

ACHE - SOUTHEAST TEXAS CHAPTER

Temporarily Down
But Not Out!



TEXAS STRONG



ACHE - SouthEastTexasChapter

An Independent Chapter of the American College of Healthcare Executives

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Message from the President's Desk

Jeanna L. Bamburg, FACHE,
President, ACHE-SETC
CEO, Bayshore Medical Center and East Houston
Regional Medical Center



Hello Everyone,

Welcome to SETC's final newsletter of the year. The fall and winter editions have been combined, as a result of the disruption caused by the recent disaster.

The sentiment expressed on the cover page, I believe, reflects the spirit and motivation Texans have when it comes to facing adversity. We are not only Texas strong, we are Texas

proud, especially in the way our citizens worked together to help each other throughout the disaster and the aftermath.

As my year serving as Chapter President comes to a close I am mindful and thankful for all the support so many leaders, strategic partners and volunteers provided behind the scenes. The following milestones for the year could not have been accomplished without the dedication of numerous special folks:

- Major volunteer support of the Houston Food Bank
- Successful completion of four quarterly educational sessions with nationally known speakers and consistently strong attendance
- Another year of record attendance – 15th Annual Summer Diversity Workshop. An annual collaborative relationship with HDEART and SETC
- Strong attendance and fiscal results for SETC's Annual Healthcare Leadership Conference
- Excellent 2017 Healthcare Symposium program resulting from an annual collaborative relationship between SETC, Gulf Coast MGMA, Texas Gulf Coast Chapter HFMA and Houston TSCPA Foundation
- SETC received the ACHE 2017 Chapter Distinction Award!

It has been my pleasure and honor to serve as this year's Chapter President. Thank you for your support and best wishes to you and SETC President Paul O'Sullivan for continued success in 2018.

Jeanna

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- ★ ACHE Member Communities Can Enhance Member Experience
- ★ Join ACHE Official Group on LinkedIn
- ★ Register NOW – 2018 ACHE Congress
- ★ And much, much more!

Save the Dates! 2018

**THA Annual Conference Feb. 5 – 7,
Marriott Marquis Houston**

**1st Quarter Educational Session
Thursday, February 8 – Junior League**

**What's Up, Boss? (Career Advice/Dinner)
Thursday, April 5**

**The ACHE-SETC 17th Annual
Golf Tournament (Benefits Spring Branch
Community Health Center)
Friday, April 13**

**2nd Quarter Educational Session
Thursday, May 24 – Junior League**

**3rd Quarter Educational Session
Thursday, August 9 – Junior League**

**ACHE-SETC Healthcare Leadership
Conference, October 10-11**

**4th Quarter Educational Session
Thursday, November 8 – Junior League**



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Message from the Regent's Desk

Todd A. Caliva, FACHE
CEO, Clear Lake Regional Medical Center



Greetings All,

As we move closer to the holidays we have an opportunity to reflect on what has happened in our lives this year. Although Hurricane Harvey is still fresh in our minds, particularly for those impacted personally, many are relieved to know their families survived and they feel truly blessed. I hope you and your family have an opportunity, during the holidays to enjoy quality time together.

As I complete my first full year as an ACHE Regent, I continue to be very impressed with the ACHE-SETC leadership and all that has been accomplished in 2017. My congratulations to Jeanna Bamburg for her outstanding leadership as President.

Earlier this year the Chapter's Membership Committee Co-Chairs, Bill Hyslop, Scott Flowers, Elena Bakina, and their team, implemented a unique program for growing the Chapter's membership. It's based on asking key leaders in various healthcare organizations to serve as Executive Ambassadors within their facilities and appoint several Ambassadors to encourage co-workers to become ACHE members and motivate former ACHE members that have let their membership lapse to renew. I believe this will prove to be a highly effective program for enhancing chapter membership and I congratulate the Membership Committee on their efforts.

Quarterly Educational programs this year have been great with outstanding speakers. November keynote speaker, Dr. Tejal Gandhi, gave a very thought-provoking topic on "Freeing Patients from Harm and provided numerous recommendations for advancing patient safety.

This past October it was a pleasure to witness the return of SETC's Annual Healthcare Leadership to the Texas Medical Center. Great topics and speakers were a testimonial to the many healthcare experts practicing in southeast Texas.

Congratulations to Paul O'Sullivan as he assumes the role of Chapter President January 1, 2018.

Best wishes to all of you for the holidays.

Todd

Chapter Officers:

President:

Jeanna L. Bamburg, FACHE
jeanna.bamburg@HCAhealthcare.com

Vice President:

Paul O'Sullivan, FACHE
paul.osullivan@memorialhermann.org

Past President:

John (Jack) Buckley Jr., FACHE
buckley@srph.tamhsc.edu

Treasurer:

Cliff J. Bottoms, FACHE
cjb5535@msn.com

Secretary/Assistant Treasurer:

Lee Revere, PhD
frances.lee.revere@uth.tmc.edu

Regent:

Todd A. Caliva, FACHE
todd.caliva@hcahealthcare.com



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3rd Quarter Special Guest Speaker: Dr. Jonathan B. Perlin

ACHE-SETC's 3rd Quarter Educational Session, August 3, featured keynote speaker Dr. Jonathan B. Perlin, MD, PhD, MSHA, MACP, FACMI, President and Clinical Services & Chief Medical Officer of HCA Healthcare (Hospital Corporation of America). Dr. Perlin's presentation topic was "New opportunities for learning and improving at-scale: The digital dividend of meaningful use." He is focusing on a lot of big project that he shared about defining value through advance data analytics, advancing in health care continuous improvement, evaluating and measuring clinical performance, and improving patient safety.

Dr. Perlin began with a topic that he called the "digital dividend of meaningful years," which discussed the extraordinary challenge that the healthcare providers are facing nowadays having all of the data that are being collected and challenge to reinvent themselves, to reinvent practices, to prove the safety, the quality of performance of healthcare while improving sustainability; in other words, to prove value. How do we use our system to create reliability, to really build reliability? Obviously, that was one of the reasons for us implementing electronic health records. We are at the point now when the generation of data is really extraordinary. Dr. Perlin shared a story when he met Bill Gates at the White House in 2004. After Dr. Perlin shared his early adopted electronic health records system and shared about the types of the information that were being collected, Bill Gates said: "That's nice, but what are you learning?" Dr. Perlin now believes that at that time he even did not understand the question. At that time the individual computers' memory capacity was still limited, so different healthcare organizations' electronic medical systems were separately created, isolated, and non-compatible. Nowadays, with the biggest electronic memory capabilities, this question begins making sense. The electronic systems should be used not only to process the data for operational purposes, but also to analyze and extract new analytical information that was not possible to be extracted before, and to channel it back for the decision-making.

Dr. Perlin discussed specifically the issue of hand hygiene and the epidemic of the hospital acquired infections in the United States. Unfortunately, 4.2 % of patients who are hospitalized in the U.S. leave the hospital with something that they did not have before, which is a hospital-acquired infection. This translates to nearly 2,000,000 people. About 80,000 of these individuals die, which is more than annual mortality of breast cancer, motor vehicle accidents, and HIV combined. Dr. Perlin discussed how the advanced data analytics can be used to really identify the best practices and approached in operations management, such as specifically in compliance with hand hygiene policies and post-operative infection control approaches.



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Dr. Jonathan Perlin – 3rd Quarter Educational Session



3rd Qtr. Photos – Aug. 3, 2017, Link:

<https://www.dropbox.com/sh/9gjqtzctk2zssb9/AAA0kx61K0d2tlvfBSGTcysya?dl=0>

ACHE-SETC 2017 Healthcare Leadership Conference: Another Success!

In spite of the aftermath of Hurricane Harvey ACHE members, allied healthcare professionals and strategic partners took the time to attend the Chapter's annual healthcare leadership conference. Attendees had the opportunity to listen to outstanding speakers and earn 12 hours of ACHE Face-to-Face CEUs. Again, SETC was most fortunate to have so many guest speakers share their thoughts and provide very timely information in alignment with today's healthcare issues. Special thanks and appreciation to all of the speakers, moderators and panelists that took the time from their very busy schedules to support the Chapter. To all of you that attended Oct. 11-12 and helped make the conference a success, THANK YOU!

We are pleased to announce **2018 SETC Annual Healthcare Leadership Conference** is scheduled for **Wednesday/Thursday, Oct. 10-11.**

What's Up, Boss? Rescheduled for Thursday, April 5, 2018

Again, due to devastating weather conditions this past August it was necessary to cancel the What's Up, Boss? event and reschedule. To all of the healthcare leaders that agreed to serve as leadership hosts and registrants thank you for your patience and understanding. Please plan to attend the rescheduled event on Thursday, April 5. If you previously registered you are still registered. The registration process will reopen in February for those who haven't registered previously.

4th Quarter Guest Speaker: Dr. Tejal Gandhi



ACHE-SETC's 4th Quarter Educational Session, November 9, featured keynote speaker Dr. Tejal Gandhi, MD, MPH, CPPS, Chief Clinical and Safety Officer at Institute for Healthcare Improvement (IHI). Dr. Gandhi presentation topic was "For Patient's Sake, Free Them From Harm: How to Meet or Exceed Patient Expectations for the Safest Care Every Time." She began with emphasizing that patient safety still remains a public health issue. Despite progress, presentable harm in every care setting remains unacceptably frequent. This relates to significant mortality and morbidity and impacts quality of life.

Though many interventions have proven effective, many more have been ineffective, and some promising interventions have important questions still unresolved. Dr. Gandhi provided an overview of *Free from Harm: Accelerating Patient Safety Improvement Fifteen Years after To Err Is Human* report prepared by a panel of patient safety experts and published by the National Patient Safety Foundation (NPSF). The expert panel overall felt that health care is safer, but more work needs to be done.

Dr. Gandhi shared that patient safety is a complex problem that requires total systems approach. This means that solving one problem at a time is not sufficient anymore; patient safety requires an overarching shift from reactive, piecemeal interventions to a wider approach that focuses on advancing teamwork, culture, and patient engagement. This is the focus of the eight recommendations from this report. The recommendations are (1) to ensure that leaders establish and sustain a safety culture; (2) to create centralized and coordinated oversight of patient safety; (3) to create a common set of safety metrics that reflect meaningful outcomes; (4) to increase funding for research in patient safety and implementation science; (5) to address safety across the entire care continuum; (6) to support the health care workforce; (7) to partner with patients and families for the safest care; and (8) to ensure that technology is safe and optimized to improve patient safety.

Dr. Gandhi noted that improving safety requires an organizational culture that enables and prioritizes safety. Professionals should be held accountable for unprofessional conduct, but should not be punished for human mistakes. Errors should be identified and mitigated proactively. There should be strong feedback loops to enable learning from previous errors to prevent reoccurrences. According to AHRQ 2016 hospital survey on patient culture, only 45% of the respondents felt that there would be non-punitive response to error, that their error wouldn't be punished, which is a real killer to a safety culture. If people are not comfortable talking about errors, they won't be learning, things are not going to be improved. So, we have a long way to go when talking about culture.

Dr. Gandhi shared about the Leading a Culture of Safety: A Blueprint for Success project, a combined effort of the ACHE and NPSF Lucian Leape Institute. As a result of this initiative, a panel of culture of safety experts (co-chaired by Chuck Stokes, President and CEO of Memorial Hermann Health System) collaboratively produced an evidence-based, practical resource with tools and proven strategies to assist the healthcare leaders in creating a culture of safety. This report, produced in May of this year, is organized into six leadership domains that require CEO focus and dedication to develop and sustain a culture of safety: vision; board engagement; trust, respect, and inclusion; leadership development; just culture; and behavior expectations. Each domain includes goal to strive toward; background to develop understanding of importance and key characteristics of each domain; strategies for implementation at the CEO level; tactics that may be implemented to create change; recommendations to engage your organization, clinical leaders, and patients and families; and questions to assess and measure progress.

Dr. Gandhi argued the importance of creating a centralized and coordinated approach to patient safety in order to provide the coordination and oversight of national governing bodies and other safety organizations. This centralization is needed to centralize patient safety leadership and accountability, to avoid unnecessary duplication, and to ensure valuable lessons are shared. Dr. Gandhi also discussed the importance of creating a common set of safety metrics that span the care

continuum and creating new ways to proactively identify and measure risks and hazards. She emphasized a need for the development of more substantial advances in patient safety-related research, specifically focusing on safety hazards and best ways to prevent them. NIH 2015 budget for safety research was only 3.4% of total annual medical research budget. Safety considerations must be addressed across the entire care continuum, including ambulatory settings. There are gaps in knowledge about magnitude of safety issues and harms in ambulatory care and strategies for improvement.

Dr. Gandhi noted that support is needed for healthcare workforce safety considerations. Professionals need support to fulfill their highest potential as healers, routinely and after adverse events. Currently, many health care workers suffer harm emotionally (bullying, demeaning) and physically (injuries, assault). Up to 1/3 of nurses experience back or musculoskeletal injuries in a year. Healthcare workforce works under stress from complex and demanding tasks under severe time constraints. According to the Bureau of Labor Statistics, in 2011, US hospitals recorded 58,860 work-related injuries and illnesses that caused employees to miss work. The costs of inaction include burnout, lost work hours, turnover, inability to attract newcomers to caring professions, increased opportunities for medical errors, and negative impact on patient experience.

Dr. Gandhi discussed the importance of partnership efforts with patients and families for the safest care. Patients and families need to be actively engaged at all levels of health care; and patient involvement needs to be authentic. There is empirical evidence in the literature that patient engagement is linked to patient satisfaction, safer care, and improved work experience for caregivers, and better health outcomes. A white paper *Safety Is Personal: Partnering with Patients and Families for the Safest Care*, available for download on the NPSF's Lucian Leape Institute's website, provides recommendations based on evidence that patient engagement improves patient safety to leaders of healthcare systems, healthcare clinicians and staff, and healthcare policy makers.

Dr. Gandhi emphasized the role of technology and the importance of ensuring that technology is safe and optimized to improve patient safety. Technology has proven potential to improve patient safety but only if we can minimize the risks. Some technologies reduce errors significantly, such as computerized provider order entry, barcoding, electronic prescribing, handoff tools, test result management systems, and referral management systems. However, technology can also potentially introduce new adverse events or unintended consequences, such as clinical documentation cut and paste related accuracy issues. There is a study in the literature that showed that 10% of electronic prescriptions had error, mostly omission errors, and 1/3 of errors had potential for harm. Another study showed that for many physicians, the current state of EHR technology worsened professional satisfaction in multiple ways: due to poor usability, time consuming data entry, interference with face-to-face patient care, inefficient and less fulfilling work, and degradation of clinical documentation. There is evidence that primary care physicians using an EMR with a moderate number of functions report more stress and less job satisfaction than physicians with a low number of EMR functions. There are many collaborative efforts, such as ONC HIT safety plan; ONC SAGER guides, ECRI Collaborative sharing and analyzing HIT safety hazards and taxonomies. The Partnership for Health IT Patient Safety, a multi-stakeholder collaborative, published report *Health IT Safe Practices: Toolkit for the Safe Use of Health IT for Patient Identification* with eight safe practice recommendations detailing how health IT can facilitate patient identification. FDASIA Health IT Report 2014 recommended the creating of a Health IT Safety Center with the goal of assisting in the creating of a sustainable, integrated health IT learning system.

Dr. Gandhi concluded that much has improved in the area of patient safety, but too much still remains the same, such as failure to make substantial, measurable, system-wide strides in improving patient safety. Safety must be a top priority as a public health issue. Together, we all must accelerate efforts to create a world where patients and those who care for them are free from harm.



4th Qtr. Photos – Nov. 9, 2017, Link:

https://www.dropbox.com/sh/mxe1kxmyeuhl68e/AAC8I_IHevACLNqCGfqFZGpUa?dl=0

News from ACHE National

Perfect Your Interview Skills with ACHE's Interview Prep Tool

Have you explored ACHE's Interview Prep Tool? When it comes to the interview process, preparation is key. Even the best candidates can be overlooked during the interview process if they fail to make a lasting impact.

This unique video interview preparation tool will help you develop a competitive edge. ACHE's Interview Prep Tool features:

- A platform with video recording capability to help you perfect your professional presentation
- Healthcare management expert-recommended interview questions
- Best practices for your responses to questions in pursuit of positions at various career levels
- Customized self-assessments to critique your performance
- The option to easily share interview recordings with others for feedback

Visit ache.org/InterviewPrep to learn more and get started!

Save Time and Money with ACHE Self-Study Program

Need to earn ACHE Qualified Education credits? Earn six hours by completing a course through ACHE's Self-Study Program. Self-Study courses are portable and ready for you anytime—at home, in the office and more. Topics include finance, human resources, leadership and management.

Take advantage of ACHE's special offer: purchase one self-study course and receive a second course at a 50 percent discount. To review a list of available courses and corresponding Health Administration Press books, and to place an order, visit [the ACHE website](#).

Register Now for the 2018 Congress on Healthcare Leadership

Registration is open for [ACHE's 2018 Congress on Healthcare Leadership](#), to be held March 26–29, 2018, at the Hyatt Regency Chicago. [[Read more](#)]

Scholars Selected for Thomas C. Dolan Executive Diversity Program

[Six scholars have been selected for the Thomas C. Dolan Executive Diversity Program](#). The year-long program will help further prepare these mid- and senior-level careerists to advance to more senior leadership roles. [[Read more](#)]

ACHE Invites You to Take Part in the Giving Movement

ACHE invites you to join the [#GivingTuesday](#) movement on Nov. 28, 2017, by giving back and making a real difference for the future of healthcare. [[Read more](#)]

Save 30 Percent During HAP's Annual Holiday Sale

Whether you're looking to add to your library or need a gift for a friend or colleague, it's the perfect time to buy from HAP. [[Read more](#)]

Students: Submit Entries for Essay Competition by Dec. 1

It's not too late for students to submit entries for the [2018 Richard J. Stull Student Essay Competition in Healthcare Management](#). [[Read more](#)]



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Don't Let Your Leader-to-Leader Points Expire

If you participated in the Leader-to-Leader Program recently, don't forget to check your point balance on "[My ACHE](#)" and redeem any remaining points. [[Read more](#)]

Use Your Early Careerist Coupon Before It Expires and Advance Your Career to the Next Level

Redeem your ACHE coupon before Dec. 31 to experience discounted education or career assessment programs. [[Read more](#)]

Earn Your FACHE This Year and Attend 2018 Convocation

Your ACHE membership and participation in our leading-edge education programs is testament to your commitment to professional development. [[Read more](#)]

Save Time and Money With ACHE Self-Study Program

Need to earn ACHE Qualified Education credits? Earn six hours by completing a course through ACHE's Self-Study Program. Self-Study courses are portable and ready for you anytime—at home, in the office and more. Topics include finance, human resources, leadership and management.

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Are You Due to Recertify Your FACHE® Credential in 2018?

Demonstrate your continued dedication and commitment to lifelong learning by recertifying your FACHE credential. Visit [my.ache.org](#) (login required) 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](#).

Perfect Your Interview Skills with ACHE's Interview Prep Tool

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Offering a Postgraduate Fellowship? ACHE Can Help

ACHE would like to know if your organization is offering a postgraduate fellowship for the upcoming year. If so, we encourage you to add it to our complimentary 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 ACHE's Directory. You may add a new listing or update a previous one at any time by completing the [Online Listing Form](#).

Questions? Please contact Audrey Meyer, membership coordinator at (312) 424-9308 or email ameyer@ache.org

ACHE Member Communities Can Enhance Member Experience

ACHE offers four community groups that align with our member's professional backgrounds and diversity inclusion.

ACHE Forums: [Asian Healthcare Leaders](#) | [LGBT](#) | [Healthcare Consultants](#) | [Physician Executives](#)

Sign up today: Join or renew one or more of these groups for an annual fee of \$100 and receive benefits for the rest of 2017 *and all of 2018*. All benefits are accessible online and include a quarterly newsletter, an exclusive LinkedIn Group and special designation in ACHE's online Member Directory.



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Call for Proposals: Management Innovations Poster Session

ACHE is inviting authors to submit narratives of their posters for consideration for the 34th annual Management Innovations Poster Session to be held at ACHE's 2018 Congress on Healthcare Leadership. [[Read more](#)]

Join the ACHE Official Group on LinkedIn

LinkedIn is a social networking tool to help members exchange information, build contacts and share ideas. Join the ACHE Official Group on LinkedIn today to make new business contacts with other ACHE members and enhance your current relationships with a growing online network of leaders in the healthcare field. This group is exclusively for ACHE members.

To join the ACHE Official Group on LinkedIn, you must have a profile. To create a profile, visit LinkedIn.com. Once you have completed your profile, you are ready to join your colleagues around the country.

[Click here](#) to get started now.

SAVE-THE-DATE!**SETC BOGE REVIEW COURSE**

Interested in attending a one-day preparatory review course for the ACHE Board of Governors Exam?

Contact Don Gibson, (quantumleadership@ache-houston.org)



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Value of Networking

Strategically continue to build your network for greater success and you will appreciate the value of your efforts. It's really all about "informed networking". Choosing the right professionals for your network is key. Connecting with people within your profession will provide valuable resource opportunities at various phases of your pursuits. Let people that may be in a position to help you know of your skills and abilities. By connecting with other professionals, you are more likely to get information, advice, and referrals. You may even learn about opportunities that otherwise would go unnoticed. The more connections you make, the more likely you are to uncover the opportunity you have been searching to find. Remember, networking is an ongoing endeavor, regardless of whether you believe you have job security.

NETWORK OR NOT WORK! True words well worth remembering!

ATTENTION ALL HEALTH ADMINISTRATION GRADUATE STUDENTS IN SOUTHEAST TEXAS REGION!

If you are interested in an all-expense paid trip to Chicago March 26-29 to attend the ACHE 2018 Congress please contact your HA Program Director immediately for an application. Deadline for completing entire application (with essay) is 5pm 'sharp', Monday, January 8, 2018. Do not apply if you have been a previous recipient of an ACHE-SETC Congress Scholarship. It's a one-time offer for first-time free attendance at the Congress!



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SPECIAL THANKS TO ACHE - SETC'S CURRENT STRATEGIC PARTNERS →

ACHE - SETC encourages prospective partners to establish a long-term relationship through comprehensive and interactive benefits. As a Strategic Partner organizations have a yearlong exposure to opportunities to build one-on-one relationships with key decision-makers.

A partnership relationship with a premier ACHE affiliated Chapter like ACHE-SETC provides access to healthcare leaders that are accustomed to interfacing with professionals in a collaborative environment. ACHE-SETC strives to help healthcare professionals by providing educational and career development resources, on a local level.

Benefits of Partnership with ACHE – SETC include:

- ★ Access to healthcare leaders who make major purchasing decisions
- ★ Opportunities to share operational solutions
- ★ Exclusive insight into trends and issues impacting the healthcare field, as well as participating in educational offerings with ACHE-SETC members
- ★ Marketing exposure in several ACHE-SETC formats

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CONTACT: Don Gibson – Administrator

Phone: 281-788-8665

Email: don.gibson@foundation-setc.org

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COMMENTS?

If you have any comments about this newsletter, please Email ACHE-SETC: (quantumleadership@achehouston.org) or the Foundation Administrative Office: (don.gibson@foundation-setc.org), or call: 281-398-7877.

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Pearl Meyer



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CHOT

HAPPY AND SAFE HOLIDAYS TO ALL!