

ETHEA Q1 Newsletter

March 2022 | Q1

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Message From Our Regent

Trent A. Beach, PharmaD, FACHE

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Visit the new website!

ETHEA's website was revamped in Q4 of 2020 and is live for your viewing! Please bookmark and reference back for upcoming events and news about your local chapter!

[Click Here!](#)



A message from your President

"The board has been working diligently to ensure we are aligned with our 2022 strategic plan. Our plan is to have four educational events (two F2F & two virtual) and two networking events this year. "

ETHEA Members,

It is with great excitement that I welcome in the New Year. I would like to thank our past President Russ Peters and the rest of the board for being agile, resilient, and resourceful during the last two years. As you know, the past two years have been very challenging for everyone personally and professionally. This was also evident in our local chapter meetings and networking events. Therefore, it is a blessing to be able to plan for a transition back to some normalcy in 2022.

With the New Year, we are fortunate to welcome several new members to our board. This will provide us with enough members to fill every chair position along with additional committee members. This is something that I can say we are very proud of and will aid in future chapter growth.

We would also like to welcome members to join us in creating a mentorship program. If you have any interest or want to learn more please visit this survey link below.

<https://s.surveyplanet.com/4m4ggcm7>

The board has been working diligently to ensure we are aligned with our 2022 strategic plan. Our plan is to have four educational events (two F2F & two virtual) and two networking events this year. The two Face to Face (F2F) educational events will be held in Knoxville with the first being a joint event with HFMA on March 9th. We are also looking forward to our first networking event which is scheduled at a Tennessee Smokies baseball game on July 15th. This event will provide members a chance to socialize with fellow members in a fun open setting. It will also be open to family members.

I would like to thank you for your continued support and am optimistic that I will get to see you at some of these future events. If you'd like more information or to register for future events, please visit our website at <https://www.myethea.com/>

Respectfully,

Jay Shepherd, MBA
2022 ETHEA President



A message from your Regent

Trent A. Beach, PharmaD, FACHE

"We not only can improve patient satisfaction, but can also generate engagement and loyalty. If deployed well, we can steer patients toward other health services and products that the patient may need over time."

Message From Your ACHE Regent

Fall 2021

Hospital. @Home. No doubt these two words have become entrenched in your daily discussions. With technological advances and a widening acceptance and uptake of these in application, it is only logical that we pursue such an approach to fulfill our patient centric missions.

Like many of you, it is an area I have been involved in operationalizing. It has become an effective option for providing inpatient care for certain patients, as it affords the patient with receiving the acute care they need in the comfort of their technology-converted home.

It is not a new concept; certainly it has been contemplated for years. However, with the recent dramatic adoption rate of video communication, secure data transfer protocols and other supporting technologies, even some of the staunchest who have pumped the brakes on such an idea in the past now support this approach. What does it mean for the traditional hosted patients in our acute care organizations? There is utility for both. After all, higher acuity patients will continue to require the care only available with localization of professionals, equipment, and environment.

We know that patients, as any customer, want easy, simple, competent interactions with their healthcare

team. In that regard, there is little difference from other services they seek. If there is a button (or just a few clicks) they can pursue to access services or care providers, they will. And we have been increasingly seeing this in the ambulatory setting. It may be a shift in viewpoint for many. This may be the case as healthcare may oft be seen as such a large behemoth that is slow to change when it comes to workflows that suit the organizational efficiency versus those that suit the desires of patients for whom we exist. I believe with our leadership, this continues to improve.

At the same time, this presents a huge opportunity for us. It gives us yet another way to connect with the communities we serve. It gives us a way to build better ties with both our current and future patients. It is my experience that I most often see healthcare organizations build work systems around current patients, but little around future patients. Beyond a relatively general marketing campaign, there are few examples of connected approaches to meet the evolving patient desires for how they receive care. Offering acute care in the patient's home, when clinically appropriate, is a changed mindset from, "this is it, this is where we provide care, come to us" to "we recognize the desire you have for in-home care, and we are rising to that". We not only can improve patient satisfaction, but can also generate engagement and loyalty. If deployed well, we can steer patients toward other health services and products that the patient may need over time. It also allows us the opportunity to build the relationship needed with our patients to proactively nudge them toward their health needs (that perhaps they are not good at) and assist them with reminders by connecting them to other patient supporting platforms and connecting services we offer. So in the end, it can be a win-win.

I look forward to seeing you at Congress in March.

What a stupendous line-up of speakers and programs the ACHE staff have curated for us this year. I hope to see many of you in Chicago. If you are going through Convocation this year as a Fellow, I hope to have the opportunity to greet you and say congratulations in person.

In all things ACHE, I remain your humble servant,
Trent A. Beach, PharmD, FACHE
Regent for Tennessee
rx eagle@comcast.net



Upcoming Events (2022)

February 21, 2022 - Virtual Choice Event - 2022 Legislative Outlook & Health Law Today

March 9, 2022 - Knoxville - Live Face to Face Joint Education Event with HFMA

May 11, 2022 – Virtual Choice Event

July 15, 2022 – Smokies Networking Event

August 10, 2022 – Knoxville - Live Face to Face Joint Education Event with PEMBA

October 12, 2022 - Virtual Choice Event

December 8, 2022 – Holiday Celebration Networking Event

TBD – Chattanooga Event (Education or Networking)

TBD – Tri-Cities Event (Education or Networking)

New Member / Fellows Updates

Please help us celebrate the recent additions to our ETHEA community with our new enrollments and/or membership status changes within the group! Recognize a familiar name? See someone you might want to network with? Get engaged and connect with one another!



Members:

Jamie L Gwinn
Jacob Tanner Barb
Robert Bender
Dustin Fowler
Chris Hall
Sarah Camponovo
Rudolph Hausler
Tammy Van Dyk
David Santoemma

Fellows:

Jarrett Millsaps, FACHE
Ernestina Van Leer, FACHE
Michael Deitschmann, FACHE

Students:

Rebecca Hindman

Article of Interest

"The hospital may sit at the geographical center of that platform, but it will no longer be where everyone goes to get care."

How Digital Health Lays the Groundwork for Future Healthcare Strategy

Baptist Health is one of many health systems using digital health to improve its ICU services and connect care providers throughout the Arkansas-based 11-hospital network, improving care at the bedside and enabling small, rural hospitals to reduce transfers and care for more patients. Executives say the platform, which has been in use for roughly 14 years, allows them to coordinate care from the main hospitals in Little Rock and give outlying hospitals with fewer resources the support they need.



As the healthcare industry moves toward the concept of hospitalizing the sickest patients, it's turning the concept of remote patient monitoring around. Telemedicine platforms and digital health tools are being deployed within the hospital setting to capture more patient data and send it directly to who most needs it, no matter where that care team member is located. That may be the nurse down the hall at a central station who's keeping track of all the patients in a specific area, or the hospitalist in Little Rock assigned to watch patients in a small hospital a few hundred miles away.

While technology was trained on caring for infected patients and reducing the chances of exposure for care teams, forward-thinking health systems were eyeing strategies that took them beyond the pandemic, where digital health would be used inside the hospital to refine and direct care to where it would be most needed.

That requires a different way of thinking, and one that is challenging health system leaders to

recognize that tomorrow's hospital will be considerably different. It will involve more integration, as services are coordinated through digital health channels, and an understanding of how nurses and doctors can be redeployed to improve care management.

For now, the health system is focusing on the inpatient network. This includes coordinating care with the smaller, more remote hospitals in their network, where ICUs are either small or nonexistent and a patient transfer to a larger hospital might take dozens of phone calls. Linking to the larger hospitals in and around Little Rock enables those small hospitals to expand their ICU capabilities, even create ICU beds where they didn't have any, and care for more patients, keeping them closer to home and their families instead of shipping them off somewhere distant.

In some cases, Baptist Health is using telemedicine carts to manage care, and many rooms are being equipped with tablets that synch with the health system's Epic EHR, allowing not only providers to connect with the patient record but giving patients a means of connecting with friends and family, or for those who need interpreters.

The platform has also allowed Baptist Health to expand the reach of its specialists, giving those smaller hospitals access to pulmonologists, infectious disease and wound care experts, and lactation consultants with more services on the way.

Health systems need to reimagine how care is delivered, expanding the platform to cover patients no matter where they need that care, and offering services that interact with the communities they serve. The hospital may sit at the geographical center of that platform, but it will no longer be where everyone goes to get care.

—Adapted from “[How Digital Health Lays the Groundwork for Future Healthcare Strategy](#),” *HealthLeaders*, by Eric Wicklund, Feb. 1, 2022.



ACHE News

News from ACHE below on connecting with fellow members, On-Demand Content Library, and more!

Registration Is Open: Congress and Virtual Leadership Symposium

Registration is open for the [2022 Congress on Healthcare Leadership](#), March 28–31. Congress features an unparalleled selection of specialized education sessions and so much more:

- Expanded [Pre-Congress events](#).
- Short trending sessions and professional development resources at the [Solutions Center](#).
- Focused networking receptions.
- On-site [career advising](#) by appointment.

Visit ache.org/Congress to view the full agenda and plan your schedule.

You will also gain even more value by registering for the [Virtual Leadership Symposium](#), April 11–12. Congress on Healthcare Leadership registrants receive a discounted registration for the symposium, with combined learning units from both events totaling 18+ ACHE Face-to-Face Education credits. [Learn more](#).

Career Development Sessions at Congress

A new feature at this year's [2022 Congress on Healthcare Leadership](#) will be the Ignite Stage, which will be located in the [Solutions Center](#). The Career Resource Center experts, Executive

Search Firm and Executive Coach collaborators, patient safety partners and Health Administration Press authors will serve as featured faculty. They will be delivering multiple micro sessions, networking opportunities and panel discussions on a variety of topics that are geared toward audiences at all career levels. The Ignite Stage will be active daily throughout Congress with focused, career-related presentations, networking and open Q&A to engage all participants. In addition, the Career Resource Center will be hosting an open access exhibit booth to support dialogue, conversations and appointments for Resume Review and Career Advising sessions. Open office hours and numerous complimentary resources and tools will also be available.

ACHE Call for Nominations for the 2023 Slate

ACHE's 2022–2023 Nominating Committee is calling for applications for service beginning in 2023. ACHE Fellows are eligible for the Chair-Elect and Governor vacancies and are eligible for the Nominating Committee vacancies within their districts. Those interested in pursuing applications should review the candidate guidelines for the competencies and qualifications required for these important roles. Open positions on the slate include:

- Nominating Committee Member, District 2 (two-year term ending in 2025)
- Nominating Committee Member, District 3 (two-year term ending in 2025)
- Nominating Committee Member, District 6 (two-year term ending in 2025)
- Four Governors (three-year terms ending in 2026)
- Chair-Elect

Please refer to the following district designations for the open positions:

- **District 2:** District of Columbia, Florida, Georgia, Maryland, North Carolina, Puerto Rico & Virgin Islands, South Carolina, Virginia, West Virginia
- **District 3:** Illinois, Indiana, Iowa, Kentucky, Michigan, Minnesota, Nebraska, North Dakota, Ohio, South Dakota, Wisconsin
- **District 6:** Air Force, Army, Navy, Veterans Affairs

Candidates for Chair-Elect and Governor should submit an application to serve that includes a copy of their resume and up to 10 letters of support. For details, please review the Candidate Guidelines, including guidance from the Board of Governors to the Nominating Committee regarding the personal competencies of Chair-Elect and Governor candidates and the composition of the Board of Governors.

Candidates for the Nominating Committee should only submit a letter of self-nomination and a copy of their resume.

Applications to serve and self-nominations must be submitted electronically to jnolan@ache.org and must be received by July 15. All correspondence should be addressed to Michael J. Fosina, FACHE, chair, Nominating Committee, c/o Julie Nolan, American College of Healthcare Executives, 300 S. Riverside Plaza, Ste. 1900, Chicago, IL 60606-6698.

The first meeting of ACHE's 2022–2023 Nominating Committee will be held March 29 during the 2022 Congress on Healthcare Leadership in Chicago. The committee will be in open session at 2:45 p.m. During the meeting, the Nominating Committee will conduct an orientation session for potential candidates regarding the nominating process. Immediately following the orientation, an open forum will be provided for ACHE members to present and discuss their views of ACHE leadership needs. Following the July 15 submission deadline, the committee may meet to determine which candidates for Chair-Elect and Governor will be interviewed. All candidates will be notified of the committee's decision via email by Sept. 30, and candidates for Chair-Elect and Governor will be interviewed in person Oct. 27.

To review the Candidate Guidelines, visit [ache.org/CandidateGuidelines](https://www.ache.org/CandidateGuidelines). If you have any questions, please contact Julie Nolan at (312) 424-9367 or jnolan@ache.org.

Connect With Fellow Members

We are pleased to offer members three new, free online communities for physician executives, Asian healthcare leaders and LGBTQ healthcare leaders. The communities' platform makes it easier than ever for peers to connect in real time, tackle issues together and ask important career-related questions. Members can participate in discussion threads, share resources and best practices, and crowdsource innovative ideas and solutions.

To join, follow these steps:

1. Log in to my.ache.org.

2. Under “Helpful Links” on the right-hand side, click the last option, “My Communities.”
3. Click the “Add” button to choose the online communities you wish to join. *An MD or DO degree is required to join the Physician Executive Community.*
4. Watch your inbox for your welcome email and instructions to access your new community! The email will arrive within 24 hours.

We hope you will join these communities. If you have any questions, please email communitymanager@ache.org.

Students and Host Sites: Register for the 2022 Summer Enrichment Program

We would like to let you know you can register for the American Hospital Association’s Institute for Diversity and Health Equity’s [2022 Summer Enrichment Program](#). The Summer Enrichment Program grows and strengthens the pipeline of healthcare leaders from underrepresented groups, and places diverse graduate students pursuing advanced degrees in healthcare administration or a related field in 10-week, paid internships across the country. The Institute’s staff is working with organizations to match SEP students with host sites starting in February. Internships generally take place from June through August.

ACHE and the Institute are co-promoting the SEP to increase the number of students who participate in the program each year and, accordingly, increase the number of host sites. Just as students benefit from experiential learning, healthcare organizations that register to become host sites gain access to the healthcare leaders of tomorrow—former SEP interns are now CEOs and administrators of hospitals and healthcare organizations nationwide.

Help strengthen equity and inclusion in healthcare organizations—[learn more and register today](#).

Meet ACHE’s 2022 Premier Corporate Partners

This year, we are extremely proud and deeply appreciative to have seven of the industry’s leading companies as our [2022 Premier Corporate Partners](#):

- Cardinal Health
- Cerner Corporation
- Change Healthcare
- Exact Sciences
- Intuitive
- LeanTaaS
- Quest Diagnostics

ACHE’s Premier Corporate Partners play a vital role in supporting our mission of advancing healthcare leadership and the field of healthcare management excellence. These relationships help ACHE support our educational programs and national events, such as the Congress on Healthcare Leadership, and they offer [complimentary resources](#) to members, such as on-demand content, white papers and articles, to help address critical issues in your organization. In return, we offer our partners exclusive opportunities to engage with ACHE members to advance their key initiatives. We hope you’ll join us in offering a warm welcome to each of our 2022 Premier Corporate Partners. We look forward to their partnership and support in the year ahead.