

# Healthcare Council Report

Volume 25, Issue 3

Summer, 2018

HEALTHCARE COUNCIL OF THE NATIONAL CAPITAL AREA  
QUARTERLY REPORT

# HCNCA

## WORKPLACE STRESS AND BURNOUT: HOW IS YOUR ORGANIZATION TREATING IT?

Nancy Spangler, Ph.D.  
Senior Advisory and Practitioner  
Greenleaf Integrative



Articles about clinician burnout are featured in professional journals on a monthly basis. We know your organization is doing something to treat this epidemic. Burnout has grown disturbingly. More than 50% of physicians report significant levels of burnout, as do 12% of nurses, compared to 9% of the general working population. Although the term burnout is used loosely in today's society, scientific research has focused on three primary factors related to burnout – depersonalization (feelings of cynicism), emotional exhaustion, and a low sense of personal accomplishment.

Burnout has been attributed to complex and tedious demands from electronic health record usage, resource constraints, compliance pressures, work-life balance issues, inadequate sleep, and lack of control. With only 27% of their time spent on clinical care, physicians report feeling overwhelmed with administrative burdens while disconnected from the joy of medicine they expected. In addition to the human suffering and personal consequences of provider burnout, studies show that work engagement, productivity, medical costs, patient safety, recruitment, and retention also suffer.

**Psychological trauma runs parallel to chronic stress as another source of suffering.** The dangers to employees' emotional health go beyond cumulative stress and burnout in health systems. Virtually all healthcare providers have directly experienced and/or witnessed the causes and effects of psychological trauma. (continued on page 3)

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# 2018

HEALTHCARE COUNCIL OF THE NATIONAL CAPITAL AREA  
CENTERPARK II - FIRST FLOOR 4061 POWDER MILL RD, STE 100 CALVERTON, MD 20705 PH: 301-731-4700

## New Divisional Group to be Established

### Behavioral Health Divisional Group to be Established



Bevin Merles, Psy.D., has agreed to chair a new divisional group for behavioral health leadership. Bevin is Assistant Director of the Department of Forensic Services at Spring Grove Hospital Center, a 375-bed complex that provides a broad spectrum of inpatient psychiatric services to adults and adolescents, as well as comprehensive residential psychiatric services to adults. The center is owned and operated by the State of Maryland, under the governance of the Mental Hygiene Administration of the

Department of Health. She joined SGHC in April 2013 and conducts court-ordered forensic evaluations to determine competency to stand trial and criminal responsibility of inpatient defendants. In addition to her role as an evaluator, Dr. Merles sits on the Forensic Review Board for the hospital, acts as Court Liaison for SGHC with the Mental Health Courts in Baltimore City and Baltimore County, and participates in the Maryland Department of Health – Behavioral Health Administration’s Quality Assurance Committee for Forensic Evaluations. She earned her Doctorate of Psychology (Psy.D.) and Master of Science in Clinical Psychology with a concentration in Forensic Psychology from Nova Southeastern University in Ft. Lauderdale, Florida. She completed her psychology doctoral internship at the Superior Court of the District of Columbia and a Child Guidance Clinic Post-Doctoral Residency at Springfield Hospital Center.

Currently a list of regional behavioral health leaders is being gathered. Once the list is complete Bevin will schedule the first meeting of the group. We are thrilled to have her expertise and leadership and look forward to the first divisional meeting in behavioral health.

### Becky Quammen Becomes Chairperson for the IT Divisional Group



Nathan Read has been chairing the IT Divisional group for HCNCA for the past four years and welcomes Becky Quammen as the new chair. Nathan says, “Becky is the ideal person to chair the IT group with her exceptional professional background.”

Recognized for the 3rd year (2016, 2017, & 2018) by HDM Most Powerful Women in HIT, Dr. Rebecca Quammen is currently the Chief Information Officer and Chief Information Security Officer at Howard

University Hospital. Additionally, she maintains a comprehensive focus on the healthcare industry through her consulting practices as CEO of MyConsultQ and Quammen Healthcare Consultants.

A 30-year veteran of the healthcare industry, Quammen has held a number of leadership positions in hospitals, integrated health systems, healthcare consultancies, and healthcare software vendors. Quammen is active in a number of industry groups and frequently shares her healthcare IT knowledge through speaking engagements and articles.

Holding a doctorate degree in business administration and information technology, Quammen’s knowledge runs wide and deep. As a result, she brings an unparalleled level of sophisticated thinking to a wide range of healthcare business management and information technology issues: strategic and tactical planning; cybersecurity; business development and sales challenges; operations and organizational development; product development and delivery; and emerging healthcare initiatives.

Dr. Rebecca Quammen, DBA MBA, Chief Information Officer & Chief Information Security Officer at Howard University Hospital can be reached at 407-758-3390.

## DIVISIONAL MEETINGS:

### IT Divisional Meeting:

CONTACT: Becky Quammen, IT Division Chair, 407-758-3390, [BQuammen@huhosp.org](mailto:BQuammen@huhosp.org)

### Volunteer Divisional Meeting

CONTACT: Roxanne Holston, Volunteer Services Division Chair, 202-854-7759, [Roxanne.Holston@provhosp.org](mailto:Roxanne.Holston@provhosp.org)

### HR Divisional Meeting:

CONTACT: Paul A. Hagens, Jr., HR Division Chair, 202-877-3066, [paul.hagens@medstar.net](mailto:paul.hagens@medstar.net)

### Quality Divisional Meeting (DCAHQ)

CONTACT: Derdire Coleman, DCAHQ (DC Association of Healthcare Quality), President, 240-375-9940, [nakuone@aol.com](mailto:nakuone@aol.com)

### Supply Chain Divisional Meeting (MASHMM)

CONTACT: Kenyetta Keys, President, 301-552-8179, [kkeys@dchweb.org](mailto:kkeys@dchweb.org)

### Rehab Divisional Meeting

CONTACT: Gerilynn Connors, Rehab Division Chair, 703-776-3070, [gerilynn.connors@inova.org](mailto:gerilynn.connors@inova.org)

### Pharmacy Divisional Meeting

CONTACT: Melanie Massiah-White, Pharmacy Division Chair, 703-205-2140, [Melanie.massiah-white@inova.org](mailto:Melanie.massiah-white@inova.org)

### Facilities & Engineering Divisional Meeting

CONTACT: Mark Mininberg, Facility & Engineering Interim Division Chair, 203-668-3522, [mark@hospitalenergy.com](mailto:mark@hospitalenergy.com)

### Physician Management Divisional Meeting

CONTACT: Darmita Wilson, Physician Management Division Chair, 202-854-4095, [darmita.wilson@provhosp.org](mailto:darmita.wilson@provhosp.org)

### Young Health Care Professionals Divisional Meeting

CONTACT: John McNally, Young Healthcare Professionals Division Chair, 610-212-0902, [jmcnall9@jhmi.edu](mailto:jmcnall9@jhmi.edu)

### Population Health Divisional Meeting

CONTACT: Marta Pérez, Population Health Division Chair, 301-315-3515, [MPerez@adventisthealthcare.com](mailto:MPerez@adventisthealthcare.com)

### Behavioral Health Divisional Meeting

CONTACT: Bevin Merles, Behavioral Health Division Chair, 410-402-7384, [BMerles@Maryland.gov](mailto:BMerles@Maryland.gov)

**Divisional Meetings are held quarterly. Please contact the chair person for more information about the 2018 schedule. You can also call HCNCA at 301-731-4700 for meeting information.**

## WORKPLACE STRESS AND BURNOUT: HOW IS YOUR ORGANIZATION TREATING IT? (continued from front page)



Exposure to both primary trauma and vicarious trauma challenges health professionals, yet very few in the industry are even discussing trauma exposure, its causes, or its long-term effects. Toxic work environments involving bullying and disrespect contribute to the experience of trauma.

**Health systems can and must do better – their people and missions depend on it.** With worrisome rates among healthcare providers of alcohol dependence, drug abuse, depression, and suicide, senior leadership in many health systems are acknowledging that these outcomes may be related

to cumulative stress and burnout. They also recognize that the assistance they've offered to date has been underutilized in most cases. Employee Assistance Programs (EAPs) are typically seen as a last resort when employees have reached or exceeded their limits, and EAPs tend to focus on solutions to personal problems rather than core organizational processes and issues. Physicians often avoid seeking help due to privacy or licensure concerns.

**Let's Help One Another Fix This.** Many health systems are taking steps beyond traditional EAPs to address stress and burnout. From physician-specific EAP's, to creating executive positions focused on physician wellbeing, providing participatory stress relief workshops and online tools, and addressing administrative burdens, organizations are deploying a wide variety of potential solutions, some more comprehensive than others.

"Burnout reported in US physicians can be considered both a marker of dysfunction in the health care delivery system and a factor contributing to dysfunction." – Shanafelt & West, JAMA, March 2017

### Did You Know?

48% of physicians scored 4 or 5 on the Bixby Fatigue Scale - AMA 2016

50% of physicians report burnout, with emergency medicine closer to 60% - Stanford Health

Physicians work 10 hours more per week than any other industry - AMA 2016 & Annuals of Internal Medicine 2016

The suicide rate among physicians is 6 times higher than that of the general population - Medscape 2016

Among physicians, burnout is independently associated with 25% increased odds of alcohol abuse/dependence and 200% increased odds of suicide ideation - AMA 2016

11% of all physicians leave specifically due to burnout - JAMA, 2017

### Did You Know?

49% of mental health and one-third of substance abuse treatment facilities now have smoke-free campuses in the 50 states, Washington, D.C., and Puerto Rico.

### Did You Know?

Deaths due to fall among older adults increased 31% from 2007 to 2016, a rate of 3% per year according to the Centers for Disease Control and Prevention (CDC).

CURRENT EVENTS & AREA NEWS

**MedStar Washington Hospital's President John Sullivan Retiring; Gregory Argyros, MD, Named Successor:**

MedStar Health transitioned the leadership of MedStar Washington Hospital Center to Gregory J. Argyros, MD, MACP, FCCP, who became the hospital's President and a Senior Vice President of MedStar Health effective July 1, 2018. Dr. Argyros has succeeded John Sullivan, who has retired after successfully leading Washington, D.C.'s largest and busiest hospital since 2010. Dr. Argyros, who joined the hospital in 2012 and was named Senior Vice President of Medical Affairs and Chief Medical Officer in 2014. Prior to joining MedStar, Dr. Argyros spent 25 years in the Medical Corps of the U.S. Army, serving as Chief of Medicine at Walter Reed Army Medical Center and Director of Education, Training and Research for the National Capital Region.



**MedStar Celebrates Launch of its Largest Innovative Sim Center Near MedStar Harbor Hospital:** MedStar Health celebrated the expansion and renovation of the Baltimore Clinical Simulation Center, located at 2990 S. Hanover Street, Baltimore 21225 on May 24, part of the MedStar Simulation Training & Education Lab (SiTEL), where MedStar associates receive critical hands-on training in caring for patients. The Baltimore Clinical Simulation Center is the largest of MedStar Health's four training centers, all designed to enhance patient safety through the continuous development of associates' skills. To engage residents, nurses and other associates, MedStar SiTEL uses interactive online and face-to-face training, including 3-D virtual reality and hands-on, high-fidelity simulation. The simulation lab encompasses nearly 12,000 square feet of flexible training space.



**Doctors Community Hospital Receives Consecutive Gold-Level Rating In the 2018 Wellness at Work Awards:** Doctors Community Hospital has earned a gold-level rating in the 2018 Wellness at Work Awards for the second year. This statewide honor recognizes exemplary accomplishments in the promotion of workplace health and well-being. The Wellness at Work Awards are granted by the Healthiest Maryland Businesses program, which was founded in 2010 by the Maryland Department of Health and Mental Hygiene. The initiative includes more than 400 employers and is dedicated to protecting and promoting wellness in the workplace based on the Centers for Disease Control and Prevention (CDC) Workplace Health Model. Applicants are also asked to describe activities, and share examples of related policies and tools developed to address four assessment areas: planning, management, implementation and evaluation.



**J. Stephen Jones, MD, Inova CEO, Appointed UVA Professor of Urology:** J. Stephen Jones, MD, CEO, Inova Health System has been appointed Professor of Urology at the University of Virginia's (UVA) School of Medicine. Dr. Jones is a nationally recognized expert in prostate and bladder cancer. Before joining Inova Health System, Dr. Jones was President of Cleveland Clinic Regional Hospitals & Family Health Center, Professor of Surgery at the Cleveland Clinic Lerner College of Medicine at Case Western Reserve University and held the Leonard Horvitz and Samuel Miller Distinguished Chair in Urologic Oncology. He has published two books for the lay patient population and is the editor of five medical textbooks.



**Leonard Taylor Jr. Has Been Named Senior Vice President for Asset Planning for the University of Maryland Medical System:** Leonard Taylor receives new role. Taylor will provide executive leadership and professional project management over initiatives focused on improving patient outcomes while increasing operational efficiency and reducing waste through both UMMS facility-related projects as well as planning and change management with external communities. Taylor has served in various leadership positions at the University of Maryland Medical Center, including as UMMC's senior vice president, operations and support services.



**UMMS Names Keith Persinger, to Newly-Created Role of Chief Performance Improvement Officer:** Keith Persinger, MBA has been named to the newly-created role of chief performance improvement officer with the University of Maryland Medical System, a position that will operationalize a new performance improvement structure and focus across UMMS to enhance operating and financial performance. Persinger has held executive-level roles of increasing responsibility since joining the University of Maryland Medical Center in 1993 following several years as a health care consultant with KPMG. Persinger holds a Bachelor of Science and an MBA in finance from Loyola College.



**Dr. William O. Suddath Named Chairman of Cardiology at MedStar Southern Maryland Hospital Center:** MedStar Heart & Vascular Institute has named William O. Suddath, MD, the new chairman of Cardiology and medical director of the cardiac catheterization laboratory at MedStar Southern Maryland Hospital Center. Dr. Suddath spent the last 22 years as an integral member of the renowned interventional cardiology team at MedStar Washington Hospital Center. He is the program director for the interventional cardiology fellowship program, which trains physicians in advanced cardiac catheterization skills.

**CURRENT EVENTS & AREA NEWS, continued**

**Shady Grove Medical Center, Washington Adventist Hospital Receive National Awards for Stroke Care:** Adventist HealthCare’s two main hospitals have each received two awards from the American Heart Association and American Stroke Association for life-saving, high-quality stroke care. These awards come during National Stroke Month, which raises awareness about the signs and symptoms of stroke.

The first award, Gold Plus Quality Achievement, recognizes each hospital’s adherence to Get With The Guidelines-Stroke, a hospital program from the American Heart/American Stroke Associations that focuses on improving stroke care through consistent use of the latest scientific treatment guidelines. To receive this award, Adventist HealthCare Shady Grove Medical Center and Adventist HealthCare Washington Adventist Hospital achieved 85 percent or higher compliance with the program’s standards for two or more consecutive 12-month periods.

The second award, Target: Stroke Honor Roll Elite Plus, recognizes the hospitals for maintaining a short time period between a patient’s arrival at the hospital and treatment with clot-dissolving medication, as designated by quality guidelines. Providing the medication within the first three hours after stroke symptoms begin has been shown to significantly reduce the effects of stroke and lessen the chance of permanent disability.



Shady Grove Medical Center



Washington Adventist Hospital

**GW Hospital Achieves Highest Stroke Recognition:** The George Washington University Hospital (GW Hospital) has received the American Heart Association/American Stroke Association’s Get With The Guidelines®-Stroke Gold Plus Achievement Award with Target: Stroke Elite Plus Honor Roll. The award is the highest stroke recognition possible from the organizations. It recognizes GW Hospital’s commitment to providing the most appropriate stroke treatment according to nationally recognized, research-based guidelines based on the latest scientific evidence. “We are honored to achieve this recognition representing our steadfast commitment to providing the highest quality stroke care,” says Kimberly Russo, Chief Executive Officer/Managing Director of GW Hospital.



**Did You Know?**

49% of mental health and one-third of substance abuse treatment facilities now have smoke-free campuses in the 50 states, Washington, D.C., and Puerto Rico.

**What’s Popping?**

**What’s Popping?**

**Population Health News and Events**

HOW VALUE-BASED CARE IS CHANGING POPULATION HEALTH  
by Chris Howard

According to Gaby Galvin in U.S. News, many doctors across the country are shifting toward outcome-based care, which health experts say will in turn improve overall population health. Treating patients in the doctor’s office doesn’t cut it anymore. The article states that a population health approach examines how medical care, genetics, individual behavior, public health interventions and social indicators such as education and employment all play a role in determining the health of a population. For population health directors, the patient is an entire community – not just those who make it to the doctor’s office or emergency room.

Mark Rosenberg, Chief Innovation Officer at St. Joseph’s in Paterson, NJ says, “keeping somebody healthy sometimes requires some detective work and changes the way you think about people, one person at a time.”

Health happens in homes, neighborhoods, schools, the workplace and just about everywhere and not just in the hospital, urgent care center or doctor’s office. There are so many things that can worsen health outcomes, including lack of transportation and no easy access to care which in turn exacerbates health outcomes and leads to unmet health needs.

The population health approach requires all arms of the health care industry to work together to determine the best outcomes for each patient, taking their daily lives into account, which in turn leads to better outcomes for a population overall.

## Announcing New Vendor Partnership

Teleon Health offers a HIPAA-compliant texting and communication platform designed to help healthcare providers tackle key challenges in delivering patient care, from reducing avoidable hospital readmissions to improving engagement with patients and their families.

Teleon's turnkey mobile, web, and desktop applications provide simplicity of use and deliver the following capabilities:

1. **Internal team/facility communication:** Enable your teams - from clinicians and administrators to caregivers - to securely communicate and share patient information on the road, in the office, or at patients' homes. Quickly resolve staff shortage issues resulting from call-offs, unplanned admissions or turnover.
2. **External partner communication:** Coordinate care transitions and workflows efficiently with your network of post-acute and long-term care partners, which is especially critical in today's value-based care environment. Reduce breakdown in communication across settings, medical errors, and your staff's time spent handling faxes and phone calls.
3. **Patient and family engagement:** Address the growing expectations from patients and their family members for simpler, mobile interactions with providers. Share timely updates, care plans, and medical files; increase engagement; and differentiate your services with these key stakeholders.

For more information, please contact: Kijoon Lee, CEO  
at klee@teleonhealth.com or 650-815-1990.



TELEON HEALTH

## Announcing New Associate Partnership



We welcome CentraVance Consulting, LLC as one of our newest associate members of the Healthcare Council. CentraVance has been helping clients meet complex government and industry compliance requirements. With more than 22 years of healthcare experience, Angela Simmons has worked as a Certified Dental Assistant and a Dental Assisting Educator/Director with the North Carolina Community College System and served as a Consultant for the Commission on Dental Accreditation. She received her Bachelor of Science in Health Services Management from East Carolina University. Passionate about compliance, and especially HIPAA, Angela is a Certified HIPAA Professional (CHP) and a Certified Cyber Security Architect (CCSA). Angela's clinical, managerial and teaching experience makes her a great choice to provide employee safety and patient

privacy training for CentraVance clients. Her experience in both the clinical and educational settings provides her the insight and ability to identify safety and privacy issues that can occur in both medical and dental offices. As part of ongoing education, Angela attends several courses and summits each year to ensure that she stays on top of compliance issues as they are happening. She is currently an active member of the Healthcare Compliance Association.

For more information contact Angela Simmons - Principal Consultant CCSA, CHP, BS 804-977-1201,  
[www.centravance.com](http://www.centravance.com).



## Announcing New Associate Partnership



Founded in 2008 and based in Arlington, Virginia, Greenleaf Integrative partners with people and organizations to substantially improve the way we all respond to significant work and life challenges. Our diverse team uniquely integrates neuroscience and organizational expertise to deliver practical, tailored wellbeing solutions with lasting results. We enable our clients to achieve significant improvements in resiliency, culture, productivity, human interactions and leadership capacity.

Greenleaf hopes to better understand what is working and what is not as you work to fix this within your individual organizations. As a new HCNCA associate member, Greenleaf Integrative is inviting all HCNCA members to share information in two ways. First, a 30-minute phone survey with one or two senior executives per organization consisting of five discussion questions will be used to gather perceptions about your organization's approaches to reducing stress and burnout. The information will be used to develop a brief online survey for multi-disciplinary respondents from each organization. All responses will be aggregated and the findings shared with all HCNCA member organizations.

With member participation, this report can become a robust set of data to help guide organizations in implementing effective solutions moving forward. We hope you'll agree to participate.

Visit [greenleafintegrative.com](http://greenleafintegrative.com) to learn more.

## THE BOARD CORNER:



### Building a Strong Board in 6 Easy Steps

#### Step one: Review

What kind of board do you have now? Typically a board will have a personality – founder, operational – or the more dangerous microscope board, they want to know every detail but have a hard time solving problems. You need to understand the character of your board and then determine if that personality fits your mission. If it does, that’s great. If not, you need to make adjustments to make things work.

#### Step two: Recruit

For years we have focused our board development on the ever present composition matrix. That’s still a good idea but filling in boxes is only part of the puzzle. By identifying very specific skills sets, you may throw off the whole character of the board you’re trying to create. You want to also focus on experience, knowledge and perspective of the problem you’re trying to solve.

#### Step three: Requirements

Once you have identified the right candidate, interview them. Make sure you are on the same page. Give or get? Meeting attendance? I am a big believer in board member contracts. Before you offer them the job, make sure they know what you expect and what they can expect from you.

#### Step four: Retain

The best way to keep a board member is to keep them involved. Honor your commitment to them by making sure that they know the meeting schedule; they receive information in advance; their minds, moments and money are treated with respect. Don’t create committees for the sake of structure. Create structure based on needs.

#### Step five: Recognize

You don’t have to host a parade but you should make sure that their names are spelled out on your website. You should create an opportunity to thank them. This weekend, I went out of my way to help an organization do something unique. They gushed their thanks but it was really too much. I finally said, “just say thank you and mean it and leave it.” You need to do the same.

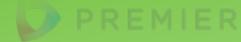
#### Step six: Remind them!

We humans are simple creatures. We strive to do good work but every now and then we need to be reminded about why. The structure of the annual retreat is an excellent opportunity to review the personality of your board, look for gaps, recognize leadership and work towards improving your quality of service.



By Debbi Stanley

## SHARED SERVICES



### About National Capital Area Shared Services

National Capital Area Shared Services (NCASS) is a regional GPO, a wholly-owned subsidiary of the Healthcare Council of the National Capital Area (a non-profit association of providers in Maryland, Virginia and the District of Columbia). It has documented hundreds of millions in savings and cost containment since 1972. NCASS joined the Premier healthcare alliance as a group affiliate in 2008 and signed with Yankee Alliance as a collaborative member



### Interested in Joining the Healthcare Council?

Healthcare Council continues to develop its All-Inclusive, Broad-Based Association of Members to accurately reflect the providers of care doing business in its service area encompassing Maryland, the District of Columbia and Virginia. It is committed to creating and providing opportunities for new members and associates while keeping member dues low. It serves its members with detailed communications and professional contacts, partnerships, timely educational programs, surveys, collaborative efforts, and strategic alliances.

To learn more about joining the Healthcare Council and/or participating in our Shared Services, please contact Cheryl Thomas at 301-731-4700 or visit us at:

<http://www.healthcare-council.org/membership.html>

## Did You Know?

Nearly half (46%) of children in the U.S. report having experienced at least one traumatic event, according to a Substance Abuse and Mental Health Services Administration (SAMHSA) report.

## Announcing New Board Members

The Healthcare Council of the National Capital Area is pleased to announce the addition of two new members to the Board of Governors: Kevin DeBruyne and Tawana Nottingham. The Board provides leadership for carrying out the Council's mission to promote education, networking and collaboration in healthcare across the region – Maryland, D.C. and Northern Virginia and find opportunities for shared savings through the National Capital Area Shared Services business.

Mike Barch, Chairman commented, "We are very pleased to have Kevin and Tawana join our Board. With their combined years of experience working in business we look forward to their contribution to the growth of our overall business including the group purchasing business."



Mr. DeBruyne is Region Vice President of Premier, leading a team who support and deliver value to Premier owners in Virginia, Maryland and Washington, D.C. Kevin collaborates with the healthcare system senior executives to understand their organization goals and strategic imperatives. Kevin has 25 years of experience in healthcare focused on supply chain improvement, operational efficiency, revenue cycle optimization and information technology strategy and deployment. Prior to joining Premier, Kevin held various leadership positions with McKesson's consulting organization and its technology division. Before his role with McKesson, Kevin spent three years in Europe where he led sales and marketing for private label agreements with three European manufacturers to design custom products combined with information technology to reduce the overall cost per procedure. Kevin earned his BA in Business Administration from St. Michael's college. Kevin lives in Haymarket, Virginia.



Tawana Nottingham is President, CEO and owner of TRA Medical Supply, Inc. (TRA), a Woman Owned Minority Company located in Prince Georges County Maryland, specializing in distribution and manufacture of disposable medical supplies, green cleaning and paper good products. The company was founded by her late visionary husband and in 2012 Tawana took over operation. Prior to becoming President & CEO of TRA, Tawana operated her own consulting company, C&N Consultants, Inc., a local company specializing in event planning for corporations, non-profit organizations and government agencies. Before starting her own company Tawana served as assistant Controller, Systems and Control Manager and Internal Auditor for Omni Hotels. Born and raised in Virginia Beach, Tawana attended Hampton University. She currently serves on the board of The Bethune-DuBois Institute, The Philadelphia Martin Luther King Association and a community partner for Prince George's County Government.

### Save The Date

October 25, 2018  
HCNCA/Premier Fall Conference  
9:30 AM TO 3:00 PM

"Emerging Healthcare Trends: 2019" is the theme for this year's conference

Please mark your calendars and plan on joining your peers for this annual event. There is no cost and lunch will be provided.

### Save The Date

## BROTHER'S BROTHER FOUNDATION



*Invites you to celebrate 60 Years of  
Connecting People's Resources with People's Needs*

## BROTHER'S BROTHER FOUNDATION

*60<sup>th</sup> Anniversary Celebration  
Thursday, September 20, 2018  
Heinz History Center*

For more information visit: [www.brothersbrother.org/60thanniversary/](http://www.brothersbrother.org/60thanniversary/)

### SALARY SURVEYS

The 2018 Salary Surveys are now available. If your facility has not purchased The Wage & Salary Survey or the Executive/ Department Head Salary Survey, please contact the HCNCA office and order your copy or copies today. The Ex./Dept. Head Salary Survey is only released at the request of the C Suite office. Contact: [cethomas@healthcare-council.org](mailto:cethomas@healthcare-council.org) to order your copies or call 301-731-4700.

## Announcing New Partnership With CITI Healthcare



Your Challenge. Our Solution.

### New Partnership

#### Exciting News!!!



CITI has formalized a partnership with the Healthcare Council of the National Capital Area (HCNCA), and National Capital Area Shared Services, Inc. (NCASS), a 100% owned for-profit group purchasing company. This partnership allows CITI to offer its Data Archival Solution (DRIS), as well as other Healthcare solutions and services to the members of HCNCA and NCASS. CITI looks forward to bringing innovative solutions and services to the members of HCNCA and NCASS, and we anticipate this partnership to be very successful. The partnership between the organizations benefits the members of HCNCA and NCASS with offerings that will both streamline their processes *and* increase efficiencies, resulting in tangible cost savings.

#### **Epic**

CITI has finalized an agreement with Epic to have DRIS appear in Epic's App Orchard. This will give our Epic Customers better integration between DRIS and their Epic EHR. This is a very prestigious acknowledgement from Epic and their stakeholders. We appreciate their blessing of our DRIS Application. This feature will be available by the end of Summer 2018.

#### **CITI News and Growth**

CITI continues to expand our healthcare work as we strive to implement our archival solution DRIS at several new client sites, expand our work with Integration Buddy (our interoperability platform) and kick off a new project with Patient Buddy, our patient engagement platform.

#### **DRIS Project Extended for WellSpan**



WellSpan Health is a marquee customer for CITI. They have been using DRIS for the past two years to migrate full sets of patients' legal and medical records from their legacy systems in order to make that data available in their newly implemented Epic EHR. Due to the success of the project, WellSpan has recently added more applications to the scope, which will extend the project. CITI also helped Wellspan with Epic conversions and legacy support staffing requirements.

#### **Albany Medical Center selects CITI's DRIS for their Data Archival Project**

CITI celebrates our continued growth in 2018. CITI continues to be a leading provider of IT Solutions and Services which are now in use by some of the largest Healthcare Systems in the country. Our marquee clients include WellSpan Health, Integris, University of Vermont Health Network, BJC, Veridikal, and now Albany Medical Center. All of these customers are using leading EHRs such as Epic and Cerner. CITI's customer base includes Payers, Pharmacies, and Providers. Leadership from the leading EHR Companies and our healthcare customers agree that our solutions are innovative and add value to the healthcare systems with which we are working. We look forward to our continued growth and future additions of happy clients to the CITI Family.



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### The HCNCA/NCASS Board Adopts New Mission and Vision Statements

At the September 21, 2016 Board a new vision and mission statement were approved as recommended by the Strategic Planning committee. The new statements reflect the changing healthcare environment and the organizations purpose in serving it's membership.

**Council Vision:** "To meet the healthcare challenges of tomorrow by working together today."

The Council functions as a neutral intermediary to facilitate networking and to provide member driven services.

**Mission Statement** - "The Council (HCNCA) is a membership organization dedicated to helping members reduce costs, encouraging cooperative working relationships, and promoting quality healthcare in our region."

**"The Council":** The Healthcare Council of the National Capital Area, Inc. (HCNCA) is an organization of Providers of Care consisting of hospitals and allied health care facilities located in Maryland, Virginia and Washington, DC. The purpose of the Council is to provide for members "strategic and business advantages" that no single institution or system can efficiently or economically develop alone. Divisions of specific activity have been formed to carry on the ever changing tasks at hand. These divisions develop information and improve performance using cooperative networking meetings, surveys, group discussion and analysis and continuing education programs. The aim of the Council's wholly-owned subsidiary, National Capital Area Shared Services, Inc., (NCASS) is to serve its membership in the promotion of programs and services that will enhance the members' ability to operate their organizations successfully and cost effectively with integrity and competency.

Healthcare Council is a not-for-profit 501(c)(3) corporation  
The Council has opportunities for Associates: For membership information, call 301-731-4700

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### Did You Know?

A 2017 survey from Statista found that 23 percent of employees reported their company provided burnout prevention programs and 13 percent offered reintegration programs, demonstrating the increasing acknowledgement among companies of the importance of stress relief and dangers of burnout among employees - [www.statista.com](http://www.statista.com).