and networking. Looking ahead, Q4 will focus on more exiting programs such as an all-day Healthcare Conference organized in partnership with UB, scheduled for October 2019.

Once again, there is truly a lot going on in 2019 and the extent of our success as chapter is dependent on your active involvement. So I encourage you to take advantage of all the educational & networking opportunities.

Thank you.

Best Wishes,

Momba C Chia, MHA

In this Issue

From Our Leader	<u>1</u>
Upcoming Event	2
-Healthcare 2020 & Beyond	
Articles of Interest	<u>3-5</u>
-Examples of How to Improve Productivity -Performance Evolution: How do we impro all outcomes and continue improving then	ove
FACHE	6-7
-What, Why, How?	
A Message from our Regent	8
National News 9	<u>-10</u>
	_

Chapter Officers

President:

Momba Chia, MHA

Immediate Past President:

Sudha Bommidi, MBA, CPHQ, CMRP, CSSBB, FACHE

Treasurer:

Rachael Nees, MBA, FACHE

Secretary:

Kathleen Curtin

Regent:

Frank B. Panzarella Jr., FACHE

Healthcare Executive Forum, Inc. (HEF)

Email info@hefny.ache.org

Website http://hef.ache.org/

LinkedIn https://www.linkedin.com/groups/4410582/profile

Facebook https://www.facebook.com/ HEFWNY

Upcoming Event





Great Value! 6.0 ACHE Face-to-Face Education Credits Event!

Healthcare 2020 & Beyond

Friday, October 11th 8 a.m. – 5 p.m. Templeton Landing 2 Templeton Terrace Buffalo, NY 14202

KEYNOTE SPEAKERS

Mark A. Sullivan

President and Chief Executive Officer Catholic Health System

Jody Lomeo

President and Chief Executive Officer Kaleida Health and Great Lakes Health System of WNY

Candace Johnson

President and Chief Executive Officer Roswell Park Comprehensive Cancer Center

MODERATOR

Larry Zielinski

Executive in Residence for Health Care Administration

University at Buffalo School of Management

EXPERT DISCUSSIONS

During four panel discussions, leaders from the following organizations will share their insights:

- Top Issues in National Health Care for 2020 Navigant Consulting - Value Transformation
- Addressing Increasing Pharmaceutical Costs
 Independent Health, Buffalo Medical Group and
 University at Buffalo School of Pharmacy and
 Pharmaceutical Sciences
- Medicare for All and its Many Iterations
 Navigant Consulting Value Transformation,
 HealthNow New York and University at Buffalo
 School of Management
- Electronic Medical Records (EMR) Phase Two: Is Interoperability Possible? Roswell Park Comprehensive Cancer Center, Navigant Consulting - Value Transformation, Kaleida Health/UBMD and emids

Registration and More Info: https://healthcare2020.eventzilla.net/web/event?eventid=2138738843

Articles of Interest

Articles about leadership/management from ACHE.

Examples of How to Improve Productivity

Lea E. Radick

Achieving the break-even point on Medicare is not only an important goal in itself for many healthcare organizations in need of cost transformation, but also a driver of overall efficiency and cost savings. While many hospitals and health systems struggle to achieve it, one system has succeeded in reaching and maintaining Medicare breakeven, despite the fact that government payers make up more than 75 percent of its gross payer mix.

Benefits Health System in Great Falls, Mont., relies on multiple factors to maintain Medicare breakeven, but one of its primary strategies has been to focus on improving productivity.

Following are examples of how to improve a hospital or health system's productivity:

- ⇒ Eliminate premium labor/change skill mix
- ⇒ Reduce overtime—incidental, scheduled and other
- ⇒ Evaluate on-call need, alternatives and usage
- ⇒ Evaluate education and orientation needs/programs
- ⇒ Use flexing and nontraditional shifts (e.g., adjusting staffing every four hours)
- ⇒ Float staff to similar units/share staff
- ⇒ Consolidate positions/cross-train
- ⇒ Create flexible core staff—a mix of full-time, part-time and per-diem
- ⇒ Do schedulable work during predictable slow periods
- ⇒ Eliminate nonvalue-added work
- ⇒ Fill overflow work by finding a department with capacity rather than using overtime (e.g., establish sister units for patient placement)
- ⇒ Plan vacations/paid-time off to predictably slower periods

⁻Source: Benefits Health System, 2019

Performance Evolution: How do we improve all outcomes and continue improving them?

Douglas Monroe, MD., Linda Speer, RN., Rod Brace, PhD

Traditionally, high-performing healthcare leaders are proficient in managing and improving outcomes in nonclinical areas like finance, workforce, supply chain, revenue cycle and capital investment. Successful management of these areas is interdependent, meaning accountability and decision rights are broadly distributed among board members, executives, clinicians and support personnel. The same should be true for the clinical enterprise, but, too often it is not, and this should change.

Modern-day high performers place the mitigation of avoidable risk and care delivery improvement at the core of their intentions, strategies and daily work. They use an interdependent, strategic, structured and systematic approach to clinical enterprise improvement that yields engaged leadership and operators, sustainable results and continuous outcomes improvement. However, there are still physicians who do not practice evidence-based protocols, just as there are boards and management teams that focus primarily on workforce, finances and capital planning.

The Question

Evolving regulatory and payment trends require solving clinical challenges with speed, agility and sustainability. Just like traditional management areas, the goals for the clinical enterprise should be to mitigate avoidable risk, improve all outcomes and decrease cost. This begs the question: How do we improve all clinical outcomes and continue improving them?

Our present ability to address specific performance measures is admirable; however, proficiency in one or a group of measures does not equate to mastery of the broader discipline of performance improvement for all measures. The ability to quickly and systematically identify, improve and maintain all current and future measures, versus an isolated few, is a prerequisite for answering the question. Thus, the difference between high performers and others can be explained by the distinction between continual and continuous improvement.

Continual and Continuous Improvement Defined

A continual state of improvement is a sequence in which improvements occur with varying success but sustainability is lacking. The clear signs and symptoms of diminishing improvements are easy to diagnose: frustration, resistance and adversarial attitudes among clinicians and clinical support staff. How did well-intentioned caregivers reach this level of disengagement? Perhaps it is because they are often asked to participate in intense improvement projects that fail to deliver the commensurate return on invested energy, and then are asked to do it again and again.

A continuous state of improvement is a steady state of systematic risk mitigation in which the gains from a project are sustained, built upon and compounded in subsequent projects until they are rendered obsolete and intentionally discontinued.

Continuous improvement exceeds a mastery of specific measures, implying a cycle of improvement-sustainability-improvement for all measures, not just isolated projects to improve measures of convenience or urgent need.

High-performing health systems understand the critical link between improvement and sustainability. These organizations go beyond independent efforts to set core structures, systems and processes that promote continued interdependence, and commit attention and energy to preserving the value of previous improvements.

Performance Evolution

The pursuit of performance evolution is well documented in the American nuclear, commercial aviation and military sectors, where the pursuit of safety and quality outcomes is the basis for an unwavering strategic framework. Generations of continuous improvements compound upon one another and infuse the culture. Healthcare on the whole lacks maturity when compared with these high reliability-focused industries.

Unfortunately, retained foreign bodies and wrong-site surgeries continue to occur but are avoidable. Considering the personal and financial cost of not being attentive as possible regarding avoidable risk and errors, we must be more diligent pursuing high -reliability clinical processes and outcomes in healthcare.

Soft-Tissue Toolbox

Often leaders import tools, techniques or experts to assist with improvement. Many are useful, and there are probably enough to solve most, if not all, healthcare quality challenges.

However, tools, techniques and experts are not the difference between high performers and well-intended others. They alone have not produced performance evolution. Consider them soft tissue, which deforms and functions accordingly in the absence of a skeleton.

Interdependent Structures: The Skeleton

It is rarely one single factor that prevents continuous improvement. Instead, it is routinely a mixture of factors among three broad categories. A weakness in one weakens the entire skeleton, as well as any soft tissue. These failures generally present when a hospital or system is performing below expectations, compromising an organization's ability to achieve sustainable quality improvements regardless of tools, techniques and experts. The areas they describe form the skeleton required for success.

Each component of the skeleton must support, and be supported by, all other components for operational success—interdependence. The danger is that when one component fails, the others also fail. It's trickier than independence, but independent efforts will always fail to produce global change.

The Answer

So how do we improve all outcomes and continue improving them? The high-level answer is to move beyond tools, techniques and experts by creating interdependent structures and processes that will allow coordinated and systematic risk avoidance and outcomes improvement, sustainability, cultural transformation and, eventually, performance evolution.

But first, we must do no harm.

Douglas Monroe, MD, is founding collaborator, Healthcare Advisory Collaborative, Houston (dmonroe@hacollaborative.com). Linda Speer, RN, is president, Speer Consulting LLC, Houston (l.speer@speerconsulting.org). Rod Brace, PhD, is an ACHE faculty member and founding partner, Relia Healthcare Advisors, Willis, Texas (rod@reliahealthcare.com). All are ACHE Members.

-Source: https://healthcareexecutive.org/archives/september-october-2019/satisfying-your-customers



The Distinction of Board Certification

What is a FACHE?

FACHE is the Fellow of the American College of Healthcare Executives. When you become board certified in healthcare management as an ACHE Fellow (FACHE), you'll have the knowledge, skills and confidence to succeed.

Why should I become a FACHE?

Earning the distinction of board certification in healthcare management as a Fellow of the American College of Healthcare Executives (FACHE) signifies your expertise, experience and commitment to continuing education and professional development. Just as members of the medical staff are board certified, having the FACHE credential by your name indicates a level of achievement in the profession.

How can I become a FACHE?

- Step 1: Meet the eligibility requirements.
- Step 2: Submit your advancement application. Upon approval, you will have two (2) years in which you must take and pass the Board of Governors Exam.
- Step 3: Prepare for your Exam.
- Step 4: Register for the Exam and pay the \$200 Exam fee. Exam eligibility will be valid for the two year duration of the approved fellow application.

What are the eligibility requirements?

Fellow candidates must meet all of the following requirements prior to applying and sitting for the Board of Governors Exam:

- 1. Current Member with three (3) years tenure as an ACHE Member, Faculty Associate, or International Associate. Student membership does not count toward tenure.
- 2. Master's degree (or other post-baccalaureate degree). A copy of your diploma or final conferred transcript is required.
- 3. Currently hold an executive healthcare management position with a minimum of five (5) years of executive healthcare management experience. A copy of your job description, organizational chart and resume is required.
- 4. Demonstrate 36 hours of healthcare-related continuing education within the last three (3) years of submitting an application (12 hours must be ACHE Face-to-Face education).

- 5. Two (2) examples of community/civic activities AND two (2) examples of healthcare-related activities within the last three (3) years of submitting an application.
- 6. Two (2) references: One (1) Fellow reference (must be a structured interview), the second reference may be from a senior-level executive (VP or higher) in your organization, OR it may be from a second Fellow.
- 7. \$250 Application Fee (non-refundable).

What are included in the Board of Governors Exam?

The Board of Governors Exam begins with a short biographical data questionnaire that takes approximately five minutes to complete. There are 230 questions—200 are scored and 30 are "trial", unscored questions. Candidates will have up to six (6) hours to complete the exam. Each question has four (4) possible answers, and a candidate's score is based on the number of scored questions on the examination. The "trial" questions do not affect a candidate's score—they are included so they can be evaluated for possible use as scored questions on future examinations.

There are ten core knowledge areas included in the exam: Business, Finance, Governance and Organizational Structure, Healthcare, Healthcare Technology and Information Management, Human Resources, Laws and Regulations, Management and Leadership, Professionalism and Ethics, and Quality and Performance Improvement.

Where can I learn more about FACHE?

To learn more about advancing your healthcare career and becoming a FACHE, please go to https://www.ache.org/mbership/credentialing/index.cfm.

^{*}Your Fellow application will remain valid for two (2) years in which you must pass the Board of Governors Exam.

A Message from our Regent



Summer 2019
Dear Colleagues:

As the summer winds down and we charge into the fall I hope you have found time to relax and reflect over the past few months, spend time with family and friends, and take advantage of all our vast region of New York State has to offer during the summer season. Like mine, I suspect

your calendar is rapidly filling for the coming months, so be sure to check out all of the fantastic educational and networking opportunities happening this fall from both ACHE central, and your local chapters so you don't miss out!

As we all so often experience time seems to slip by so quickly, and for me that is guite true as I look ahead to my final 6 months as Regent and wonder where the 3 years have gone. Over these final months I hope to accomplish a few key goals that will continue to advance ACHE's mission and support both our local chapters and all of the members in Northern and Western New York. One effort I will be participating in as a facilitator/presenter is the Board of Governors Exam prep course for those pursuing the FACHE credential, which is a fantastic new benefit being offered in our region thanks to the hard work of James W. Connolly, LFACHE (check out the section below describing the program). With my term as Regent winding down that means it is time for election of a new Regent, and you should be seeing the ballot come out this fall, so please keep your eye out for it and vote! I sincerely look forward to continuing my engagement in ACHE beyond my term as Regent, and will be working with the new Regent over the winter to get them off to a great start.

It was wonderful to see the HCMA Chapter get their Local Planning Council (LPC) initiative launched and host the first LPC organized event on August 22 in Albany – "Communities of Excellence 2026." This was a free event offering ACHE qualified credit and networking opportunities for our ACHE members in the Capital District area. Thanks to Mary Zielinski for her work in bringing this LPC event to fruition. LPC's are a key component of HCMA's strategic plan to improve accessibility to education and networking across a very large geographic region, so look for more LPCs to be formed and events developed in the coming year. If you would like to lead an LPC in your area, please reach out to the HCMA Board to learn more.

Giving Back to the Profession

I hope many of you are aware of The Fund for Healthcare Leadership, which provides financial support for intensive leadership development opportunities to those working at organizations which may lack the resources to fully fund tuition to ACHE's Senior Executive and Executive programs, and provides 100% of the funding for the Thomas C. Dolan Executive Diversity Program. For the second consecutive year myself and 100% of my fellow Regents in District 1 have contributed to this fund, and we hope will follow the lead of the District 1 Regents and make a contribution of any amount to the Fund for Healthcare Leadership to advance our educational mission and vision.

What are you waiting for??... Achieve the FACHE Credential!

You've worked hard to develop your leadership skills and career path ... but don't forget about one of the most significant steps you

can take when it comes to professional leadership and career enhancement – advancement to Fellow status within ACHE.

Coming in November one of our local chapters (HCMACNY) is sponsoring a 12-session program to help members prepare to take the Board of Governors Exam – the last step for advancing to ACHE Fellow. These sessions are totally free. Each month, starting November 2019, we will have one teleconference session per month, which will begin at 12 p.m. and last no longer than one hour. The full schedule for the sessions can be found on the HCMACNY website (https://hcmacny.org) "Advance to Fellow" section which contains the schedule and details and where you can also sign up to register for this preparation program. Once you register we will automatically send you the materials and reminders to facilitate the preparation for the exam.

Advancement to Fellow is a significant professional step in your leadership and career development. I encourage you to become a board-certified healthcare executive and take advantage of this important opportunity HCMACNY is offering. Please contact one of the HCMA Chapter officers or Jim Connolly, LFACHE (518-727-6974) if you have any questions.

Get Involved and Make a Difference!

Looking for ways to contribute to ACHE's Mission and Vision, and help advance our strategic plan? Connect with your local chapter (HCMA or HEF). Each Chapter is always enthusiastically embracing members looking to get involved with the Chapter, whether for participation in networking events, committees, potential Board positions, or even as an FACHE serving as a mentor to another ACHE member looking to embark on the journey to Fellow.

Healthcare Management Association of Central NY (HCMA)

HCMA has another outstanding annual Fall Conference planned for this year, coming up October 24 at Geneva on the Lake, in Geneva, NY. The conference will focus on Patient Experience, and Diversity and Inclusion in Healthcare, leveraging facilitated panel-style presentations followed by Q&A sessions. Watch your email and visit the HCMA website for updates and to register.

Healthcare Executive Forum (HEF)

HEF has their annual Summer Networking Event coming up soon on September 19 (yes that is still technically summer, which official ends on September 23!) at Templeton Landing and promises as always to be a fun and engaging networking event. The Chapter is always actively planning educational and networking events, so check the HEF website often to stay up to date on chapter activities and other Western New York healthcare events!

Chapter Websites

Please check out these websites for events and additional information from your local Chapter:

http://hcmacny.ache.org/ http://hef.ache.org/

Sincerely,

Frank B. Panzarella Jr., MHSA, CMPE, FACHE

Regent for New York - Northern and Western Chief Operating Officer Bassett Medical Group Bassett Healthcare Network Frank.panzarella@bassett.org

National News

Get Ready for the Chapter Leaders Conference

Develop strategies to engage your members in innovative ways that drive member growth. Register for the 2019 Chapter Leaders Conference at the Loews Chicago O'Hare, Sept. 23–24. Gain skills and insight applicable not only to your chapter leadership role, but also to your career.

The conference theme is "Taking Flight: Journey to the Next Level." Attendees will experience a rich learning environment and leave with strategies to help boost member involvement in chapter activities, and ways to set their chapters on a course to success. Chapter leaders will also have the opportunity to share best practices, collaborate and acquire the skills needed to engage and inspire their boards.

Vote in the Regent Elections

The 2019–20 Regent elections begin Sept. 16 and run through Oct. 4. All Members, Fellows and Life Fellows should expect an email with a link to a secure online ballot detailing candidate statements and providing the opportunity to vote. Those without email addresses in our database will receive a paper ballot via postal mail. If you are in one of the jurisdictions with an election in progress, please remember to vote and encourage your eligible chapter members to cast their votes as well. We ask that you promote the election and not campaign for a particular candidate.

Community Forums Enhance Members' Experience

ACHE members with affiliated interests can communicate, collaborate and advance through participation in one of four community groups. These groups include the Asian Healthcare Leaders Forum, the LGBT Forum, the Healthcare Consultants Forum and the Physician Executives Forum. Members can explore one forum or more for missions and benefits that align with their professional backgrounds and commitment to diversity and inclusion. Inform members in your area of these communities, and encourage them to join the ones that best meet their professional needs and goals.

Join 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.

ACHE Joins a Partnership Focused on Improving Diagnostic Quality and Safety

Did you know that inaccurate or delayed diagnoses are responsible for roughly 80,000 deaths per year in the U.S.? ACHE recognizes the importance of supporting improvements in diagnostic quality and safety in medicine, which is why we have joined the Coalition to Improve Diagnosis. The coalition is a collaboration of more than 50 leading healthcare organizations convened and led by the Society to Improve Diagnosis in Medicine.

For more information about the Coalition to Improve Diagnosis, visit improvediagnosis.org/cid/. For more information about ACHE's leading for safety efforts, visit ache.org/Safety.

Educational Opportunities Abound With Fall Online Seminars

To successfully navigate the complex challenges of today's healthcare environment, it is advantageous for leaders to cultivate skills in several key areas. This fall, a variety of online seminars are a click away to help executives stay abreast of the most relevant issues—from leveraging big data to understanding the nuances of physician alignment and engagement. Each six-week seminar is worth up to 9 ACHE Qualified Education credits.

This month, executives have three diverse learning opportunities, beginning tomorrow Sept. 4, with "Exceptional Leadership." In this seminar, attendees will explore the 16 critical competencies that set great leaders apart from good leaders. The following week, consider "Big Data and Analytics: A Perspective for Healthcare Leaders," where expert faculty will explain how to interpret, analyze, communicate and present data with confidence. At the end of the month, busy executives won't want to miss "Health Law Essentials," which will review key health law and compliance topics such as patient privacy and changes to the Affordable Care Act.

October also offers three online professional development opportunities. Leaders can gain practical tools for proven productivity-management solutions during "Superior Productivity in Healthcare Organizations," or discover how to lead an effective strategic planning process for their organizations during "Strategic Planning That Works: Integrating Strategy With Performance." Those who attend "Physician Alignment and Engagement: Dos and Taboos" will leave with tools for creating effective physician partnerships in their organizations and improving patient care.

Contact Us

Healthcare Executive Forum, Inc. (HEF)

Email us at info@hefny.ache.org

Website http://hef.ache.org/



