

# Executive Report

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## Begin 2011 with MHCA Winter Conference in Florida

Conventional wisdom would claim that it will be warmer in Florida February 22-25 than it will be in most other parts of the country. We are sticking with CW. So make your plans now to dip your toes in Florida's Gulf Coast waters off Clearwater Beach when MHCA meets there for our 2011 Winter Conference! We will meet again at the lovely Sandpearl Resort where last year we celebrated our 25<sup>th</sup> anniversary. Preliminary meeting materials have been mailed and registration will be available online at [www.mhca.com/Meetings/2MeetingRegistration-47.asp](http://www.mhca.com/Meetings/2MeetingRegistration-47.asp). Deadline for both conference registration and hotel accommodations is January 28.

A "soft opening" of the Conference begins on Tuesday with three committee meetings: International



Planning, Information and Technology, and Performance Improvement. Those meetings will be held in the late afternoon – be watching for details as our schedule is firmed up.

Wednesday's General Session will open at 8:30 am and feature author Bill Jensen with his message of simplicity and efficiency in the work place (*see article below*). Our annual Business Meeting and Luncheon will be held at noon following Jensen's address. Make your luncheon reservations right away to secure a place at the table. At the luncheon MHCA Board Chair Tony Kopera will give a "state of the association" address, and Treasurer Jerry Mayo will report on the association's finances. Awards will be announced at the luncheon for those excelling in MHCA's Customer Satisfaction Management System.

A full afternoon will be devoted Wednesday to the myriad issues surrounding national healthcare

**See Winter Conference, page 5**

## Meet our Keynoter - Bill Jensen

Bill Jensen is today's foremost expert on work complexity and cutting through clutter to what really matters. He has spent the past decade studying business's ability to design work - much of what he has found horrifies him!

Jensen is an internationally-acclaimed author and speaker who is known for provocative ideas, extremely useful content, and his passion for making it easier for managers and employees to work smarter and accomplish extraordinary feats.

His first book, *Simplicity*, was hailed as a "breakthrough in the design of communication and understanding,"

and was the Number 5 Leadership/Management book on Amazon in 2000. His next best-sellers were *Work 2.0* and *Simplicity Survival Handbook: 32 Ways to Do Less and Accomplish More*.

Jensen's latest book, *What is Your Life's Work?*, captures intimate exchanges between mothers and daughters, fathers and sons, and caring teammates, all talking about what matters at work and in life.

Our speaker has over 25 years of experience in communication and change consulting. He holds degrees in Communication Design and Organizational Development and is CEO of The Jen-

sen Group, whose mission is "to make it easier to get stuff done". Among the Jensen Group's clients are Bank of America, Merck, Pfizer, Duracell, NASA, The World Bank, Walt Disney World, American Express, and the Guangzhou China Development District! ❖



*A Message from the Chairman***Two Years in the Life...**

The Board Chair of MHCA serves for a maximum of two years, but those two years typically are preceded by service as Member-At-Large and two years in each of the other Board officer positions...eight years of training!

This model assures both continuity and familiarity with MHCA operations while providing regular turnover in Board leadership. New perspectives are added to the Executive Committee as each new member assumes a leadership position. Additionally, the Past Chair remains on the Executive Committee until she/he is succeeded by an outgoing Chair.

So, I have served on the MHCA Executive Committee for almost ten years. During that time we have seen and experienced a variety of things, both good and bad, that have tested leadership, persistence and patience. The effects of the national economy and the resultant stresses are experienced by us all. Their impact provides additional challenges as we lead our organizations in this time of changing healthcare policies.

A simple indicator of changing times is MHCA membership. We ended 2008 with 146 members. We ended 2009 with 136 members. At the end of 2010 we have 138 members. Financial problems caused some members to withdraw from MHCA, at least temporarily. Another contributing factor was the merger of organizations, a trend that will no doubt continue as pressures increase to reduce administrative costs and demonstrate value for both public and private revenues.

What has MHCA done to facilitate our navigating the changing landscape of healthcare? The presentations at our quarterly meetings provide part of the answer to that question.



*Anthony A. Kopera, PhD*  
**Chairman**  
*MHCA Board of Directors*

**Meeting Keynotes and Presentations**

The future of healthcare and the integration of primary and behavioral healthcare have been issues addressed at several of our meetings. A notable, extended presentation by Dr. David Whitehouse on “Neuroscience Informed Mental Health” proved to be highly technical yet wonderfully accessible and thought provoking.

Marketing our services has always been a challenge, one that we now face in the context of identified generational differences. Presentations on the use of social networking and technology informed us of some effective answers to the challenges.

Fund development and income diversification have become critically more important as public funding has diminished or been limited because of strains on state economies. A series of MHCA presentations provided information and guidance.

Housing for those we serve is an important part of the recovery model of care. Several MHCA members shared their successful housing models with us.

Accountability in the healthcare domain means the ability to demonstrate cost-effective outcomes. Taking the lead on this topic has been our Performance Improvement Committee (formerly Applied Research/Outcomes) Any discussion of outcomes or cost-

**MHCA MISSION STATEMENT**

MHCA is an alliance of select organizations that provide behavioral health and/or related services. It is designed to strengthen members' competitive position, enhance their leadership capabilities and facilitate their strategic networking opportunities.

**THE EXECUTIVE REPORT**

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138 Members in 31 States

*See Two Years, page 4*

## Knowledge Network Summit Held with MHCA Conference

A year ago, in November 2009, Centerstone Research Institute (CRI) unveiled four new initiatives to more quickly move behavioral health research findings into clinical settings. The initiatives were conceived by leaders in community behavioral health and mental health research as part of the inaugural Knowledge Network Summit, "Using Collaboration to Close the Science to Service Gap in Behavioral Healthcare."

In San Francisco on November 9, 2010 the Knowledge Network met again for participants to further advance their agenda. The meeting was held one day prior to the start of MHCA's 2010 Fall Conference and was co-located at the JW Marriott, Union Square. The Summit featured an interactive panel of leaders in the behavioral health field and provided opportunities for Knowledge Network members to provide updates, collaborate on existing projects and continue work on their strategic plan to move research into practice in community behavioral health care.

For more information contact Summit coordinator April Bragg, PhD of CRI at [april.bragg@centerstoneresearch.org](mailto:april.bragg@centerstoneresearch.org) or phone 615-460-4139.



*MHCA Board Chair Tony Kopera (standing) greets Knowledge Network leaders April Bragg, PhD and Dennis P. Morrison, PhD.*

## Members in the News

### New Jersey's Davison Rejoins

MHCA is pleased to welcome back to membership the Mental Health Association of Essex County under the direction of CEO Robert N. (Bob) Davison. After a two year absence, it is great to have Bob participating again as New Jersey's 11<sup>th</sup> member. MHA of Essex is headquartered in Montclair and serves the northeast area of the state. Learn more about MHAEC at their website: [www.mhaessex.org](http://www.mhaessex.org)



*Bob Davison*

### Rutherford Follows Rice at Florida's Mental Health Care

Since 1949, Hillsborough County on Florida's west coast has been served by a behavioral healthcare organization devoted to its Tampa centered region. First known as the Child Guidance Center, Mental Health Care, Inc. broadened its services in 1962 to serve a wider population. On November 8, 2010 Joseph F.



*Joe Rutherford*

Rutherford, MA, MBA was named Chief Executive Officer to succeed Julian Rice, who has served in that role for nearly 20 years and who will remain part of the leadership team. Since April 2009 Rutherford has served as CEO of Avita Community Partners, an agency that serves persons with mental illness, developmental disabilities and addictive diseases in northeast Georgia. Previously he was associate director for Northside Mental Health Center Inc. in Tampa.

### Valley Cities Counseling and Consultation Seeks New CEO

Valley Cities Counseling and Consultation of Auburn, Washington has announced the resignation of Faith Richie who has led VCCC for four years. "We will truly miss Faith and her solid leadership of this organization, but because of her organizational skills, Valley Cities has a strong senior leadership team in place," said board chairman Brian Wilson. "Valley Cities is fiscally sound and has highly skilled staff."

Development Director Pam Taylor said Valley Cities has made many advances in the past four years with Richie at the helm, expanding its sites, services, housing development and acquisition. It has also enjoyed a 19% growth rate and low staff turnover during that time. Richie



*Faith Richie*

has accepted an offer from Alameda, California-based Telecare Corporation as vice president for national marketing and program development.

Serving as Interim CEO while VCCC conducts a nationwide search is Chief Operations Officer, Stacey Devenney, MA.

### Best Practice Awards

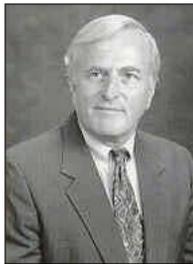
Users of MHCA's Customer Satisfaction Management System are reminded that deadline for submitting data is January 15, 2011 to be considered for the Best Practice Awards to be given February 23 in Clearwater Beach, Florida. Data must pertain to services provided in 2010. For information, contact Nancy Maudlin: [nmaudlin@mhca.com](mailto:nmaudlin@mhca.com)

## New Director Appointed to MHRRG Board

A new director has been named by MHCA to the Board of Directors of Mental Health Risk Retention Group (MHRRG). He is Roger D. Teese, a well seasoned insurance executive from Charlotte, Vermont. Teese fills the Board vacancy created by the retirement of George Chaffee, one of MHRRG's founding directors, and will assume office at the February 2010 Board meeting.



*Roger D. Teese*



*George Chaffee*

Since 1973 Teese was associated with Smith Bell and Thompson, a Vermont insurance company acquired in 2005 by Hilb, Rogal & Hobbs. He served as President/CEO and Principal of both Smith Bell & Thompson and the SBT Captive Management Company. Teese also was the founding President and Chairman of Vermont's Captive Insurance Association. He retired in 2008 but remains involved

in the insurance industry through Teese Consulting, LLC.

MHCA salutes outgoing Director George Chaffee whose prominence in Vermont's insurance industry is legend. As the former Vermont Insurance Commissioner, Chaffee championed establishing a captive insurance industry in that state. At the time (1980) in the U.S. only Colorado and Tennessee offered an environment for captive insurance. Today, the Vermont captive industry claims some 600 companies, ranking it as the third-largest captive market in the world, behind Bermuda and the Grand Caymans. Of those, MHRRG is a standout.

Developed by MHCA in 1985, MHRRG offers stable and affordable professional/general and directors/officers liability insurance to community behavioral healthcare organizations. Each insured is a shareholder in, and part owner of, the company. The MHRRG Board of Directors is composed of eleven Directors, six of whom are appointed by MHCA. Two are appointed by the National Council and three are elected by the Class C shareholders. Management for MHRRG is provided by Negley Associates of Roseland, New Jersey. ❖

## QI Collaborative Concludes Phase Two at Florida Conference

MHCA's Quality Improvement Collaborative: Phase Two was designed to include a broad spectrum of participants. Most MHCA members have attended the quarterly meetings, and others have participated virtually through webinars, etc. In Phase Two we have also included observers in both the sessions and webinars to learn more about the QI process and what other MHCA members have been able to accomplish in their projects.

The range of projects includes improvement initiatives in access, engagement and prevention, documenta-

tion and clinical process improvement, supervision and workforce development. Participants have shared their experiences, learned from other projects, and expanded their expertise in quality improvement. Sandy Hall of Summit Point and Dr. Catherine Carter of Valley Mental Health have provided leadership and technical assistance along with facilitator Dr. Allen Daniels. At MHCA's February meeting we will showcase outcomes and progress on the various projects and explore opportunities for a third phase. All are welcome to attend. ❖

## Two Years, continued from page 2

effectiveness leads to questions of how we demonstrate the value of what we do. That leads to investigations of business intelligence and informatics and their relationship to process and quality improvement.

Data management and data systems discussions have led us to presentations on electronic health records, health information exchanges and meaningful use.

All these issues, topics, and presentations challenge us to continue our individual and collective growth as leaders. Individually, we provide direction, stability and the values that will assure our organizations' continued success in providing care to those who are often ignored and forgotten in our communities. Our noble cause is contributing to the well-being of the people and communities we serve.

Collectively, we form a strong and respected voice in the healthcare reform debates. Nationally and internationally, we, as MHCA, are looked to for solutions. MHCA, always consistent with our commitment to excellence in leadership, provides keynote addresses, presentations, and forums as opportunities for us to focus our attentions and energies on the many facets of leadership: anticipating the future, shaping the future, extreme leadership with a heart. By helping us repeatedly ask ourselves what business we are in MHCA assists us in evolving and adapting to our ever more rapidly changing environments.

## MHCA Invests in its Members

Although the annual membership fee for MHCA is modest, we are in strong financial position. Assets, even in these dire economic times, continue to grow. Several years ago, Board chair Gary Lamson suggested that we acquire office property making use of our assets as an investment. Currently the MHCA offices are mortgage-free and rent generating.



↵ As our assets remained strong, Board chair Dick Desanto challenged the Board to find ways to use those assets to invest in MHCA members. Three projects have been funded from assets rather than operating revenue: the MHCA Integrated Health Learning Community led by Kathy Reynolds and Fred Michel that completed its work with a poster session during our recent meeting in San Francisco; the Quality Improvement Learning Community led by Allen Daniels which is in its second iteration; and the conversion to web-based data entry for the MHCA Benchmarking Survey through iCentrix.

**Strategic Plan**

The process of reviewing and renewing our strategic plan began at Seattle’s August 2009 meeting. The process was completed in Clearwater Beach in February 2010.

Led by Stu Winby, an appointed committee met twice to prepare a draft plan for presentation to the membership.

Given the changing economic and political environments, there was a felt need to reaffirm the values that guide MHCA and to prepare members for the future of healthcare. Accordingly, MHCA recognized continuing imperatives and adopted five additional ones. The newly adopted imperatives anticipate coming changes in healthcare systems, policies, regulations, and the increased need to demonstrate value in new accountabilities.

This plan will take us through 2012. Members may reacquaint themselves with the complete plan in MHCA’s document archives.

**25<sup>th</sup> Anniversary**

Our February 2010 conference provided an opportunity for us to celebrate all that MHCA is and does. It was a time to appreciate accomplishments and colleagues. It was a time to enjoy the company of former members. It was a time to thank

the vendors who support our efforts through sponsoring receptions and join with us as we consider responses to the myriad challenges we face as our business evolves. It was a time to be grateful for the incredible MHCA staff. It was a time!

As I leave office at the close of the February 25 Board meeting, I look forward to continued participation on the Executive Committee as Past Chair. With all of you, it is a privilege to be part of MHCA, shaping the future we share. ❖

**Winter Conference, continued from page 1**

reform. A panel is being assembled to provide a multi-faceted study of key issues emerging within reform and recommendations for behavioral healthcare’s position in that environment.

We look forward on Thursday to hearing from our Kansas members representing Kansas Health Solutions (KHS). Presenting with David Johnson, CEO of the Bert Nash Center and Pete Zevenbergen, CEO of Wyandot, will be Michael Goldberg, CEO of KHS and Mike Hammond, Executive Director for the Association of Community Mental Health Centers of Kansas. KHS is the managed-care organization for Medicaid mental health benefits in Kansas. Formed in 2007, it has more than 2,600 providers in its network, and in FY10 served more than 64,000 members. To prepare for this presentation, you might visit their website: <https://www.kansashealthsolutions.org/info>.

Afternoon sessions include a “Learn About It” program provided by UNI/CARE exec May Ahdab, PhD. Dr. Ahdab describes her presentation this way: Utilizing a certified Electronic Health Record and measuring Meaningful Use require more than a partnership with your software vendor. The cultural and process transformations

are complex and as such will impact your entire organization. This session will address the requirements for clinical compliance, security, interoperability and Meaningful Use and the processes and practice standards that will need to be implemented within your organization to ensure a successful implementation. Also meeting Thursday afternoon will be the Marketing and Fund Development Focus Group. MHCA members should watch for Focus Group program details in our online agenda ([www.mhca.com/Meetings/2agenda-47](http://www.mhca.com/Meetings/2agenda-47)). Concluding Phase Two of its work, the MHCA Quality Improvement Collaborative will be held from 1:30 to 4:30 pm and will include a showcase of the outcomes and progress to date on participants’ projects (*see QI Collaborative, page 4*).

Also scheduled for our conference is a presentation by finalists in the 2010 Negley Awards for Excellence in Risk Management. They will present their programs on “Avoiding Wrongful Termination – Creating Policy and Practice to Avoid Risk” for final judging by Board members of Mental Health Risk Retention Group (MHRRG). First place prize is \$10,000 and two runners-up take home \$5,000 each.

Friday’s limited agenda includes Board meetings of both MHCA and MHRRG that morning. In addition, the annual MHRRG Shareholders meeting will be held just prior to the MHRRG Board meeting.

And we close with this...  
*The birds are gone, The ground is white,  
 The winds are wild, They chill and bite;  
 The ground is thick with slush and sleet,  
 And I barely feel my feet.*

We don’t know the source for this bit of rhyme, but if it applies to where you are, take heart. There’s always MHCA’s Winter Conference and Annual Meeting in Florida!



## Behavioral Health Leaders Convene in San Francisco for MHCA Fall Conference

**It's** Wednesday morning in San Francisco. MHCA members, both CEOs and top management staff, are picking up conference materials, catching up with colleagues and filling their coffee cups before settling in for the morning's general session.. Keynote Steve Farber chats with MHCA CEO Don Hevey at the front of the room. They are joined by Board Chair Tony Kopera who is preparing to welcome the crowd to MHCA's 2010 Fall Conference. It's a friendly scene in an atmosphere of anticipation. Leaders have come to be recharged, to learn something they can take back home to fire up their teams and enhance their professional performance.

Farber delivers. His message, entitled "Extreme Leadership", inspires and challenges, quickly evolving as both motivational and reflective. First and foremost, he says, "Extreme Leadership is not a solo act; it doesn't happen in a vacuum. You're not going to change the world by yourself. It's your job to recruit, cultivate, and develop the up and coming Extreme Leaders in your midst." As he warms to his subject, Farber urges leaders to reach higher, go

farther, and be willing to experience the admittedly indelicate "OS!M" - that



**From left: Keynote Steve Farber joins MHCA CEO Don Hevey and Board Chair Tony Kopera prior to Fall Conference opening session.**

moment when one realizes with alarm the enormity of a commitment but stretches into it, claiming for self and team a willingness to risk in order to prevail (see Farber describe the OS!M to another audience at <http://www.youtube.com/watch?v=18cP8aT6jAg>). It was a great message to kick off our conference, and subsequent presentations, forums and focus groups were inspired to expand on Farber's enthusiasm.

On Wednesday afternoon, the year-long MHCA Integrated Healthcare Learning Community group enjoyed a poster session that showcased the efforts of ten integration partnerships. Jeff Capobianco of the National Council was on hand to coordinate the session.

MHCA's Information and Technology Focus Group heard two presentations, both addressing the electronic health record. First, Afia's Jeremy Nelson and Matt Hoffman described their vendor selection tool and reminded members that MHCA has entered a partnership with Afia for discounted pricing. Next,

Coleman Professional Services CEO Nelson Burns together with Qualifacts President David Klements told of the Ohio EHR Collaborative that provides behavioral healthcare organizations the ability to enter the EHR arena at lower cost, maximizing efficiencies to improve implementation.

Thursday's general session featured an early morning presentation by Carla Javits, CEO of REDF, a venture philanthropy organization dedicated to creation of jobs and

### IT Focus Groups hear EHR presentations

**Left (from left) Afia's Jeremy Nelson and Matt Hoffman flank IT Chair Chris Wyre.**



**Right (from left): Chris Wyre joins David Klements of Qualifacts and Coleman's CEO Nelson Burns.**



economic opportunity for those overcoming homelessness, mental illness, addiction, incarceration, chronic poverty and joblessness. Introduction and overview were given by MHCA member Steve Ramsland, CEO of Buckelew Programs. Then MHCA member organization EMQ FamiliesFirst showcased their foster care program that has been dramatically enhanced through application of evidence based practice elements. Presenters included CEO Darrell Evora, COO Lyn Farr, and researcher Abram Rosenblatt.

A panel including MHCA and SATVA members convened an attentive audience Thursday afternoon on the topic of “Meaningful Use” federal regulations for electronic health records. SATVA panelists were Bill Connors, President of Sequest Technologies, and Mike Morris, President of Anasazi Software. MHCA was represented by IT Chair Chris Wyre and Danielle Byron, CIO for Community Counseling Centers of Chicago. (see p. 8)

Thirteen vendor exhibits on display during the conference provided key information on products and services available

**Integrated Healthcare Poster Session**

*Left (from left): ACMS CEO Greg Disy explains their healthcare integration efforts to MHC Dane County CEO Bill Greer.*

*Right (from left): Community Healthcare’s Rick Roberts chats with ServiceNet’s Bruce Barshefsky.*

*Bottom Left: The H Group’s Sharon Adams represents their integration plans.*

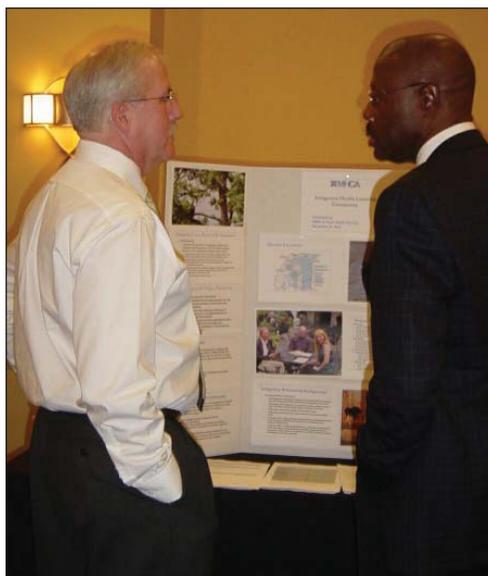
*Bottom right: Centerstone’s Bob Seigman talks with Heritage BHC CEO Diana Knaebe.*



**Thursday’s Featured Presentations**  
*Left (from left): Terri Wilson greets speakers Steve Ramsland and Carla Javits following their presentation on Partnering for Success.*

*Below (from left): EMQ FamiliesFirst staff describe use of evidence based practice elements in foster care. Abram Rosenblatt, Lyn Farr and CEO Darrell Evora*

to MHCA members. They included Afia, Anasazi Software, ClaimTrak Systems, Essential Learning, Genoa Healthcare, iCentrix Corporation, MHRRG, Peer Partners, QoL meds, Qualifacts, Sequest Technologies, The Echo Group and UNI/CARE Systems. Graciously hosting our social events were Genoa Healthcare, QoL meds and MHRRG/Negley Associates. ❖



## Making Sense of Meaningful Use

If you were among the brave souls who ventured into MHCA's "Meaningful Use" workshop at our Fall Conference in San Francisco, you probably now have a headache. Take two aspirin and call the experts but not before expressing your eternal gratitude to your IT/EHR staff. They've got a lot of work to do!

Workshop presenters Bill Connors of Sequest and Mike Morris of Anasazi Software were impressive in their knowledge of the history, timelines and requirements of the American Recovery and Reinvestment Act of 2009 (ARRA) and its HITECH Funding provisions within which "meaningful use" takes shape.

In 2004 then President Bush issued an Executive Order "...to provide leadership for the development and nationwide implementation of an interoperable health information technology infrastructure to improve the quality and efficiency of healthcare..." Part of ARRA supports the adoption of electronic health records by providing financial incentives under Medicare and Medicaid to hospitals and eligible professionals who implement and demonstrate "meaningful use" certified EHR technology.

In their presentation, Connors and Morris, together with MHCA members Chris Wyre and Danielle Byron, delved deeply into the specifics of "meaningful use." As one in the



"Meaningful Use" Presenters (from left): Chris Wyre, Bill Connors, Mike Morris and Danielle Byron

audience said afterwards, "(This was) informative and overwhelming and let us see what our EHR implementation teams are dealing with." Later at the MHCA Board of Directors meeting, Jon Cherry added, "All CEOs should hear the detail given by Connors and Morris to fully appreciate the complexities of (meaningful use) compliance." Connors and Morris, both prominent members of the Software and Technology Vendors Association (SATVA), have offered a webinar on this complex and essential topic for MHCA members. Be watching for information as details develop.

The SATVA Powerpoint file provided at this MHCA workshop is available online at MHCA's Document Archive site: [http://www.mhca.com/Members/DocArchives/doc\\_detail2.asp?DocumentID=632](http://www.mhca.com/Members/DocArchives/doc_detail2.asp?DocumentID=632) ❖

### Minimizing Medication Errors

An enclosure to this issue of *Executive Report* is the 2010 Negley Award for Excellence in Risk Management winning entry by LifeStream Behavioral Center. It won the Board of Directors' Award (\$5,000)

and addresses "Minimizing Medication Errors through the Implementation of an Electronic Clinical Record."

To learn more, contact LifeStream's QI/RM Director, Tim Camp at [tcamp@lsbc.net](mailto:tcamp@lsbc.net).

## CALENDAR



### HAPPY HOLIDAYS!

The MHCA office will be closed December 27-31 in recognition of Winter Holidays.

#### MHCA 2011 Winter Conference and Annual Meeting

**Dates:** February 22-25, 2011  
**Location:** The Sandpearl  
 Clearwater Beach, Florida  
**Phone:** 877-726-3111  
**Rate:** \$283 single/double  
**Deadline:** January 28, 2011

#### MHCA 2011 Spring Conference

**Dates:** May 24-27, 2011  
**Location:** Sheraton Boston Hotel,  
 Boston, Massachusetts  
**Phone:** 888-627-7054  
**Rate:** \$249 Single/Double  
**Deadline:** April 21, 2011

#### MHCA 2011 Summer Conference

*Tentative Arrangements - details will soon appear in online calendar*  
**Dates:** August 2011  
**Location:** Portland, Oregon

#### IIMHL 2011 Conference

**Dates:** September 12-16, 2011  
**Location:** San Francisco, California  
**Details:** [www.iimhl.com](http://www.iimhl.com)

#### MHCA 2011 Fall Conference

**Dates:** November 8-11, 2011  
**Location:** Westin Kierland  
 Scottsdale, Arizona  
**Phone:** 480-624-1000  
**Rate:** \$219 Single/Double  
**Deadline:** April 21, 2011

### It's time for dues!

MHCA member dues were invoiced in November and are due no later than January 31, 2011.

### And time for Benchmark Data

Data will be collected through November 2011 for the coming MHCA Benchmark Survey.

For those with fiscal years ending after September 2011, please enter your 2010 information. You may start entering data in early January 2011.

Questions? Contact Nancy Maudlin at [nmaudlin@mhca.com](mailto:nmaudlin@mhca.com)