

ACHE Fall Newsletter

The Regents of District IV met on Friday, September 15, in Nashville, TN. District IV consists of Regents from Alabama; Arkansas; Kansas; Louisiana; Mississippi; Missouri-Gateway area; Missouri-Show-Me Area; New Mexico; Oklahoma; Tennessee; Texas-East; Texas-Greater Dallas/Ft. Worth; Texas-Health, Energy & Space Center; Texas-Lone Star Area; and Texas-West. Governor Charles Evans, FACHE and Governor Nancy A. Thompson, Ph.D., FACHE, along with Alyson Pitman Giles, FACHE, Chairman-Elect, also attended the meeting along with ACHE staff. The two hot topics on the agenda, which provoked intense discussion and comments, were the ACHE Credentialing Task Force Report and Strengthening the Chapter Strategy: *The Chapter Choice Model*.

By now, all affiliates should have received an email from ACHE National describing the Credentialing Task Force Summary Report, a proposal for a major restructuring of the ACHE Credentialing Program. Attached is the summary format of the salient issues of the proposal for the major restructuring of the ACHE Credentialing Program.

One of the most controversial aspects of the new proposal is the automatic conversion for Diplomates to Fellow beginning January 1, 2007. Many Regents, including myself, felt that an acceptable period of time should be given for current CHE's to complete their Fellowship requirements. Everybody agrees that we need to strengthen the brand identity of the Fellowship credential and reduce the ambiguity that exists between the CHE and FACHE.

The proposal is open for further comment. I encourage all affiliates to make comments to ACHE regarding your feelings on this proposal. In the end, we do need to encourage more advancement within the College and make sure the credentialing is as strong as possible and well regarded in the market place.

Strengthening the Chapter Strategy: *The Chapter Choice Model*

This will be a protracted discussion with any change to the chapter models not occurring before January 1, 2008. The chapter development strategy was designed as a long-term strategy to increase value for ACHE affiliates by deploying and supporting a network of independent not-for-profit organizations to deliver convenient, cost-effective educational, networking and career services locally. Over 81 chapters have been fully or provisionally chartered with almost the entire affiliate area being served by a chapter.

Problem:

Currently only 31% of all ACHE affiliates and all local chapter members have joined and only 42% of ACHE affiliates have joined a chapter. This has been particularly a problem in urban areas such as Chicago. A national consultant engaged by ACHE national recommended adopting a fully unified model (contingent membership). What this simply means is that all ACHE affiliates and only ACHE affiliates are members of the chapter with no additional local dues. ACHE affiliates and the chapter members are synonymous.

Concerns:

Voice by some chapters included: (1) impact on non affiliated members; (2) financial impact on chapter; and (3) anatomy and independence.

Chapter Choice Model which has been recommended by the Task Force includes the hybrid model. Under this model, all ACHE affiliates are full chapter members with no local dues. Chapters then choose to make chapter membership contingent on ACHE affiliation (contingent). Or allow local membership in the chapter by non-affiliated individuals (hybrid reciprocal)—under either model, affiliates automatically become members of chapters. This would increase chapter membership dramatically overnight. Dues rebate from ACHE would increase from \$200,000 to approximately more \$600,000. Efforts could be better placed on developing new tools and resources for chapter members.

The three goals moving forward:

- (1) Create a condition for collaboration
- (2) Need unified identity between chapters and ACHE National
- (3) Find a way to reduce administrative burden, i.e., tracking and recruiting members

Again, this was fairly contentious issue among the Regents of the District Meeting. Many Regents felt that ultimately a unified contingent membership model such as HFMA model would align interest of ACHE national and local affiliates. However, other Regents felt that a Chapter Choice Model would allow some chapters to retain non affiliates as members. This will be discussed in detail over the next several months and again I urge each of you to voice your opinions to your local chapter officers if you are a chapter member or if you are an affiliate, voice your opinions directly to national. Mike Zieman, President of Mississippi Healthcare Executives, will be discussing this with the board of MHE in the near future.

2007 Congress on Healthcare Leadership

This year Congress will be held in New Orleans – March 19-22, 2007 – Mark your calendar. Registration for Congress will be mailed to affiliates in November. This is a major change for ACHE in having their Congress outside of Chicago for 2007. New Orleans is obviously close to Mississippi so I encourage you to take advantage of this event. It is also incredibly important to support the Gulf Coast and New Orleans area with your participation in Congress.

WRONG WORDS AT THE WRONG TIME

A woman, standing nude, looks in the bedroom mirror and says to her husband,
"I feel horrible, I look fat and ugly. Pay me a compliment."
The husband replies, "Your eyesight's damn near perfect."
He never heard the shot...