

CAHL NOW



W I N T E R 2 0 1 9

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California Association
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An Independent Chapter of

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for leaders who care®

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A MESSAGE FROM OUR CHAPTER REGENT



ACHE Regent's Role

Regents are the elected representatives of ACHE members residing in a set geographic territory and are the primary liaison between ACHE, state and local ACHE Chapters, and healthcare associations in their jurisdiction. Regents are also the primary conduit for communications between ACHE higher education network student chapters (HENs) and ACHE. As the elected representatives of ACHE members, Regents serve as advisors within the ACHE governance structure to the Board of Governors.

Thank you for this opportunity to share this message as part of the California Association of Healthcare Leaders (CAHL) Winter 2019 newsletter. As we look to bring 2019 to a close and start another new year, welcome to all of our newest CAHL and ACHE members, hello again to our continuing members, and congratulations to those who have recently advanced to, and recertified, their Fellow status!

As we enter the winter and holiday season of 2019, now is a great time to reflect and give thanks for the incredible leadership CAHL and its members have modeled this past year. Our chapter and members have been leading by example – from where they are – via mentoring, networking, and education. A key benefit to being a CAHL member is the ability to expand one's network and knowledge base to other individuals, organizations, and sectors of healthcare. Through chapter activities, we are able to reach out to peers and solicit advice and counsel related to various topics of relevance in our own careers, including researching evidence-based strategies or current best practices. The ability to tap into the resources of our peers has not only improved understanding of how different organizations are tackling the challenging landscape of healthcare but also has resulted in collegial friendships and relationships.

I am continuously humbled to witness how our fellow CAHL members lead the charge to embody that change we wish to see in others and nurture the caring within our profession by getting involved in mentorship relationships. Whether it is seeking a mentor, becoming a mentor, having an informal coffee conversation, holding an informational interview, offering a one day shadowing opportunity to a peer, or advocating for the development and placement of a summer student or early careerist internship program, CAHL and the field of healthcare administration will only grow because of these efforts. We all have the ability to provide guidance and insight, regardless of where we are in our career path, and I encourage you to share your experiences with peers, senior careerists, mid careerists, early careerists, and higher education network students in high school, undergraduate programs, or graduate programs. Please visit the CAHL website [here](#) for more information on how to participate in the mentor program.

Related to this theme of leadership, I'd like to specifically thank and appreciate the CAHL Diversity and Inclusion Committee members (past and present) for modeling leadership through example via their work around diversity within our region. CAHL was

one of only five chapters that received the 2019 Regent-at-Large Award for Chapter Accomplishments in Diversity at the Chapter Leaders' Conference in Chicago in September. CAHL has actively modeled the commitment to, and the successful execution of, significant diversity and inclusion

“A key benefit to being a CAHL member is the ability to expand one’s network and knowledge base to other individuals, organizations, and sectors of healthcare.”

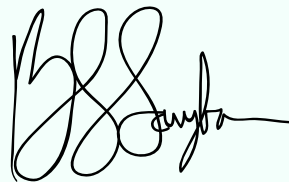
efforts in our chapter, our community, and the healthcare management field. In addition, CAHL was recognized for actively encouraging and supporting members of diverse communities to pursue leadership roles within the chapter and ACHE. This level of trailblazing leadership is truly something the entire Chapter should be proud of!

Thank you for the opportunity to offer this note on leadership to you this quarter. Whether related to leadership or any other topic, I would love to hear

from you so that I can better serve as an advocate for the membership and CAHL Chapter. Please do not hesitate to reach out to me at bsangha@alamedahealthsystem.org with thoughts, suggestions, challenges, and insights. Finally, I’m looking forward to seeing you all at the next CAHL event and also at ACHE’s Annual Congress from March 23-26, 2020, at the Hyatt Regency in Chicago. [Registration is now open, so please sign up!](#) Don’t forget to sign up for the the California statewide networking event hosted by CAHL, Healthcare Executives (HCE), and the San Diego Organization of Healthcare Leaders (SOHL) on March 22 as well.

Please refer to the CAHL website [here](#) for that forthcoming information on the networking event and other CAHL events near you!

With You a Successful Wrap to 2019,



Baljeet Singh Sangha, FACHE

A MESSAGE FROM OUR CHAPTER PRESIDENT



“Leadership is putting the people and mission ahead of myself. To win at all costs.”

This is a quote that I absolutely believe in from one of my mentors Jocko Willink, a retired U.S. Navy SEAL officer and co-author of the #1 New York Times bestseller book *Extreme Ownership*. When I think of leadership I think of Jocko. Although I do not personally know Jocko and he does not know me, I view Jocko as one of my mentors; his writings and podcasts have a significant impact on my leadership style and ability to live a disciplined life regardless of what comes my way. Good.

I highly recommend you read [Extreme Ownership](#) and listen to [Jocko Podcast](#) as part of your leadership journey. If there is one thing I hope you can take away from my writings and leadership this past year it would be to become familiar with Jocko. You will be a better leader and human being because of it.

It has been such a joy and absolute honor to lead CAHL as chapter president over these past twelve months. As a chapter member, you should know that you are part of a chapter that wins. A chapter that is viewed very highly

by ACHE and other chapters as a best practice chapter. You should know that the chapter is being led by a board of 25 of the most engaged, smart, creative, compassionate, and diverse members from our chapter membership. To put it simply, the leadership structure is comprised of members who “win at all costs.”

So, you might think how has the chapter won in 2019? Below is a list of the key accomplishments over the past year that have benefited our membership:

- Awarded the Diversity Award in Sept. at the ACHE Chapter’s Leaders Conference
- Awarded an ACHE Innovation Grant for our Live Stream event programming
- Organized the most chapter events in our chapter’s history at 38 events during the year
- Increased member satisfaction on every single question asked on the annual chapter survey
- Welcomed ACHE chair Heather Rohan at our Annual Awards event
- Provided free professional headshots at our Annual Award event
- Hosted an ACHE on-site “Choice” program
- Executed affinity collaboration agreements with all five ACHE affinity

organizations

- Awarded two scholarships to two healthcare administration students
- Launched the Regent's Advisory Council
- Created the Annual Conference & Awards Committee to help plan a new two-day educational conference for the chapter
- Achieved the "Advancement of Eligible Members" chapter indicator goal set by ACHE
- Completed a successful mentorship program
- Partnered with Healthcare Executives of Southern California (HCE) to offer a live stream statewide Learning from Leaders event with Adventist Health CEO Scott Reiner
- Created an annual report and quarterly newsletters

These are a few highlights from this past year that do not fully capture the day-to-day activities of the board. There are many more accomplishments that occurred this past for which I am thankful for. I am thankful for the board members and committee volunteers who give up their Saturdays in all-day strategic retreats to advance the chapter. At our December strategic retreat the board came together to organize an innovative two-day education conference and annual awards event. Instead of having numerous Face-to-Face events throughout the year, the board approved the motion to consolidate all 12 Face-to-Face events throughout the year into a two-day conference event in beautiful Monterey.

Please Save the **Date for August**

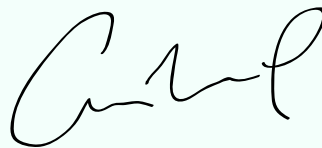
20th & 21st at the Monterey Marriott to attend the inaugural CAHL Congress & Annual Awards Event. More information regarding registration and the agenda will be communicated over the coming months.

As I transition into my new role as immediate past-president in 2020 please know that the chapter is well-positioned for continued success. Our succession plan is strong. I'm confident with Kim Brown-Sims' leadership at the helm, the chapter will continue to win and continue to provide value to our membership. I'm confident that the CAHL Congress & Annual Awards Event will be a resounding success. We have much to look forward to in 2020.

I humbly thank each of you, the members of CAHL and ACHE, who have supported the Executive Committee and Board for the work that we are doing. Thank you for making CAHL the best chapter within ACHE. We are truly blessed.

I leave you with another quote from Jocko. "Some days you will be the hammer. Some days you will be the nail. Either way. Build."

With gratitude,



Andrew Pete, MHSA, FACHE
Chapter President

RELATIONSHIPS IN HEALTHCARE

By: Maj. Steve Poe, Jr. USAF, MSC, FACHE

I won't bore you by giving my entire two cents on leadership (the requested topic of this article). I won't list what I think are the ten key ingredients to becoming a rock star leader. In fact, let's face it, I'm not even going to talk about "Leadership" itself. Search "leadership" books on Amazon. There are over 75 scrollable pages filled with them – most written by great minds and proven leaders – who will gladly take your money and do it for you.

But I do think there is a topic quite worthy of writing. Relationships. That's right. Relationships. I don't care if you're a healthcare executive in the military or the civilian sector. With them, you can move mountains. Without them, your success will only run so far.

It should be no surprise to anyone – we live in an incredibly complicated world. Healthcare is the epitome of complicated. You're a fool to try to tackle a single-day of it – alone. Yet, I've seen all-to-often, healthcare leaders underestimate the value of this incredibly powerful tool. Healthcare systems all over the country are birthing new C-Suite level positions to add increased focus to areas they value. Look around, we now have Chief Experience Officers (CXOs), Chief Learning Officers (CLOs), and Chief Transformation Officers (CTOs), just to name a few. But this article isn't about hospitals and health systems. Rather, it's about you. Whether your organization adds Chief Relationship Officer to the next list of C-Suite positions or not, cultivating "relationships" has to be one of the top priorities of ANY 'effective' healthcare leader.

I'm writing this article right now as a military healthcare administrator working at one of the most complicated deployed locations on earth. The place is occupied by every single military service, a whole host of coalition partner nations, contractors, DoD civilians, other governmental agencies, and the list goes on. Each organization owns something different; the processes you have to run through (although at times, it feels like a crawl) to achieve your desired end-state is simply dizzying. Take my word for it, as a deployed healthcare administrator trying to get anything done, while taxing, it's not impossible. It has been and will continue to be, only possible through the

“ It has been and will continue to be, only possible through the continual pursuit of key relationships across the entire location. ”

continual pursuit of key relationships across the entire location. Upon my arrival, I had two primary goals for my senior enlisted leader and me. Get to know our people; then, get to know those we want to be our people. The first two weeks it seemed like we weren't getting much done. We spent a majority of that

time shaking hands and exchanging business cards. We wanted to know how we could help them, and how they could help us. That investment of time, proved to be time well-spent. In the weeks to follow, we were able to pull off major projects and very time-sensitive, complicated tasks that crossed three and four very different organizations that we didn't know a thing about, only as a result of those fostered relationships. On more than one occasion, the person I invited to lunch the week earlier would ironically, and totally unbeknownst to me, be the one I'd ultimately need approval from to move a project forward for our organization. Here, much of what you want to do that costs any bit of money has to be presented each week to a board of senior leaders from different military services and organizations — a process more commonly known

here as Shark Tank. Try walking into the tank not knowing anyone, and prepare for the worst. Walk in knowing a few new friends you made a couple weeks earlier, and you have a fighting chance.

Now with the administration and management of all military healthcare falling under the Defense Health Agency, if you haven't started having lunch with your Army, Navy, or Air Force brethren, you're late to the party. As military healthcare becomes more and more integrated, relationships are now more important than ever. For my civilian healthcare colleagues (and I was there), while the fight for market share will always be an intense focus, cultivating relationships, even with the competition, can pay surprising dividends. At the end of the day, we all have a responsibility, civilian or military, to improve the health of others...we all serve.



LONG-TERM CAREER PLANNING: FOUR ESSENTIAL GUIDING PRINCIPLES FOR EARLY CAREERISTS

By: Navpreet Atwal

As an early careerist, planning your long-term career can seem like navigating a busy highway during rush hour. Knowing when to follow the steady flow of traffic or when to escape to the backroads can often leave you perplexed. As young leaders, understanding which factors can lead to success and the actions required to get on the right path are important. I set out to understand what experts recommend when it comes to career management. During my interviews, I gathered a series of lessons learned from the trials and errors of industry veterans' careers. The first and most important discovery is that no two leaders' journeys are the same. Each of them carved a unique path to reach their version of success. Keeping this in mind, we can apply their shared advice to best fit our own journeys.

Know Yourself, Know the Customer

As you begin down the path of self-discovery, knowing who you are personally and professionally will help display confidence to a prospective employer during an interview. Here's where the

“Knowing when to follow the steady flow of traffic or when to escape to the backroads can often leave you perplexed.”

Competencies Assessment Tool, located in the CAHL-CareerEDGE resource center, can help assess your level of strength in each of five critical domains: communication and relationship management, leadership, professionalism, knowledge of healthcare environment, and business skills and knowledge.¹ The assessment can be lengthy, so I recommend allowing yourself sufficient time to

work through and honestly answer each question.

Analyze the results to determine areas of weakness and possible causes. Do you lack exposure in your role? Did you score low in teamwork because you're an individual contributor? For any weakness, consider joining an interest group to improve the skill or taking advantage of the recommended articles and self-study courses in the assessment. The results of this assessment also help identify areas of talent that you should continue to strengthen.

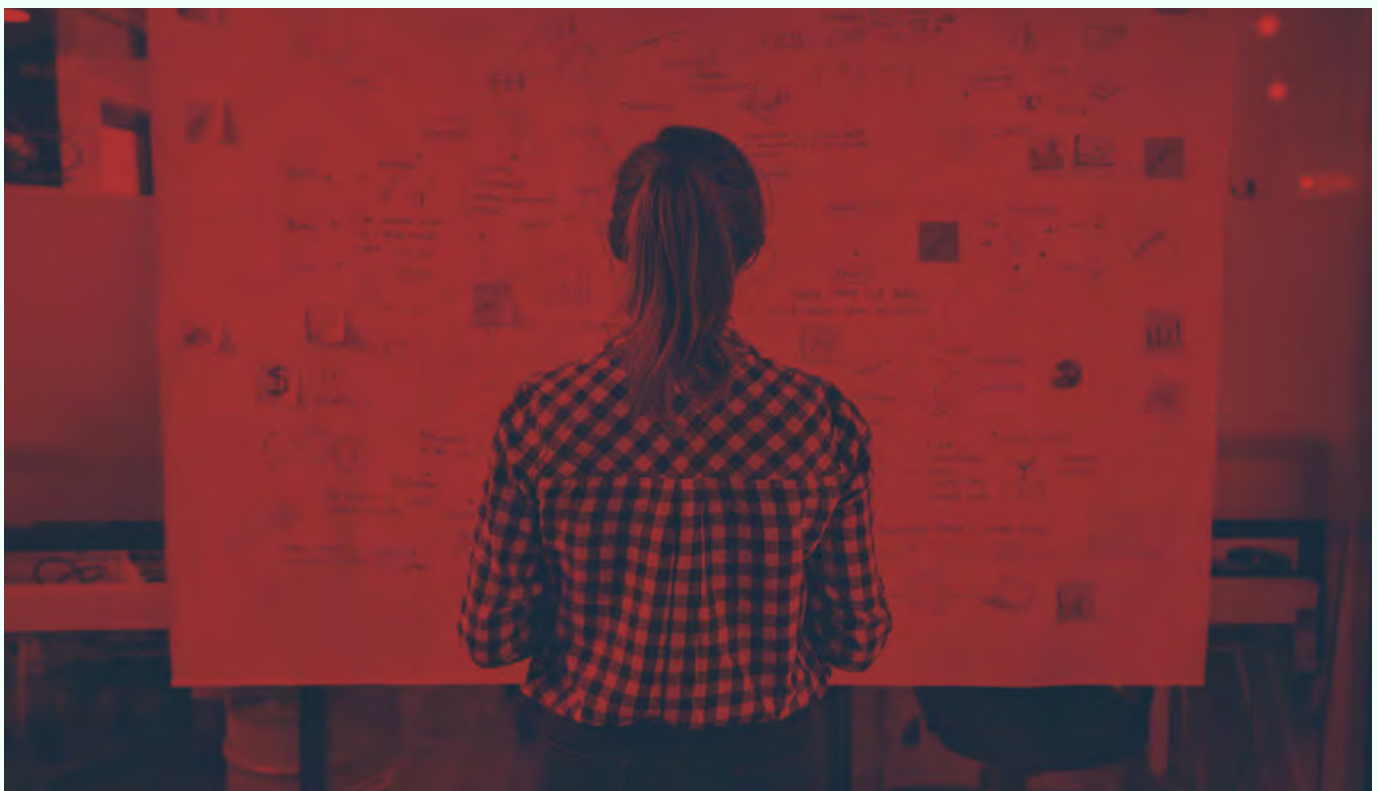
Anton Gunn, chief diversity officer and executive director of Community Health Innovation at Medical University of South Carolina, recommends aligning talent with areas of passion to lead a lifelong career filled with purpose.² So, how do you set yourself apart from the competition in order to land the position at the crossroad of passion and talent? Michael Broscio, director of ACHE Career Resource Center, says it takes more than knowing your strengths. Broscio explains that knowing the needs of your employer is “equally important as knowing yourself and your abilities.”³ In today's competitive marketplace,

being a good listener can set you apart because it helps you to gather and understand the demands of employers and the market.³

Look at your resume or cover letter to determine if you are effectively communicating how you can deliver on an employer's needs through your relevant experience. Michael J Corey, Partner at Phillips, DiPisa, and Associates, adds that candidates should reflect on their portfolio of capabilities in order to “demonstrate the impact they have made not only in their division but also on their organization as a whole...demonstrating to the employer that they have what it takes to make a difference in a new organization.”³

Inventory your accomplishments by trying Broscio's “listen to the market” exercise. By guiding you in performing a gap analysis between job descriptions and your qualifications, this exercise can help in updating your resume or building a development plan.

I also recommend keeping a running list of your accomplishments and reviewing it often. Start by listing all



the major responsibilities of your role or extracurricular activities in a single column. For example, your role may require you to successfully complete a project within budget. In the next column, write every action taken to complete that responsibility. Convert each action taken into value delivery for your department. At the completion of a project, you may include “successfully completed project 321, two percent under target budget, resulting in savings of \$50,000.” By using this tracking method through year-end, you can discuss your accomplishments and how you helped to move the dial in your department and organization by delivering measurable value.

Master the Job, Plan for the Long Run

To stay valuable in the dynamic job market, you need to sharpen the existing tools in your tool belt and add new skills. Broscio says, “Success requires being proactive and changing with the market. To stay ahead of the curve in a changing market, listen to the market and be prepared to adapt when the right opportunity presents itself.”³

Staying relevant in the market with technical and non-technical information will validate you as a subject matter expert. It also establishes you as a credible relationship builder, collaborator, and solution finder. As you master the job, continual growth will give you an edge and get the right people to notice you.

Laura Perez Ehrheart, CEO of Epiphany Consulting Solutions, confirms the importance of staying relevant while mastering your job: “Unless you work in a fishbowl, you need to demonstrate capabilities such

as good decision making, emotional intelligence, critical thinking, and people skills. Moreover, make sure your information, data, perspective, and knowledge are current and in alignment with your department and company goals.”

Leverage Relationships

For many early careerists, networking has a negative connotation. It is often viewed as attending long-distance events to collect business cards without knowing how to leverage the newly formed connections. To make it easy, John E Green, Jr., president and partner at Aegis Group Search Consultants, LLC, advises early careerists to keep it simple: Approach any networking opportunity with the primary goal of expanding your professional network beyond your peers.²

As Kate Best and Steve Lindsey, principal at Ivy Ventures, LLC, explained, a professional network is “really a group of people that support you throughout your career.”⁴ My professional network consists of mentors, sponsors, professional idols, and friends. Building a professional network is not easy; it requires consistency, genuine interest, and nurturing simple connections into true relationships. Tailor your networking efforts to fit your own schedule and goals.

Start easy by asking to serve as a volunteer on a committee of a professional organization, such as CAHL. When ready, increase your involvement by regularly attending events related to your career aspirations or those hosted by your professional idols. Perez Ehrheart advises early careerist to join an audience of decision makers and influencers who may champion their career growth.

If attending networking events is unnerving, explore the option of finding a mentor or sponsor who is willing to attend the event with you and positively coach you throughout the process.

As you grow your network, be sure to maintain the health of your existing relationships. To grow an existing relationship, consider asking an inspirational leader to be your mentor or sponsor. It is important to remain visible; don’t be afraid to put yourself out there.

Anil Kasinadhuni, manager at Kaiser Permanente, shares that some managers can be excellent sponsors in the workplace as they may advocate on your behalf, connect you to projects beyond

“Building a professional network is not easy; it requires consistency, genuine interest, and nurturing simple connections into true relationships.”

your current scope of responsibility, and introduce you to people outside your network.

Today, most mentoring relationships are causal and mutually benefit both parties. Experienced leaders are looking to help young leaders grow, and you can help them by showing genuine interest in their career and experience.⁴ Introduce your mentor to new technology or help him/her achieve a professional or personal goal by, for example, sending them relevant articles. If you are interested in formal or informal mentorship, consider joining

CAHL's mentor program.

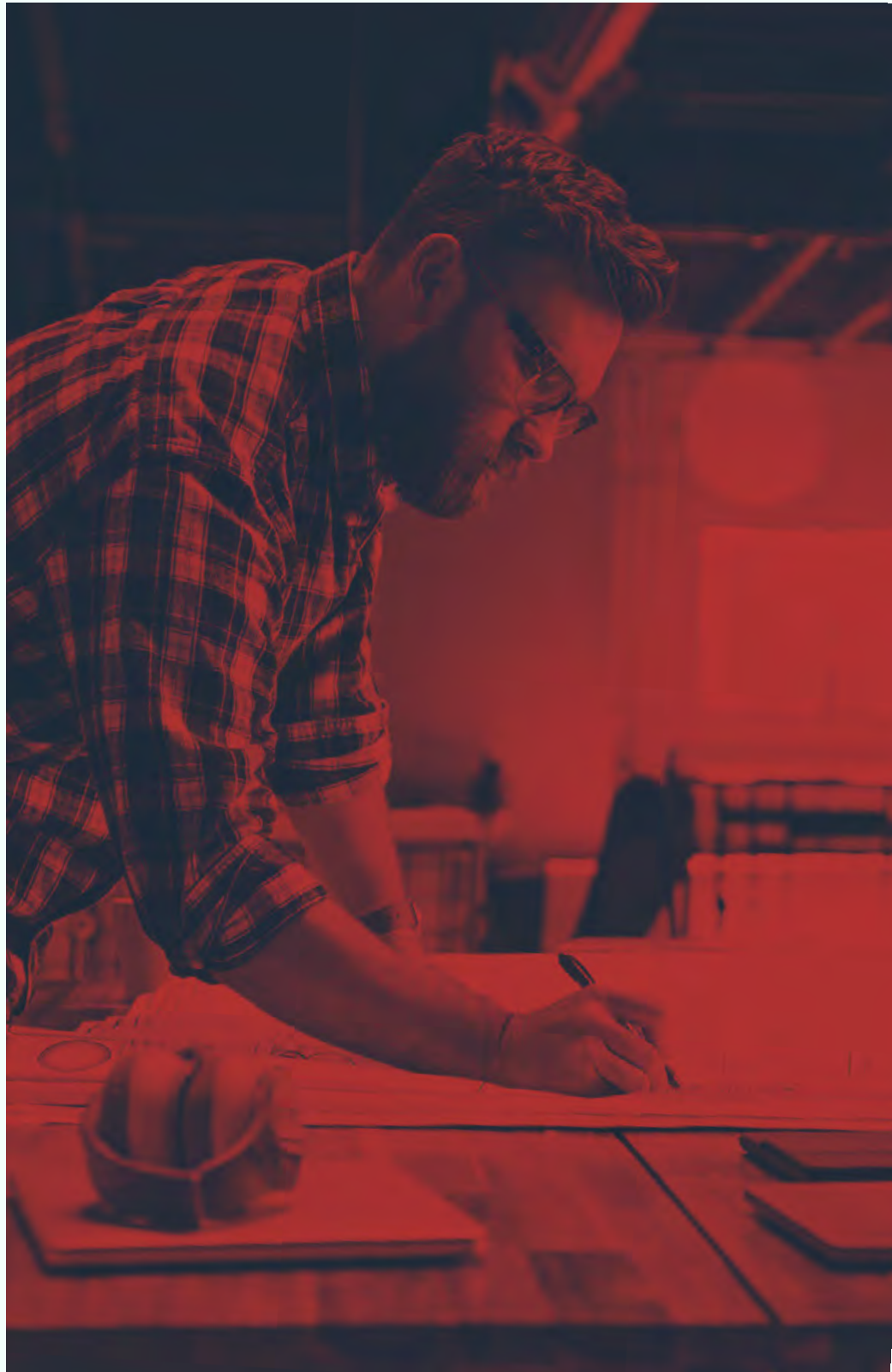
By demonstrating an interest beyond those with whom you interact daily, you will both create a strong professional network and increase your exposure and understanding of outside functions and industries. Remember that relationships are vitally important throughout your career, so continue to build them – always.

Gain Visibility

As you build your professional network, be conscious of cultivating a positive reputation that will proceed you. Former President and CEO of PepsiCo, Indra Nooyi, in her interview at the 2019 Women in the World Summit, presented the audience with one piece of advice to start: Be known for something, and deliver on it each time.⁵ For Nooyi, it was being known as the “get it done” person. Whether it was related to her area of expertise or not, PepsiCo colleagues and leaders could depend on Nooyi to go the extra mile to figure out the problem and deliver a solution. This created a strong reputation of dependability for Nooyi, which later helped her in chairing the seat of CEO for 12 years. Building a strong positive reputation should be balanced with getting sufficient visibility in the organization.

Executive Diversity Career Navigator (EDCN), a project created by six of the nation's top diversity advancing healthcare organizations, outlines four key methods in gaining visibility.

- › **Lead organization-wide activities:** Most organizations offer resource groups in which employees can demonstrate



leadership skills outside of their position. These initiatives showcase your skills and serve as an opportunity to expand your network and gain visibility to senior leaders. Explore the options available to you while identifying the extracurricular activities that increase the value you provide to your department or team. You should make your manager aware of the time commitment and not allow the activity to hinder your overall performance.

- › **Distinguish yourself from peers:** As mentioned earlier, personal development is the key to distinguishing yourself from your peers and the antidote to complacency. Personal development can propel your career forward when you adopt the mindset of continuous improvement of your technical and soft skills, otherwise known as your value proposition.

One of the soft skills Nicholas Tejada, market chief executive at The Hospitals of Providence, urges early and mid-careerists to tackle is communication.² This ranges from ensuring your verbal and written messages are carefully crafted and error free to refining other ways you may be sending a message, such as with your choice of clothing and body gestures. Best and Lindsey note, “Leaders are often responsible for delivering messages and conveying ideas in a way that is easily understood by all parties.... Remember to explain the ‘why’

as it clarifies the driving forces behind organizational decisions and actions.”⁴ Lastly, show respect to your audience by being transparent and following through with your commitments.

- › **Develop a personal brand:** Early careerists today are familiar with using social media to showcase a personal brand. As defined by Dr. Reed Morton, your personal brand “effectively communicates your distinct value and sets you apart from your competition. Your brand is effective when it becomes the means through which people seek your knowledge, expertise, and talent.”⁶ He adds that your brand should be consistent across all platforms and in all types communication. Moreover, your brand should be maintained by keeping yourself in view with your target audience. Remember that almost all activity is discoverable, and you are an extension of your organization’s brand.
- › **Shift the conversation with upper management:** Often, engaging in small talk with upper management results in repeated recounting of exciting events of the weekend. Giselle Galper, a graduate of Stanford Law and business strategy executive, stresses shifting the conversation to discussing career, academic, and personal ambitions. Managers and senior leaders tend to have long-standing commitments in and outside of the industry and may be able to support you by connecting you to the right individuals and development opportunities, providing mentorship, or guiding your course of action.

Whether you are graduating soon or have been in the workforce for several years, remember that career development is a continuous journey. It requires you to stay consistent and dedicated to building new skills and growing your professional network. As you begin to advance in your career, some advice shared in this article may no longer be relevant. Some skills, such as communication, will always need to be nurtured for improvement. Start to refine your skills and competencies early in your career in order to capitalize on them in later years. Lastly, as you progress in your career, be sure to reach down to lift other early careerists as your mentors and sponsors did for you.

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Like our page

The screenshot shows the Facebook profile page for the California Association of Healthcare Leaders (CAHLACHE). The page features a cover photo of a city skyline with the Transamerica Pyramid. The profile picture is the CAHLACHE logo. The page includes a navigation menu on the left with options like Home, About, Photos, Events, Videos, Notes, Posts, Community, and Info and Ads. The main content area shows a 'Create Post' section with a 'Write a post...' prompt and options for adding photos, videos, tagging friends, and checking in. Below this is a 'Photos' section with a photo of a group of people at a social event. On the right side, there are sections for 'Community' (450 likes, 452 followers), 'About' (website: cahl.ache.org), and 'Related Pages' (including Prodigy Nights, DJ Arvin, and Residential Assisted Living).

HEALTHCARE LEADERS AND PHYSICIANS WORKING TOGETHER IN A CHANGING LANDSCAPE

By: Susan Christy, PhD; Sheryl Vick, MPH; and Nancy Dill, MBA

Physicians and the healthcare teams that support them are riding the wave of change in US healthcare – and the path forward is not always clear.

Change in healthcare can take many forms. The focus may be on clinical integration, whole person care, or population health. It may involve paradigm shifts such as the transition from physician-centered to patient-centered care or from fee-for-service to value-based payments. Successful navigation of these new frontiers requires mutual understanding, collaboration, and goodwill among all professional groups.

Physicians have many partners in healthcare, including leaders in central administration, medical department administration, nursing, operations, finance, research, human resources, and information technology. Although their training and experiences are different, healthcare leaders are uniquely positioned to facilitate change management. They can support – even lead – the change process. They are more likely than physicians to appreciate the myriad perspectives, priorities, needs, and concerns of a wide range of stakeholders and can help keep the patient at the center of care.

Healthcare leaders are relationship builders. They usually collaborate well with physicians and can endorse a shared purpose. For example, they can:

- Increase inter-professional understanding and appreciation;

“Leadership skills, familiarity with healthcare systems, and experience working with faculty can help leaders manage change and ease the transition woes of physicians.”

- Share best practices for working with diverse stakeholders;
- Expand their understanding of what healthcare change means for themselves and combat the disorientation, uncertainty, and resistance that is brought to bear with dramatic change;

- Expand their understanding and empathy for what healthcare change means for other constituents – physicians, patients, and other stakeholders;
- Proactively collaborate on change management by sharing examples and success stories from the varied organizations that are represented by ACHE members; and
- Anticipate the inevitable misunderstanding, fear, and resistance that change brings, easing the way for themselves, physicians, staff, and patients alike.

Understanding Physicians to Facilitate Change

Misunderstandings and tension between physicians and healthcare leaders are endemic in the medical system. Physicians have very different backgrounds, requirements, and outlooks from these leaders. What may be a priority for one may be an interruption or burden for the other. Physicians are more likely to partner with leaders who:

- Present themselves as competent

and confident,

- Convey their understanding of physicians and what they need,
- Figure out how to add value from each physician’s point of view, and
- Plan their communication to fit each physician’s communication style and best timing.

Table 1, developed over two decades of working with leaders in academic medicine, provides insight into some of the dynamics of physician-administrator relationships. A note of caution: The chart contains generalizations that don’t apply to every individual.

First, while there are areas of overlap, individuals tend to choose their career paths based on their strengths. Each may assume the other “should” approach things the way they do and experience frustration when they do not.

Second, physicians and healthcare leaders have very different criteria for rank, compensation, and promotion. Physicians’ rank, title, tenure/non-tenure status as well as criteria for faculty promotion (academic medicine) are unlike other leaders’ job classifications, reporting relationships,

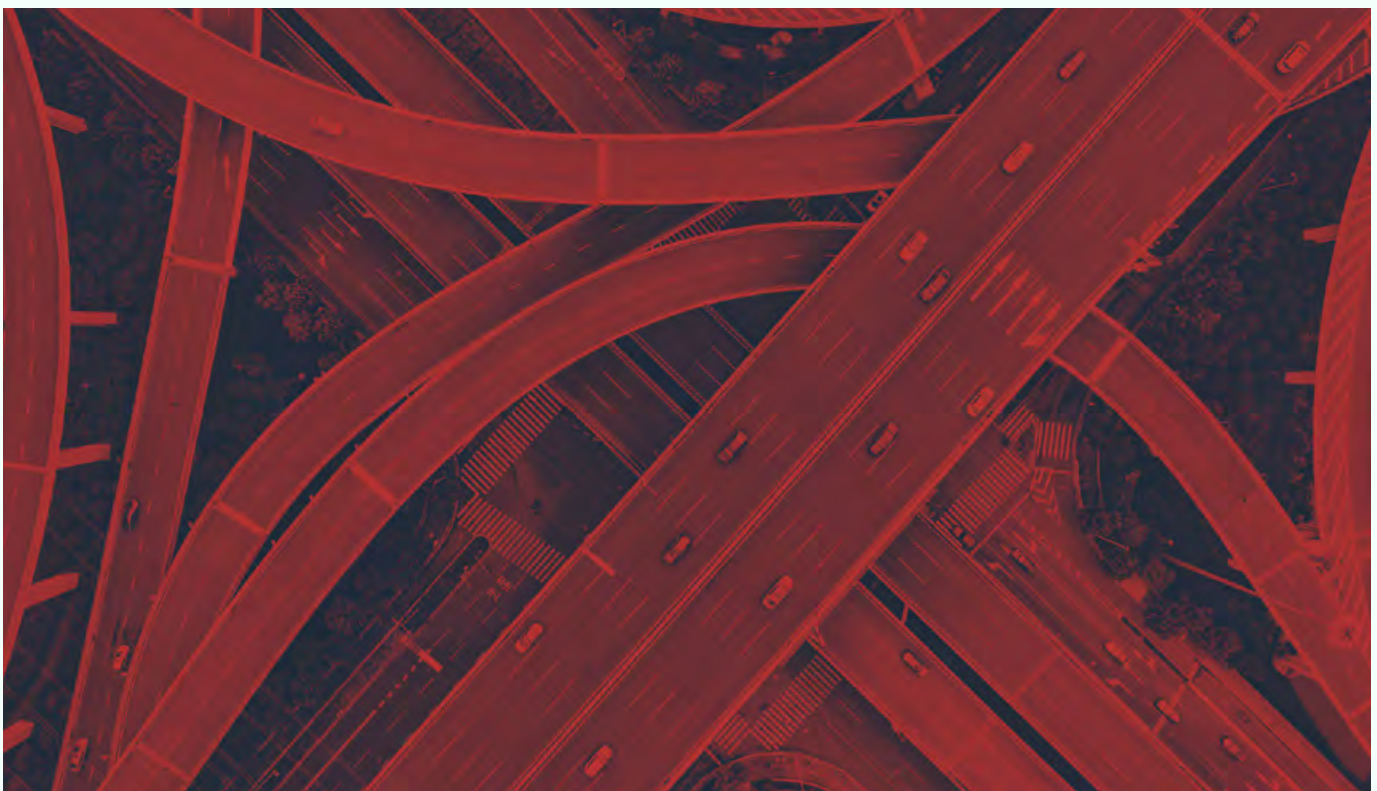


TABLE 1. PHYSICIANS AND ADMINISTRATIVE LEADERS ARE DIFFERENT FROM ONE ANOTHER

Characteristic	Medical school and health care system physicians/ researchers	Medical school and healthcare administrators and managers
Strength	Recognized experts in their specialty; medical practice; research and publication in prestigious medical journals; passionate hard-workers; action-oriented and results-motivated; focused on day-to-day achievement and excellence	Organizational navigators; managers of processes in arenas of patient care, research, finance, education, resources, and strategic growth; strong communicators; motivators who positively influence people/teams to maximize their strengths while minimizing conflict; relationship builders; emotional intelligence
Background (training)	Specialized graduate and medical education; usually not formally trained in leadership, business, or communication – learned “on the fly”; success in competing for tenure and top rank, grants, and publications in best journals	Educated in a variety of fields; specialized training in business, clinical or research administration, science, technology, on-the-job training; advancement through promotions and increasing responsibility
Seek to understand	Knowledge, skills, and advances in their medical specialty; cutting edge concepts and techniques; technology	How to get things done given procedures, resources, and people; the medical specialty of the physicians they support; leadership in the medical school and hospitals; what’s going on in the organization and across the health system
Work style	Entrepreneurial; work many but not necessarily scheduled hours; high standards while balancing competing priorities of clinical, research, education and leadership duties; demand excellence from themselves and others; extramural activities and travel	Team players with scheduled workdays; frequent interruptions and meetings; balancing availability to staff and physicians with getting work done; planners – both strategic and day-to-day
What they manage	Patient care; their own research funding, writing and publishing, mentoring and teaching, and career/reputation; dedicated time for individual and team science research/publication	Organizational change, implementation processes, risk management, people, projects, budgets, departmental/ interdepartmental relationships
Approach to implementation	Results-oriented; may see implementation/ administration as the “easy part”; may not know about procedures and how to mobilize resources; may want implementation to “just happen” without their involvement	Know how to mobilize resources and follow procedures; adapt their approach and communication to each individual physician; creatively “work” their network of relationships to achieve results; may lack insight into faculty members’ challenges/stressors

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and opportunities for career advancement. Physicians’ compensation criteria do not include teamwork and collaboration with healthcare leaders and staff members. Leaders get frustrated when their project timelines and urgent requests do not align with physicians’ priorities.

Furthermore, physicians’ work is often invisible to healthcare leaders. Physicians carefully dedicate time to keep up with their medical specialty, apply for grants, conduct research, and publish (especially in academic medicine).

Likewise, healthcare leaders’ work is often invisible to physicians. Physicians are often not aware of how long things take or how many departments and multidisciplinary teams are needed to make a decision or implement a plan.

Helping Physicians Appreciate Different Professional Orientations

Leadership skills, familiarity with healthcare systems, and experience working with faculty can help leaders manage change and ease the transition woes of physicians. Here are a few ideas:

- › Know what is important to physicians – what drives them, what rewards them, what inspires them to action. Plan communications that appeal to their values (not yours) – excellence in patient care, scientific discovery, and reputation. In academic medicine, physicians/researchers may be passionately focused on making scientific or medical

breakthroughs. They may consider a small cohort of specialists from other institutions to be their most important colleagues. Local administrators' requests and institutional procedures may be perceived as low priorities.

- › Know what frustrates and provokes physicians. Examine the amount of administrative burden “change solutions” invite into a process. Find ways to reduce administrative burden for both physicians and healthcare leaders.
- › Understand that physicians want to work with skilled personnel. Physicians want to focus on what they do best, and they are generally comfortable leaving others to do what they do best. Demonstrate your expertise and work out a division of labor in the partnership. Also, orient and train your staff to understand physicians and adopt best practices for working productively with them. Because physicians respect competence and confidence, coach your staff to present themselves as respectful colleagues who can make meaningful contributions to a process or product.
- › Adapt to physician workstyles. They may be more focused on their scientific/medical field and more task-oriented than people-oriented. Getting their time and attention can be a creative endeavor. It may help to remind them why you are seeking their expertise or counsel.
- › Improve listening and emotional attunement to physicians as they grapple with the demands of patient-centered care. Healthcare leaders often understand physicians' interpersonal skills and can broker effective communication.
- › Understand hospital “systems” to help physicians and other groups improve patient outcomes and community health.
- › Obtain appropriate input from physicians at the start of new initiatives. Because many groups are generally one step removed from direct patient care, leaders need to understand and support physician aims and concerns in a changing healthcare landscape.

- Involve physicians in formulating new initiatives, and seek creative ways to encourage their participation;
 - Find agents who can represent physicians' interests and concerns to central administration; these administrative leaders may exist in academic departments and can help craft initiatives that impact faculty; and
 - Encourage healthcare leaders to join committees to share their perspectives and insights about physicians' needs.
- › Realize and implement the broad-based skills and expertise you bring to “change management” situations. Assist physicians in areas where you have knowledge and can ease their way forward.
 - › Tap into existing experience and available data to find opportunities to improve processes.
 - Identify barriers to physician success, including resource constraints, over-booking, long clinic wait times, or bottlenecks for certain services, and
 - Work with administrators, staff members, and faculty to improve systems and processes that support efficiency and patient satisfaction.
 - › Educate and orient faculty about changes in policies and procedures; manage their expectations and anticipate their resistance and requests. A shift from physician-centered care to patient-centered care can be daunting.

Although building strong partnerships with physicians may feel challenging at times, it is more important than ever as we address new payment models, emerging care pathways, and a culture of continuous improvement. The key to achieving mutual respect is to appreciate the differences in preference, style, and tone of each professional while capitalizing on their unique strengths. At the end of the day, both physicians and healthcare leaders want to provide high-quality healthcare for everyone. Healthcare professionals (including ACHE members) working skillfully with physicians is a means to that end.

VOLUNTEER SPOTLIGHT



Name, CAHL Committee, how long they've served on that committee, employer and title:

Gary Krboyan, Central Valley LPC, almost three years, St. Mary's Hospice Services, Executive Director

Describe the nominee's commitment to volunteerism with CAHL/ACHE:

Gary Krboyan has spearheaded many events and outreach efforts in the Central Valley as the Central Valley LPC Co-Chair. His efforts have been essential in revitalizing our programming in the Central Valley area.

Describe the nominee's recent outstanding accomplishments and how they've positively impacted our chapter:

Gary helped organized the first remote face-to-face event for CAHL and has helped strengthen the relationship with the University of Phoenix. Gary's perseverance and focus on engaging CAHL members in the Central Valley has led to successful networking, qualified education, and face-to-face events in the Fresno area.

Interview with Gary Krboyan

How has volunteering with CAHL contributed to your personal/professional life in a meaningful way?

Volunteering with CAHL has helped me grow and develop both personally and professionally. Personally, I have gained great ability to communicate better, to present better, and to improve my moral compass. Professionally, I have gained great ability to collaborate better with my staff/others, to motivate those who look up to me for guidance and direction, and to network with other leaders and aspiring leaders in our field. Why do you continue to volunteer with CAHL? I am a believer that healthcare executives, like myself, who are fortunate enough to have the level of education we do and are given the opportunities to lead have an obligation to society to share our knowledge and experiences with those who aspire to be leaders one day.

Why did you choose a career in healthcare administration?

My career in healthcare began in the marketing and business development arena. After a short while, I realized the positive impact our organization made in the community, which led to my decision of staying in healthcare for the long run. My leadership role officially started when I became the director of business development for our Home Health program. A few years down the road, I completed my master's in business development from Craig School of Business, and together with our company, we decided to grow our continuum of care model by adding a hospice program. It was at this time I expanded my leadership role to executive director of our hospice program.

A motto or quote that influences your leadership style:

"If your actions inspire others to dream more, learn more, do more and become more, you are a leader." – Former US President John Quincy Adams



Name, CAHL Committee, how long they've served on that committee, employer and title:

Richard Narad, Advancement Committee and former longstanding Treasurer for CAHL, 6 years, California State University Chico, Professor and Vice-Chair, Department of Health and Community Services

Describe the nominee's commitment to volunteerism with CAHL/ACHE: Rick has gone above and beyond as an Advancement Committee Member and member of our BOG Workshop Faculty. He re-designed several sections of the BOG workshop and willingly contributed his expertise as a university professor to make the CAHL workshops an example of what an ACHE clubs can do to provide educational value and advancement encouragement and assistance to their members.

Describe the nominee's recent outstanding accomplishments and how they've positively impacted our chapter: Rick has re-designed presentation sections to incorporate adult learning concepts, updated multiple sections of the presentation, and regularly facilitates several sections of the BOG workshops.

Interview with Richard Narad

How has volunteering with CAHL contributed to your personal/professional life in a meaningful way? In the early days of CAHL, it was like any start-up, and it was fun to see it evolve (e.g., moving the financial reports from a shoe box to Excel). Looking back at those days and seeing where it is now, it shows what an amazing and dedicated group of people can accomplish. I appreciate the opportunities that CAHL gives my students who are about to embark on their careers. Chico State's linkage with CAHL's board and members has benefited our program and our students.

Why do you continue to volunteer with CAHL? When I decided to cycle off the CAHL board I didn't want to move away from the organization. Working with the Member Advancement groups gives me a chance to help people who are preparing for the Board of Governors' exam. It's really satisfying to spend a day with a group who want to go above and beyond and are putting in the work it takes to become a fellow. As a faculty member, part of my job is "service to the profession," and working with CAHL helps me to do this.

Why did you choose a career in healthcare administration? I got into administration in a weird way. I was a firefighter in the early days of prehospital emergency medical services. I decided that I wanted to go to paramedic school and was heading in that direction when I had a 3 am epiphany that, while I was having a good time, I probably wouldn't want to do this for the rest of my life. I felt lost about what I did want to do instead, so I took several career-interest tests. They came back with me being strong in healthcare (which made sense) and strong in administration (which was a surprise). I put the two together and found an undergraduate program in healthcare management and have been in various roles—manager, consultant, teacher, researcher—ever since.

A motto or quote that influences your leadership style: From a fire chief I worked with early in my career: "Lead, follow, or get out of my way."

VOLUNTEER SPOTLIGHT



Name, CAHL Committee, how long they've served on that committee, employer and title: Connie Addy, Sacramento LPC, nearly one year, Mercy Medical Group

Describe the nominee's commitment to volunteerism with CAHL/ACHE: Connie has been a fantastic addition to the Sacramento LPC. Connie has been willing to help at any event needed this year and continues to see opportunities to serve the chapter. Additionally, Connie has been willing to attend events even when she is not

volunteering.

Describe the nominee's recent outstanding accomplishments and how they've positively impacted our chapter: Since she joined last winter, Connie has helped at over 7 events (networking and education) in the Greater Sacramento area. She has been willing to come at a variety of times, days of the week, and serve in many roles. She has been vital to the success of the events from the marketing to event setup/breakdown.

Interview with Connie Addy

How has volunteering with CAHL contributed to your personal/professional life in a meaningful way? Volunteering for CAHL has been an amazing experience. I have made many meaningful friendships and gained valuable knowledge. It is very inspiring to be surrounded by so many accomplished people who are encouraging and believe in you. Through this encouragement, I have had the opportunity to grow and become confident in myself.

Why do you continue to volunteer with CAHL?

I volunteer with CAHL because it continuously teaches me something new about people. I am able to surround myself with people who are ambitious and accomplished.

Why did you choose a career in healthcare

administration? There are few professions where you can touch the lives of others and make a difference in them the way you can in the healthcare industry.

NATIONAL NEWS | Q4

LET US BRING THE EXPERTS TO YOU

Choice is ACHE's tailored professional development series designed to close competency gaps and meet individual educational needs within your organization. Choice programming offers professional development that is convenient and with a cadence that works best for your group. These programs, categorized in a meaningful way, focus on topics that affect executives and leaders in the healthcare field. During the planning phase, you have options for who, what, where, when and how programs are tailored. Additionally, every program is led by a respected ACHE expert speaker, facilitator or author possessing a real-world perspective.

Whether you are interested in hosting a single or multi-day program, or already have existing leadership development but want to enhance your programming, let us know. Visit [ache.org/Choice](https://www.ache.org/Choice) or contact Catie L. Russo, program specialist, ACHE Department of Professional Development, at (312) 424-9362 or crusso@ache.org for more information.

CALL FOR PROPOSALS: MANAGEMENT INNOVATIONS POSTER SESSION

ACHE invites authors to submit narratives of their posters for consideration during the 36th annual Management Innovations Poster Session to be held

at ACHE's 2020 Congress on Healthcare Leadership. This is a unique opportunity for authors to share the innovative work their organizations are doing with other healthcare leaders.

We are interested in innovations addressing issues affecting your organization that might be helpful to others, including improving quality or efficiency, improving patient or physician satisfaction, implementation of EHRs, uses of new technology and similar topics. All accepted applicants are expected to be available to discuss their posters on Monday, March 23, between 7–8 a.m. Posters will remain on display March 23–25 at Congress. Please go to [ache.org/CongressPosterSession](https://www.ache.org/CongressPosterSession) for the full selection criteria. Submit narratives as an email attachment to PosterSessions@ache.org by Jan. 21, 2020.

ENCOURAGE YOUR MEMBERS TO APPLY FOR FACHE®

The importance of earning the distinction of board certification as an ACHE Fellow cannot be overstated. Encouraging your chapter members to take the next step in advancing their career by achieving Fellow status benefits their professional goals. It also benefits the healthcare management profession in general as it demonstrates a healthcare leader's competence, leadership skills and commitment to excellence in the field.

The Board of Governors Exam is the final step on

the journey to recognition. Applicants who pass the Exam and successfully meet all other requirements by Dec. 31, 2019, will be eligible to participate in the Convocation Ceremony at the 2020 Congress on Healthcare Leadership.

ACCESS COMPLIMENTARY RESOURCES FOR THE BOG EXAM

ACHE offers complimentary resources for Members beginning the journey toward board certification and the FACHE® credential. These resources are designed to help them succeed so they can be formally recognized for their competency, professionalism, ethical decision making and commitment to lifelong learning.

The [Board of Governors Exam Outline](#) is the blueprint for the BOG Exam. Every question on the Exam is associated with one of the knowledge or skill statements found in this outline. The [Reference Manual](#) includes a list of recommended readings, test-taker comments and study tips. Additional resources include a 230-question [practice exam](#) and [answer key](#).

FACHE overview webinars provide a general look at the advancement process. Participants will learn how the FACHE credential can earn them the distinction of being the best of the best in healthcare management. The webinars cover the requirements, application process, BOG Exam, study resources and maintenance requirements. Plus, participants have the opportunity to ask questions about the advancement process. An upcoming session is scheduled for Dec. 12. Register online [here](#).

Additional resources designed to supplement other available study resources are available as well. These include the [Board of Governors Review Course](#), [Online Tutorial](#) and [Exam Study Bundle](#).

RECENT GRADS: FELLOWSHIP OPPORTUNITIES AT THEIR FINGERTIPS

After graduating from a master's degree program, a postgraduate administrative fellowship can give students and early careerists the competitive edge needed to succeed in their career. A fellowship enhances existing skills in a low-risk setting and provides valuable exposure to the healthcare management field.

The [Directory of Postgraduate Administrative Fellowships](#) is up-to-date, easy to use and free. Recent graduates can use it to review and apply for fellowships around the United States that interest them. Each listing includes application deadlines, the program description and instructions on how to apply. In addition, a variety of other resources are available at [ache.org/PostGrad](https://www.ache.org/PostGrad).

FIND NEW OPPORTUNITIES WITH ACHE'S JOB CENTER

Did you know you can apply for healthcare management positions quickly and easily with [ACHE's Job Center](#)? This member-exclusive resource allows you to search through nearly 1,800 open positions across the U.S. based on preferences such as location and desired salary. We also have internships and fellowships available to help students and recent graduates navigate new opportunities. To gain more exposure to potential employers, all members have the option of posting a resume for review. To provide additional value, the Job Center offers a [Career Learning Center](#) to help you enhance your resume and leave a lasting positive impact during your next interview. To take advantage of these resources and more, visit [ache.org/JobCenter](https://www.ache.org/JobCenter).

VISIT US ONLINE



The screenshot shows the homepage of the California Association of Healthcare Leaders (CAHL). At the top, the browser address bar displays 'ache-cahl.org' and the phone number '(916) 281-9415'. The CAHL logo is prominently displayed, along with the text 'An Independent Chapter of American College of Healthcare Executives'. A navigation menu includes links for HOME, ABOUT US, NEWS, MEMBERS, CAREERS, SPONSORS, MEDIA, EVENTS, and CONTACT. Below the navigation is a large image of a diverse group of healthcare professionals in business attire. The main heading reads 'California Association of Healthcare Leaders'. A blue banner below the image features the American College of Healthcare Executives logo and the text: 'Serving healthcare executives throughout Northern and Central California, we advance excellence in healthcare leadership and improving the lives of the communities we serve.' A 'Learn More About Us' button is positioned to the right. The lower section of the page is divided into three columns: 'Welcome to CAHL' with a 'Discover the ACHE' button, 'We Create Dynamic Leaders' with a 'Learn About Us' button, and 'Upcoming Events' with a 'View Upcoming Events' button. The footer contains two red call-to-action boxes: 'Want to take your career to the next level? Become an ACHE member today!' and 'Attention ACHE CAHL student members! Learn about our Scholarship Program'.



ARTICLES OF INTEREST | Q4

LEARN THE ART OF DIALOGUE AND HAVE OPEN, PRODUCTIVE CONVERSATIONS

Open and productive conversation is absolutely critical in today's high-velocity business environment. If our conversations go nowhere, failure will quickly follow.

The problem is that most of us think we are having conversations when we really are not. We often participate in one-way conversations—essentially monologues: I tell you what I want to tell you. You tell me what you want to tell me (or you tell me what you think I want to hear so I'll leave you alone). We excel at taking turns talking, but neither side is exploring and discovering and building on what is being said. When this happens, the promise of a new discovery or breakthrough is lost. So we aren't solving problems and are often creating them.

There is a difference between what typically passes for conversation and true dialogue. If two people are engaged in a dialogue, at least one of them can dependably benefit from the other's experiences. That is why it is important to learn the art of dialogue and practice it daily in all communications. To help promote the art of dialogue, you must be curious about another's point of view and willing to:

- State your own view and ask others for their reactions
- Be wrong
- Accept that you may be unaware of certain facts
- Remain open to new information

- Change your mind
- Interpret how others are thinking and reacting and seek to understand their underlying feelings

Dialogue lets us discover more of our own intelligence and blend it with the knowledge and wisdom of others. Clear and powerful agreements can result from dialogue, whereas little worthwhile insight is likely to come from simultaneous monologues. These types of ineffective conversations can lead to a reactive cycle, in which people react instead of participate. If left unchecked, the reactive cycle can do more than kill the productivity of a conversation and even damage relationships.

A reactive cycle starts when someone says something with which you don't agree, or may even strongly dislike. In a split second, your emotions are triggered and you may feel threatened or defensive. You react by attempting to control the situation, the person or retaliating. Doing so may trigger the other person's emotions, causing that person to now attempt to gain control, which, in turn, causes you to react again. This back-and-forth emotional interplay—this reactive cycle—results in another unproductive conversation or meeting.

There are three steps that can be taken to break a reactive cycle:

1. Identify it; where one of the parties notices the reactive cycle and literally "calls it out."
2. One or both of the parties claim their responsibility for being reactive.
3. Both parties try to understand their own—

and the other's—viewpoints and emotions, and attempt to enter into a true dialogue by reframing their perspectives.

After we have named, claimed and re-framed a reactive cycle, we can engage in the type of open, honest and productive discussion needed to accomplish mutual objectives. By learning the art of dialogue we help ensure that everyone is on the same page and moving forward in the same direction.

—Adapted from "[Learn the Art of Dialogue and Have Open, Productive Conversations](#)," O'Brien Group.

SHIFTING PERCEPTIONS OF CHANGE FROM EPISODIC SOLUTION TO ALWAYS-ON STRATEGY

Healthcare leaders are grappling with unprecedented disruption, resulting in a greater need for agile, change-ready cultures. A change-ready culture accepts that change is constant and understands that success will not come from point-in-time solutions, but rather from meaningful, perpetual improvement. To create a change-ready culture, leaders must shift the organization's perceptions of change management from an episodic solution to an ongoing strategy that becomes part of the organization's DNA.

As traditional approaches to change shift, leadership practices must evolve to align with the organization's aspirations. By actively modeling desired behaviors, leaders reinforce the mentality required for changes to be successful. To cultivate an organization that is able to evolve continuously, its leaders should do the following:

- See change as a transformative competency. Recognize that change is continuous, and multiple changes must occur simultaneously. This requires a culture that accepts change as the norm and becomes so good at changing that it thrives during disruption.
- Focus on your mission. This is your "why" for transformation and needs to be clearly, compellingly and continuously articulated in order to engage key stakeholders.
- Hold employees accountable. Make it clear that adapting is not optional and reinforce this mentality through validation, coaching, rewards and recognition.

If the transformation employees are asked to take on are interpreted as overwhelming and complicated, it will make it harder for the changes to be adopted and sustained. Change should not feel impossible to achieve, and it does not have to require a significant amount of effort. Here are several essential steps:

- Establish a shared vision of transformation within your organization. This will help curb change-related stress and confusion regarding the way forward.
- Leverage data to create a high-level view of the organization. Rather than focusing on a broad problem, conduct an objective assessment and diagnose the challenges at hand with quantifiable data. Share these insights broadly to promote buy-in.
- Demonstrate why. After you build your strategy, share data with stakeholders to explain why changes are critical for reaching organizational goals.
- Identify advocates. Seek out individuals who will display model behaviors and encourage others to contribute to growth and sustainable performance. They can help determine who will be affected by change and how certain team dynamics may impede or accelerate progress.

Change within healthcare is no longer an option; it's a necessity for long-term viability. Make sure leaders make the essential mind shift, then build momentum for transformational capability.

—Adapted from "[Elevating Change Management: From Point Solution to Continuous Transformation](#)," by Tonia Breckenridge, Michelle Bright and Ryan McPherson, HealthLeaders, Oct. 14, 2019.

WELCOME AND CONGRATULATIONS

New Members

SEPTEMBER

Name

Lisa R. Brown
Eric L. Conrad
Ann Cullen
Patricia Faggiolli
Jennifer M. Ferrier
Suzanne Goldberg
Thomas F. Hanson, III
Lucy I. Hernandez, MPA
Gwendolyn Jefferson
Carlton E. Mills, MSN, RN
Minh Thu Nguyen, PharmD
Jeffrey Nkansah
Chima Okam, DNP, RN
Mercedes Ontiveros
CPT Tyler Perkins
Jolene R. Saenz
Debra Seal, DPT
Gautam Shah
Julia Stoner
Keenan Tillman, RN, MPH
Felicia Tornabene, MD
Luiza A. Ursulescu
Natalie Vachalek
Eric Wong

City

Sacramento
Santa Cruz
Palo Alto
Redwood
Bakersfield
Redwood City
Fairfield
Hayward
Stockton
Dublin
San Francisco
Fresno
Ripon
Fairfield
San Jose
Fremont
Menlo Park
San Francisco
Mountain View
Redwood City
Oakland
Sacramento
Elk Grove
San Francisco

LCDR Juanita Hopkins, RN
Christin M. Montoya
Richard B. Moreland
Polina Murdakhayev
Elizeba Ninan
Jose A. Ortiz-Lopez, JD
Liza Santa Ana
Joanna Truong

Hanford
Riverbank
Ripon
Oakley
San Francisco
Tracy
Oakland
Stanford

NOVEMBER

Name

Kranthi K. Achanta, MD
Jennifer Ayles
Madee M. Carnecer
Lee A. Cherbonnier, MSN, RN
Susan Christy, PhD
Anh Thang Dao-Shah, PhD
Kimberly Hamelton
Peter V. Hull, MD
Hiroko Miles
Jy Nowlin
Alka Patel
Rakhal M. Reddy
Jessica Rodriguez
Donna M. Siu, MHA
Kirkland Wade

City

Pleasanton
Napa
San Bruno
Modesto
Woodacre
San Francisco
Susanville
Roseville
El Dorado Hills
Danville
Oakland
El Dorado Hills
Visalia
Dublin
Roseville

OCTOBER

Name

Amanda Apardian
Taylor Bentley
Jose De Guia
Juilee A. Dhiman, BDS
Vasu Divi, MD
Christian Dulay, RN
Sherri L. Finley, MPA
Tracey Fuller
Colleen Gordon

City

Milpitas
Sacramento
San Ramon
Fremont
Stanford
Sacramento
Fort Bragg
Fairfield
Sacramento

DECEMBER

Name

Veronica Gerke

City

Oakley

Fellows

OCTOBER

Name	City
Sara Brass, FACHE	Sacramento
Asha George, PhD, FACHE	Sacramento

NOVEMBER

Name	City
Sylvia E. Lozano, FACHE	Salinas

Recertified Fellows

SEPTEMBER

Name	City
Linda M. Bluhm, FACHE	Stockton
Linda D. Buckingham, FACHE	San Jose
Gita Uppal, FACHE	San Francisco

OCTOBER

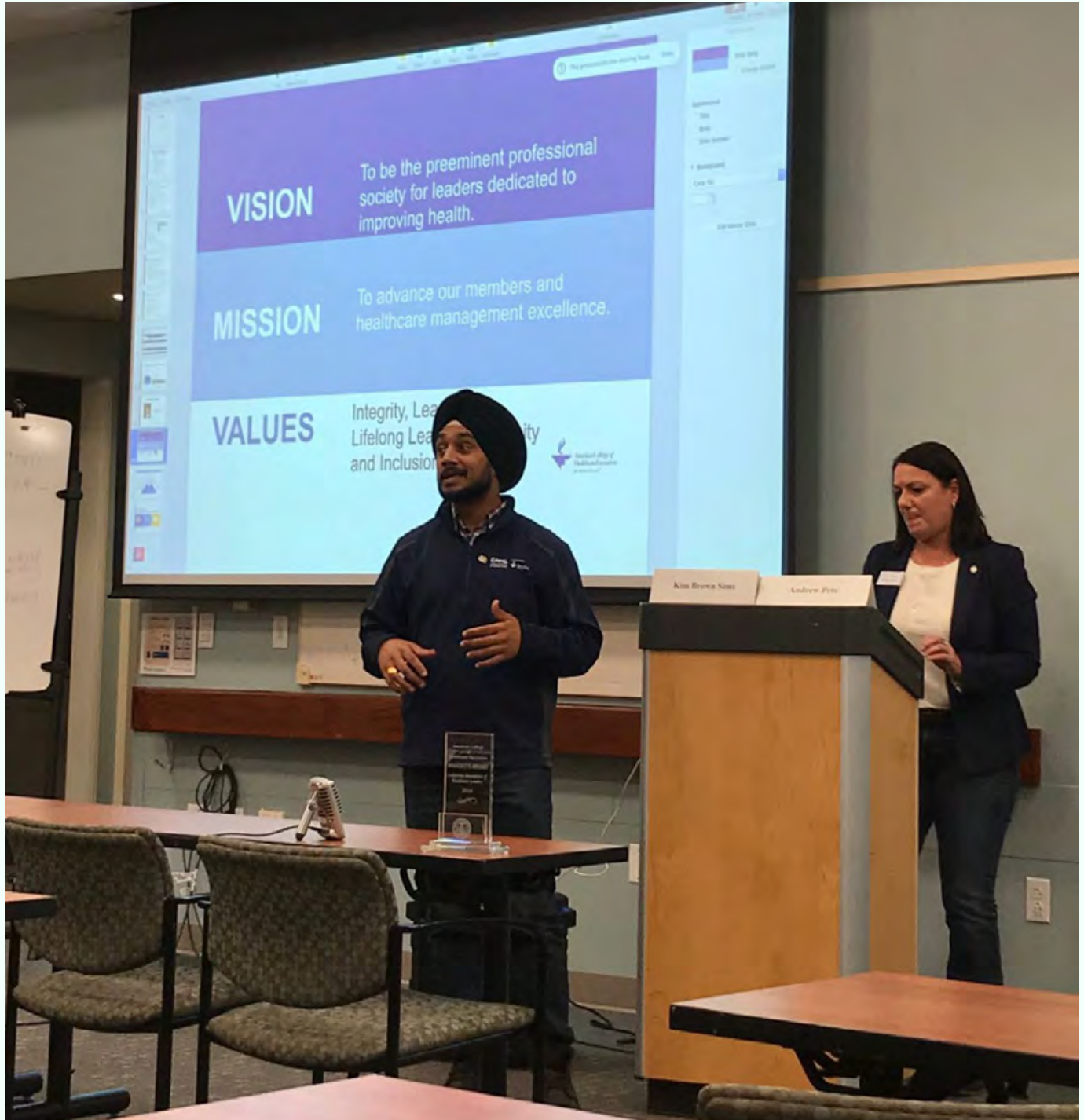
Name	City
Sherie E. Ambrose, FACHE	San Francisco
Steven D. Chinn, DPM, FACHE	Millbrae
Maj Amanda Davis, FACHE	Oakland
Linsey Dicks, FACHE	Walnut Creek
Jennifer B. Duyst, FACHE	Hanford
Jen Sweeney, FACHE	San Jose

NOVEMBER

Name	City
Lori Katterhagen, DNP, FACHE	Gilroy
Bayode T. Omosaiye, FACHE	Gonzales
Angela M. Simmons, FACHE	Sacramento
Charles Thevnin, PhD, FACHE	San Francisco
Pam Yoo, FACHE	Oakland

CAHL EVENTS

LEARN FROM LEADERS OCTOBER 11



FACE TO FACE EVENT UCSF NOVEMBER 14



CAHL EVENTS

OCTOBER 19 - 2020 BOARD TRAINING AND NETWORKING EVENT





CAHL EVENTS

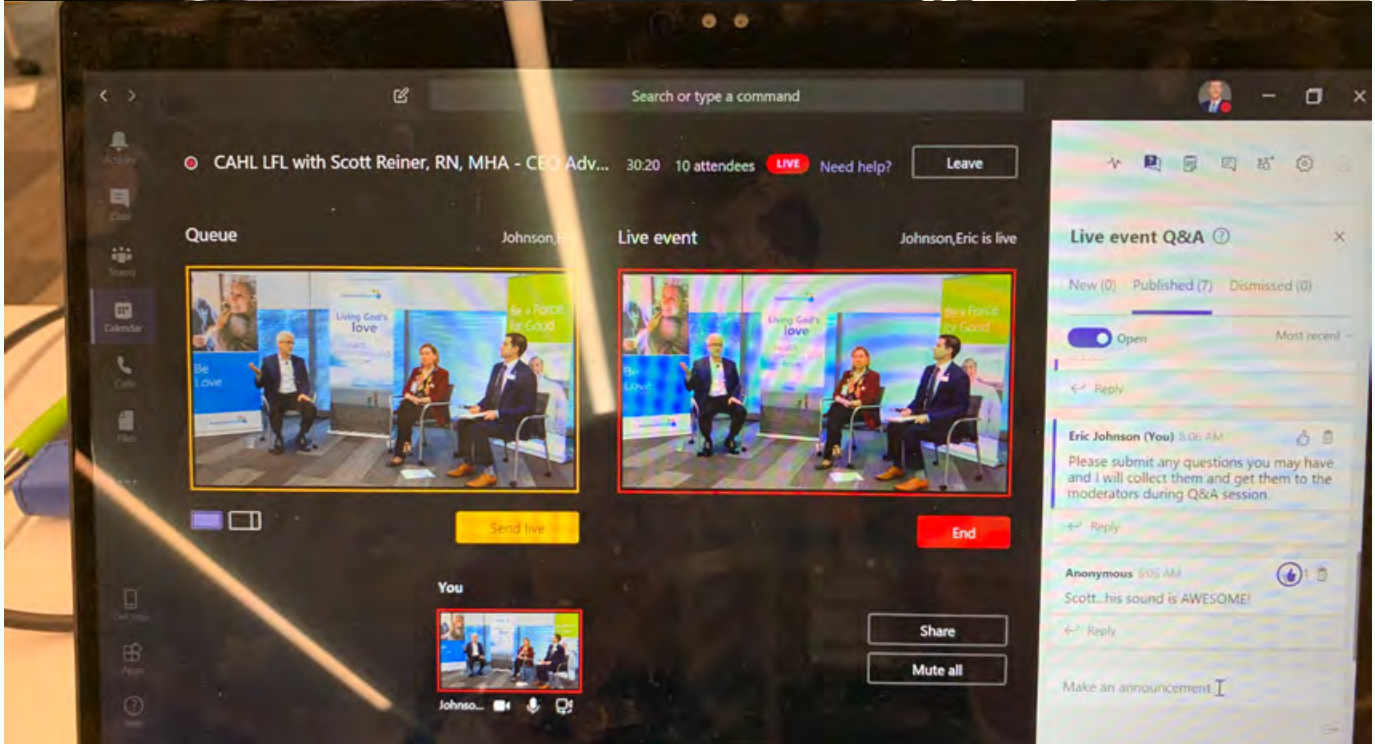
NOVEMBER 14 - F2F LEADER'S ROLE WITH OPIOID CRISIS, SAN FRANCISCO





CAHL EVENTS

DECEMBER 13 - LFL WITH SCOTT REINER ADVENTIST HEALTH ROSEVILLE





CAHL EVENTS

DECEMBER 6 - LFL WITH JAMIE PHILLIPS, OAKLAND





CAHL EVENTS

DECEMBER 7 - MEET THE 2020 BOARD NETWORKING EVENT, SACRAMENTO





CAHL EVENTS

DECEMBER 7 - 2020 CAHL BOARD STRATEGIC PLANNING MEETING





CAHL EVENTS

DECEMBER 11 - DIVERSITY AND INCLUSION NETWORKING EVENT AT AU LOUNGE, OAKLAND



