Happy Summer!

This summer is going fast, and I hope you have taken time to enjoy your family and truly smell the roses. As you read the summer newsletter you will be delighted to hear about the amazing work our great chapter continues to do. Our focus on membership engagement, lifelong learning, excellent educational and social programs is evident in the stories.

In June, I was excited to attend – along many other MCACHE members – the annual ACHE breakfast coordinated with the Michigan Health and Hospital Association. Edward Lamb, FACHE, Chairman of ACHE, provided a very informative update on the organization’s strategy. I was also honored to be present when our Regent, Christina Freese-Decker, FACHE, awarded the Regent’s awards during the opening session. Check pages 8 and 9 for more about our amazing winners. Please congratulate them as you see them.

In July, MCAHE co-sponsored the sold out educational program with Inforum Healthcare Next – Change Fatigue: Building Resilience in the Face of Unrelenting Change. Many MCACHE board members participated in the program and many members contributed to dynamic and energizing conversation. Speaker Dr. Jean Ann Larson provided exceptional perspective on how we can master excellence during change. This was a highlight educational opportunity for leaders of all levels and a reflection of the outstanding resources our chapter education committee offers to our members.

It’s summer so of course we have also had some fun!

“Take me out the Ballgame” was the theme of our summer social event. Please see highlights on page 10 of the summer fun our members had while cheering on our beloved Tigers. MCACHE continues to promote member engagement and offering great social programs is a goal. I hope you join us throughout the year to fellowship with members.

Advancement in the college remains a key strategic goal. If you have considered achieving fellowship status, the time is now. We are here to support you in your lifelong learning. Watch upcoming announcements for the next advancement course.

As we continue our exciting year, we will be focused on continued excellent programming and our annual fund-raising efforts for scholarships. Please look for information and plan to join us on September 15 for an exciting evening at the Detroit Zoo.

As always, I invite you to join us for an upcoming program and be engaged. The value of your MCAHE membership can be enhanced by fully engaging. If you are not currently participating in a committee...sign up.

You are the special ingredient that helps MCAHE grow and fulfill its mission.

Enjoy your Summer!

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Q: Thinking back to your early career, what made you decide to pursue health administration?

A: As I began to explore career opportunities, I had an interest in teaching and working with people. Health and wellness were also important to me. Nursing was the perfect opportunity to combine all of my areas of interest. Throughout my nursing career, I focused on how I could make the lives of people better. I also desired to assist our caregivers and provide an environment where they could safely, efficiently and compassionately provide excellent patient and family centered care. As a result, I decided to pursue positions in health administration to be able to make an even stronger impact in health care and the communities served.

Q: What positions have you held?

A: I began my career as a registered nurse 30 years ago on a medical unit. I then held various leadership positions as manager, director, chief nursing officer, chief operating officer and my current position as president of Beaumont Hospital-Troy. I served 24 years in the United States Navy Reserve, retiring as a Captain in 2012. The military experience assisted me in developing leadership, communication and relationship skills that benefited my civilian career, and my hospital experience had a hand in my Navy achievements.

Q: What achievements are you proudest of to date?

A: The achievements I am proudest of center on people. I am proud of those I have coached and mentored in their careers. Watching them grow, develop and become excellent health care leaders is personally rewarding. I am also proud of achieving Magnet designation at our hospital, which signifies excellence in nursing and our entire team. When you walk throughout our hospital, you see our culture of excellence in quality, safety and service wherever you go. On a personal note, I am very proud of my family. I have a terrific husband who has been supportive of my civilian and military career, allowing me to achieve my career goals. I also have two children who have both chosen health care careers. My son is a registered nurse and my daughter is currently working towards a degree to become a physician assistant.

Q: What do you think are the greatest challenges and opportunities health executives currently face in the Midwest region?

A: Our greatest challenge is the constantly changing environment. Reimbursement from government agencies and other payers will continue to decline. We need to search for opportunities to deliver high quality health care services at lower costs. Our patients are looking for the most value since they are paying for higher proportions of their health care costs. Health care executives will need to become more consumer-oriented, knowing what our patients are looking for in health care, discovering their behaviors and then developing services according to these requirements.

Q: What changes have you seen (positive or negative) in your time as a health executive?

A: There is definitely an increased focused on safety, quality and transparency of clinical outcome data. People are taking a more active role in their health care, using a variety of data sources and are intimately involved in deciding the types of care they receive and where and when they want to receive it. Thus, we as health care executives must guide our teams in understanding the needs of our patients and families as they partner with them in making sound health care decisions.

Q: What words of wisdom can you offer to fellow administrators and those pursuing this profession?

A: You need to truly enjoy what you do in your career. In health care, never lose sight of those you serve: the patients and families who come to us for care, many at vulnerable times in their lives. In addition, listen and be fully present and ensure that the teams you lead have the resources they need to provide safe, efficient, compassionate care.
Leadership summit touted as “smashing success”  
By Medija Shaska

The University of Michigan held its 2nd Annual Leadership Summit for Women in Academic Medicine and Healthcare in June, and by any metric, it was a smashing success. This full-day event was collaboratively organized by U of M’s Medical, Business and School of Public Health with the ultimate goal of providing an opportunity to local women (and men) to focus on their development as a leader. The event was greeted by numerous leaders from the University of Michigan and featured two national speakers. Attendees also had the opportunity to attend several morning and afternoon breakout sessions that focused on developing and discussing particular career skills and goals. The event also honored two people for their work and leadership in women’s health care.

Sponsorship is one of the ways power is transferred in organizations, hence women need to start working along those terms, noted Dr. Hewlett.

This year’s recipient of the Rudi Ansbacher Leadership Award for Support of Women in Healthcare was Timothy Johnson, MD, Bates professor of the Diseases of Women and Children and Chair of Obstetrics and Gynecology at the University of Michigan. In addition, Vivian Pinn, MD, was honored as the recipient of the Outstanding Woman Leader Award. Dr. Pinn was the first full-time director of the Office of Research on Women’s Health at the National Institute of Health and the only African American, and the only woman in her class to graduate from the University Of Virginia School Of Medicine in 1967.

Carla Harris, MBA, vice chairman, Wealth Management, Managing Director and Client Advisor at Morgan Stanley delivered the closing remarks. Ms. Harris shared numerous pearls of wisdom including her takes on secrets of success (under promise and over deliver), taking risks and looking at failure as bringing the gift of experience.

All in all, the summit provided several opportunities to network and learn from each other. I wouldn’t be wrong to say that majority of other participants and myself are looking forward to the next year’s event.

Sylvia Ann Hewlett, PhD, founder and CEO for Center for Talent Innovation and founder of Hewlett Consulting Partners LLC, provided the keynote address. Dr. Hewlett shared an exciting presentation about where women stand as leaders today as well as tips on how to move up the corporate ladder. She noted that women need a change in mentality to move from middle management to C-Suite by substituting mentors with sponsors. Dr. Hewlett views sponsorship as an accelerator to any career and reminded the attendees that it’s the protégé who does most of the “heavy lifting” in that type of relationship by outperforming and showing loyalty.
Patients measure their health care experience from a generally basic yardstick – heal me, be nice to me and keep me safe. The more successful health care providers are in fulfilling those expectations the greater the likelihood they will meet pay-for-performance metrics and advance toward top box scores.

In today’s competitive health care market, however, it takes more than satisfaction to sustain and grow. It demands traveling the road to “excellence.” Paved with patient preference, loyalty and likelihood to recommend, this is the destination health systems across the U.S. are targeting in order to stand apart.

According to a 2009 patient satisfaction study led by Indiana University-Purdue University, “Satisfying patients’ needs is the first step toward having loyal patients. So, hospitals that strive to ensure their patients are completely satisfied are more likely to prosper.”

**In today’s competitive health care market, however, it takes more than satisfaction to sustain and grow.**

While exceeding satisfaction is among top priorities, a long-standing but inconsistently leveraged bond is gaining momentum to help deliver excellence to where loyalty lives – among women. Whether or not they are married, mothers, or even confident in their decisions, women make 94% of health care decisions for themselves and 59% of such decisions for others, as stated in the Center for Talent Innovation’s 2015 research on “Engaging Women Decision Makers for Healthy Outcomes.”

As health care’s core consumer, her loyalty can mean repeat utilization and recommending your system to others. However, with only 65% trusting their physicians and 58% lacking confidence in their decision making for others, providers are stepping up efforts to understand and nurture her role to build lasting relationships. Such a priority is embedded in the future of Mercy Health in Toledo and across the Ministry’s Ohio and Kentucky points of access, through guiding principles established to keep the patient first in every decision and deliver world-class experiences and care.

To deliver on its promise “To make lives better – mind, body and spirit,” one of three purpose-driven calls to action, Mercy Health’s pursuit-of-excellence initiatives engage patients, staff and physicians and emphasize attributes that heavily influence optimal ratings from patients. The Indiana-Purdue study lists these, in order, as staff care, physician care, admission process, room and food.

In 2015, the Toledo system launched High Reliability Training, a region-wide focus on improving organizational effectiveness and efficiency, customer satisfaction, compliance, organizational culture and documentation. “Its principles say we are very aware of what’s going on in our environment,” according to Charla Ulrich, interim regional quality director for Mercy Health – Toledo. “Any opportunity for improvement in care and treatment of our patients – we’re on it!”

According to Ms. Ulrich, that commitment is taking shape through the launch of several key programs. “Rounding with Purpose” involves nurses touching base every hour for purposeful conversations with patients about their condition and needs. To foster trusting relationship and achieve higher quality communication with patients, the “Commit to Sit” program is also in place. Nurses or physicians sit down when talking with patients to not only better demonstrate compassion, respect and competence, but also to minimize a posture that can be taken as authoritarian. “Leader Rounding at Night,” also recently introduced, provides third-shift staff opportunities to connect with management, and for leaders to be supportive, build engagement and learn about patient, staff or unit concerns and needs.

“It takes traditional, non-traditional and family holistic approaches to better meet health care needs,” says Barb Dianda-Martin, Mercy Health – Toledo’s service line administrator for Women’s and Children’s. “And that’s not just at the hospital, it’s the continuum of care.”

*continued on page 9*
Telehealth and consumerism: A case for revisiting your organization’s strategy?

Consumerism in health care basically means patients are increasingly assuming a larger role in and greater responsibility for their health care experience. With the growth in telehealth technologies, such as self-monitoring smartphone applications and wearable devices, consumers are realizing their desire for efficient access to information to self-monitor and the ability to present this information when seeking health care services. The ability for providers to integrate this self-collected data into the plan of care in an accurate, efficient and secure manner poses a challenge to be addressed within an organization's telehealth strategy.

According to a recent survey, use of telehealth technologies is highest among the 35 to 54 age bracket across all mediums (email, text messaging and video), with adopters reporting high satisfaction. These technologies are being used advantageously in women’s health within this age bracket. Use cases have been developed for remote monitoring and wearable technology-use for conception to post-delivery, with a variety of applications monitoring a woman’s health and fertility as well as the health of their unborn child. Some technologies currently used to support women’s health include slings that monitor fetal kick counts and contractions, cervical rings detecting slight temperature differences indicating fertility changes and even ‘smart underwear’ that can provide feedback about pelvic muscle strength post-delivery.

Time savings and convenience have been consumer key drivers when successfully employing remote monitoring technologies with cost-savings running third. Given that a normal pregnancy on its own is a stressful time for expectant mothers, the ability to engage in self-monitoring provides timely reassurance. For providers, employing advanced remote technologies in higher risk pregnancies could provide early warning and earlier intervention. As part of a comprehensive telehealth strategy, organizations that offer a remote monitoring program during lower risk prenatal visit times can leverage provider resources allowing a convenient and cost-efficient means for tracking mom and baby’s progress while employing traditional face-to-face visits when interventions are required.

By definition, telehealth employs technology to enable capabilities that extend and deepen connectivity between the health system and its consumers. These new consumer-driven modes and models of care provide an opportunity to conduct an organizational telehealth strategy ‘check-up.’ The ‘check-up’ should include assessing the organization’s competence around the following:

- Take an inventory for any siloes of telehealth already in place; what is working and why? How can it be used in other areas? What commonalities can lead to standardization of telehealth care processes?
- Conduct due diligence on payment for service – many telehealth programs are not financially viable and are discontinued. Establish clear ROI for all initiatives. Do you have organizational leaders involved at the state and federal levels for telehealth reimbursement?
- Have you moved past the “grass roots” growth of telehealth? Ensure that programs have active leadership and executive support. Is there a defined roadmap for services aligned with organizational strategy and dedicate funding and resources? Remember that programs are patient care driven – not technology driven. Set standards for technology, people and process to expedite expansion into new service areas.
- Key focus is on adoption. Fit telehealth enabled technologies into current workflows whenever possible. Incentivize providers by actively engaging them in planning. Make telehealth the “easier” option for both providers and patients. Use commercially available technology whenever possible – already in use by consumers or what is currently being utilized by the health system. Remember that ‘mobile’ is the way to go for patients and providers. Maximum quality care benefits are achieved based on HOW care providers engage and communicate with consumers.

The continual growth in health care consumer engagement will present organizations with new and expanded opportunities such as the women’s health wearables. Re-evaluate your telehealth strategy to ensure that the customer expectations can be met or exceeded. The demand requires an agile approach while maintaining a core set of telehealth guiding principles that will enable the organization’s success.

Message from your ACHE Regent

Christina M. Freese-Decker, FACHE Regent for Michigan & Northeast Ohio

Congratulations on a successful year for both the Great Lakes and the Midwest Chapter of ACHE. We held many educational sessions and executive luncheons, providing continuing education credits in convenient locations. We provided financial support, such as scholarships to students, and increased our involvement with higher education network organizations.

The Midwest Chapter increased membership by 1,000 people and received the Chapter Distinction Award for the third consecutive year. We also received the Regent Collaboration Award for our innovative strategy to connect five sites to a video simulcast last October. Thank you for volunteering on our boards and committees, volunteering to speak at our education sessions and for your support of ACHE and our professionals.

At our annual ACHE breakfast coordinated with the Michigan Health and Hospital Association, Ed Lamb, ACHE chairman, provided an update on the organization’s strategy. ACHE is offering new tools and resources to help our members navigate and lead their careers in health administration. He also highlighted the innovative practices he implemented in Alaska to provide high-quality care to a large and diverse geography.

Every summer we have the opportunity to recognize members for their exceptional leadership and dedication to the health administration profession. The Regent Awards recognize students, faculty, emerging leaders and senior leaders. The following award winners were announced at the annual MHA meeting last month:

• Our 2016 Regent Student Award was given to Alfred Li. He was selected because of his leadership in student activities with the Health Management and Policy program in the School of Public Health at the University of Michigan. He is consistently demonstrating outstanding leadership with student organizations, such as leading the job shadow day and the student career day.

• Dr. Richard Lichtenstein, S.J. Axelrod Collegiate Professor of Health Management and Policy, University of Michigan School of Public Health, is the recipient of the 2016 Regent Faculty Award. He was selected because of his leadership, advocacy and involvement in public health initiatives, specifically community health. He is also recognized for his research and emphasis in addressing health disparities and strategies to improve the diversity of our workforce.

• The 2016 Regent Emerging Leader Awards recognize Jim Aldrich and Kris Drake. Jim is the service line director of oncology services and medical staff, as well as the administrator for senior services at St. Mary’s Hospital, Trinity Health, in Livonia. He is the co-chair of the MCACHE membership committee and participates on the career development committee. He is active in developing the mentor program and outreach programs. Kris Drake has worked in multiple operations and leadership positions at Access Health, Sparrow Carson Hospital and Trinity Health-Mercy Health Saint Mary’s. He was the education committee chair for Great Lakes ACHE last year and actively increased the number of education sessions provided to members.

• The 2016 Regent Senior Healthcare Executive Awards recognize Dr. Gwen Parker and Jack Weiner. Gwen was selected for her long-term leadership and impact to her organization, Blue Cross Blue Shield of Michigan, where she serves as the senior medical officer. She currently leads the program committee for the Midwest Chapter, has been a judge for the student case competition and connects ACHE with HFMA, Inforum and other organizations to mentor professionals. Jack Weiner is the recently retired president of St. Joseph’s Mercy Oakland Hospital, Trinity Health. He was chosen for his lifelong commitment to mentoring health care leaders and for his impact on the health care industry. We thank him for helping to develop many people who are now working in health care organizations throughout Michigan. Congratulations to all of our 2016 Regent Award recipients. Thank you for being engaged with ACHE.
Crain’s Detroit Business recognized the 100 most influential women, including several in the health care industry, in its June 6, 2016 issue. Check out the entire list at crainsdetroit.com/women.

Below is the list of women in the health care field, which includes several MCACHE members.

Denise Brooks-Williams – President and CEO Henry Ford Wyandotte
Joan Budden – President and CEO Priority Health
Laura Czelada – President and CEO – Delta Dental of Michigan, Ohio and Indiana
Eva Feldman, M.D. – Russell N. DeJong Professor of Neurology – University of Michigan Medical School
Christina Feese-Decker – President – Spectrum Health Hospital Group
Melany Gavulic – President and CEO Hurley Medical Center
Mona Hanna-Attisha M.D. – Director of pediatric residency program Hurley Medical Center
Tricia Keith – EVP, Chief of staff and corporate secretary – BCBS of Michigan

Jean Meyer – President and CEO – St. John Providence Health System
Nancy Schlichting – CEO Henry Ford Health System
Rebekah Smith – President and CEO Lake Huron Medical Center
Rhonda Stryker – Philanthropist and board member Stryker Corporation
LaJune Montgomery Tabron – President and CEO W.K. Kellogg Foundation
Marianne Udow-Phillips – Director, Center for Healthcare Research and Transformation
Carolyn Wilson – Chief Operating Officer – Beaumont Health

2016 Regent Award recipients

2016 Regent Award recipients (left to right) are: Ed Lamb FACHE, ACHE Chairman; Tina Freese, FACHE, Regent; Dr. Gwen Parker, FACHE; Jack Weiner, FACHE; Dr. Richard Lichtenstein; Jim Aldrich, FACHE, and Kris Drake, FACHE.
EVENTS

Mark your calendar
BOG Exam Review Sessions  October 7 and 14

MCACHE & HFMA Co-Sponsored Fall Conference – “Waves of Change, Oceans of Opportunity”
Monday, Oct. 17 and Tuesday, Oct. 18
Monday: 1:15 - 2:45 p.m. and 3:15 - 4:45 p.m.
Tuesday: 1:30 - 3:00 p.m.
Inn at St. John’s,
44045 Five Mile Road
Plymouth

One panel: $90
Two panels: $150
Three panels: $170

1.5 Face to Face credits per panel
Register

Panel #1 – Monday, Oct. 17  1:15 - 2:45 p.m.
Legislative Panel – Election Update: Michigan Health care
The elections are coming and Michigan is in the middle of a gale wind of health care changes with business consolidations, changes in reimbursement models and changes in care practices. Panelists will discuss their work and share what’s in store for the near future.

Panelists
Rick Murdock, Executive Director, Michigan Association of Health Plans
Chris Priest, Deputy Director, Medical Services
Michigan Department of Health & Human Services
Senator Mike Shirkey, Chair Health Policy Committee, State of Michigan

Moderator: Marilyn Litka-Klein, Vice President, Health Finance, Michigan Health Association and Hospital Association

Panel #2 – Monday, Oct. 17  3:15 - 4:45 p.m.
Continuing Care Panel – Population Health: Steps in Patient Care
As reimbursement models are morphing to encompass all aspects of patient care, and in population health, it becomes imperative to understand the continuum of patient care. Panelists will discuss their work and how they are building models to reach patient care and financial goals.

Panelists
Roger Myers, Chief Executive Officer, Presbyterian Villages of Michigan
Gloria Brooks, Vice President, Chief Strategy Officer-Hospice of Michigan and President, Arbor Hospice and Arbor Hospice Foundation
Tom Watkins, President and Chief Executive Officer, Detroit Wayne Mental Health Authority
Kolby Miller, Chief Executive Officer, MedStar

Moderator: TBD

Panel #3 – Tuesday, Oct. 18 1:30 - 3:00 p.m.
Leadership Panel – Charting a Path to Change
Health care leaders are being charged with internal management of organizations while reacting to external regulatory and market changes. How are they charting a path to change and meeting the demands of these evolving environments?

Panelists
Kris Kurtz, Chief Financial Officer, Metro Health

More panelists will be added - In Process

Moderator: Ben Carter, Chief Financial Officer, Trinity Health

Sponsorship Fundraising Gala
September 15 at the Detroit Zoo
A fun evening of socializing, networking, engaging speakers (Ted Talk style!) and raising funds for local graduate students in health care programs in SE Michigan.

Your help in ensuring this event is a success is greatly appreciated. Your attendance, as well as outreach to potential sponsors, will help MCACHE reach its scholarship fundraising goal.
Students, as well as executives, from Ohio and southern Michigan attended the “Leadership Skills Necessary to Succeed in Health Care” program held in Perrysburg, Ohio, to learn more about how to succeed in the ever-changing health care arena. Approximately 45 attendees listened to the panel comprised of health care executives including (left to right) Randy Schimmoeller, Sr. Vice President of Operations, Continuum Services, Promedica Health Systems; Scott Malaney, FACHE - President and CEO, Blanchard Valley Health System, and Carson Dye, FACHE - President and CEO, Exceptional Leadership. Prior to the program, Mr. Dye provided an hour discussion regarding career and resume planning in which many of the attendees for the main program attended. Feedback on the program was positive and the information was well received.

Ms. Dianda-Martin notes that equal attention must be paid to building less tangible but highly valuable emotional trust between providers and patients – particularly women because of their care choice influence.

“There are a great many points of access for women when it comes to health care,” says Ms. Dianda-Martin. “Whether we engage with her as a patient or as the mom of a child in our care, we are committed to understanding the many stressors that influence her experiences with our system.”

From OB, the traditional care gateway for women, to diagnostics like mammograms, the Toledo provider is expanding and establishing services to meet the needs and preferences of the female patient. Initiatives are underway to expand their midwifery program, to extend access through evening and weekend hours and to offer health risk screenings supported by health navigators at any point of entry into the system.

Likewise, service and environmental changes within Mercy Health – Children’s Hospital further emphasize the value of emotional trust. With involvement from the Mercy Health – Children’s Hospital Parent Advisory Council, more pediatric friendly environments and centralized services from diagnostics to surgery to a future pediatric emergency room are being realized. “As we not only focus on her child’s medical care but also their broader experience, we are supporting her needs as a mom, and our level of effectiveness will be reflected in our patient satisfaction surveys,” says Ms. Dianda-Martin.

“We absolutely do believe that women are the primary health care decision makers,” she says, adding that “by committing to excellent experiences for women, you can gain their loyalty which will help support the critical foundations health systems of today need for both their growth and their future.”
A competitive opportunity for MCACHE Early Careerist members

MCACHE will sponsor the tuition and up to $1,000 for travel and accommodations for a MCACHE Early Careerist to attend the ACHE’s “Leaders Conference” in 2017 (the exact date and location are still TBD).

The Leaders Conference is designed for emerging health care leaders interested in boosting their leadership potential and career trajectory. This highly interactive two-day program features team-building exercises, insightful personal assessments, leadership coaching, individual leadership action plans and opportunities to network and share best practices with other forward-thinking health care leaders.

The MCACHE Competitive Process is open to early careerists (as defined by ACHE under the age of 40 years) who are MCACHE members and are active on a MCACHE committee as acknowledged by a letter from their council chair.

Applications need to be received via email to Ellie Heinrich (ellie@heinrichsearch.com) and Jim Aldrich (jim.aldrich@stjoeshealth.org) along with a statement answering the topic question: How does this conference complement your long range goals? (Response limited to 300 words)

A letter of support from the early careerist’s immediate supervisor and a letter of support from a C-Suite individual must be included with the application.

Applications will be accepted via email from 6 a.m. on Nov. 7 through 6 p.m. Nov. 18. Applications received early or late will not be accepted. Only the first 20 applications will be reviewed.

The Reviewing Group is composed of the chair, Career Development Committee, president Elect and a member of the MCACHE Board.

A final decision will be announced by January 16, 2017.
Welcome!

New Members
April
Daniela Bashllari, Canton
Catherine Fortney, Livonia
David Jaeger, Southfield
Matthew Piechocki, Highland
Paul W. Santoro, Bingham Farms
Mobashar Sharif, Wayne
Josephine Urban, Ferndale

May
Dan Cytacki, Plymouth
Kristia Faraon, Novi
Eric O’Neill, Rochester Hills
Kevin Quasarano, Detroit
Kenneth Sanger, Harrison Township
Scott Sersen, Brighton
Dana Snyder, Berkley
Todd K. Stonestreet, Howell
Christopher Struve, MD, Sterling Heights
Rami Ubaydi, Rochester
Heather Wilson, Ann Arbor

Recertified Fellows
April
Theresa Hendricksen, FACHE, Detroit
Manoj K. Prasad, MD, PhD, FACHE, Bloomfield Hills

May
Sr. Dorothy M. Thum, FACHE, Oregon
Mary Zuckerman, FACHE, Troy

June
Kimberly H. Bordenkircher, FACHE, Napoleon
John W. Fick, EdD, FACHE, South Lyon
Victoria Hollingsworth Schuler, FACHE, Royal Oak
Mark S. Somodi, PhD, FACHE, Tiffin
John Stout, FACHE, Perrysburg

Fellows
June
Vicki L. Kachmarik, RN, FACHE, Perrysburg
Paul A. Muneio, FACHE, Sylvania

July
James E. Aldrich, FACHE, Livonia
Anthony Colon Sr., FACHE, Dexter
Christina L. Watts, FACHE, Highland

Members who recently passed the Board of Governors Exam
April
Patricia J. Frank, Napoleon

May
Sarah B. Bannon, Waterford
Robin S. Damschroder, Ann Arbor
Kenneth LePage, Canton
Arturo Polizzi, Toledo
Mount Clemens, Michigan. McLaren Macomb provides a full range of services, including cardiovascular care at the Mat Gaberty Heart Center, award-winning cancer treatment at the Ted B. Wahby Cancer Center, comprehensive orthopedic and OB/GYN services and a state-of-the-art elective Surgery Center. The hospital is verified as a Level II Trauma Center and Primary Stroke Center and operates one of the busiest Emergency Centers in Macomb County. In addition to comprehensive inpatient care, McLaren Macomb offers outpatient facilities throughout the region, including diagnostic imaging centers, physical therapy sites, and a network of physician offices. Training more than 100 resident physicians annually, McLaren Macomb is a leader in graduate medical education and serves as a base hospital site for medical students from Michigan State University College of Osteopathic Medicine, University of Des Moines and University of Health Sciences College of Osteopathic Medicine. McLaren Macomb has a dedicated medical team, with more than 400 primary care and specialty physicians on staff, over 700 registered nurses and a range of experienced healthcare providers.

McLaren Oakland is a 338-bed teaching hospital in Pontiac, Michigan which provides primary and specialty healthcare for the Northern Oakland County community. Building upon its community roots as a small clinic, McLaren Oakland has grown to become a Level II Trauma Center, Accredited Chest Pain Center, and Primary Stroke Center. McLaren Oakland offers a highly rated orthopedic program, an advanced robotic surgery program and a comprehensive cancer program. In addition to facilities in Pontiac, McLaren Oakland has a wide range of clinical services in the Clarkston area, including diagnostic imaging, breast center, physical therapy, wound treatment services and a freestanding emergency center. McLaren Oakland primary care physicians are located throughout the area, including Waterford, Oxford, Ortonville and Clarkston. With more than 300 physicians on its medical staff, McLaren Oakland trains new physicians through several residency programs, including emergency medicine, family practice, general surgery, internal medicine, and more.
Thanks to all of our MCACHE sponsors

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MCACHE provides a local forum for the open exchange of information and viewpoints. In doing so, we help enhance the decision-making expertise and professional growth of the professionals with a major responsibility for healthcare management in southeastern Michigan and northwest Ohio – all while promoting the mission of the American College of Healthcare Executives (ACHE).

Contact MCACHE at:
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mcache.org

FOLLOW MCACHE ON:

We want to hear from you…

If you have suggestions or story ideas for the Newsletter, please contact:

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