



NATIONAL ASSOCIATION FOR HEALTHCARE QUALITY

**NAHQ Leadership Council Meeting
32nd Annual Conference, September 9, 2007
Hynes Convention Center, Boston, Massachusetts**

The meeting is called to order by President Heidi Benson. Heidi expressed appreciation for the hard work that everyone has done throughout the year. Welcome was given to the NAHQ members who aren't members of the Leadership Council, the Past Presidents, the Massachusetts Healthcare Quality Association members, the state presidents, the representatives of Healthcare Quality Certification Board (HQCB), and the Quality Volunteers.

The 2007 NAHQ Board of Directors was introduced:

Thomas Smith, President Elect
Linda Scribner, Professional Development Director
Anna Marie Butrie, Immediate Past President
Carol Lee Hamilton, Member Services Director
Sandra Grinder, Secretary/Treasurer
Stacy Sochacki, Ex-Officio, Executive Director
Joan Boldrey, Ex-Officio, HQCB Chair

I. Roll Call

Sandra Grinder gave an account of the Leadership Council registration: 84 Leadership Council members, 8 members of the Board of Directors, and 9 Past Presidents, for a total of 101. More than 50% were present, which constituted a quorum.

II. Adoption of Agenda

The board received a late resolution from Frank Appel, Past President. Resolutions require a 60-day notice, and if this is lacking, the resolution must have approval of two-thirds of the Leadership Council to be considered for discussion. Heidi noted that the resolution had been e-mailed to the Leadership Council prior to the meeting. She then read the complete resolution, which is attached to the minutes. The resolution contained 3 parts: (1) that NAHQ formally adopt the Malcolm Baldrige National Quality Award criteria for performance excellence as a performance management system, (2) that the NAHQ Board of Directors conduct an organizational self-assessment using the Baldrige criteria, reporting the findings and recommendations for improvement at the 2008 annual

meeting and reporting continued progress at every meeting thereafter, and (3) that NAHQ submit an application for evaluation to the national Baldrige program or at a state program such as the Lincoln Foundation for Performance Excellence no later than 2010. The question was called on whether to add the item to the agenda. A total of 85 voted in the affirmative, which met the requirement for the two-thirds majority, so the resolution was added to the agenda.

III. Revised Agenda

The vote was called to adopt the revised agenda, and a majority voted in the affirmative. It was noted that the chair reserves the right to change the agenda if necessary.

IV. Standing Rules of Leadership Council

An electronic file with the standing rules and draft agenda had been previously sent to the Leadership Council. A motion was made and seconded to accept the standing rules. No discussion was required. A vote was taken, and more than two-thirds voted in the affirmative. The rules were accepted.

V. Election Results

Kathy McWhorter, Chair of the Nominating Team, provided the results of the 2007 NAHQ elections:

Cathy Munn, President Elect
Lenard Parisi, Member Services Director
Sharon Bartelt, Nominating Team
Phyllis Dorrough, Nominating Team
Maureen Plumstead, Nominating Team

The Leadership Council members were encouraged to nominate candidates for the next election. Currently, the open positions are Secretary/Treasurer and Professional Development Director. Nominations are due January 18, 2008.

VI. Annual Report and Reports from the Market Research Team and Governance Assessment Task Force

Heidi opened a discussion about the accomplishments of the year and the overall state of the association. She noted that a 2006–2007 annual report is now available on the NAHQ Web site and that this report was provided to the Leadership Council on September 5, 2007.

The NAHQ board has been on a journey toward excellence in order to transform the association from a good one to a great one. The focus has been on implementing the association's strategic plan, which has four major areas of focus: professional development, member services, alliances and partnerships, and governance. In areas of mutual interest, NAHQ has collaborated with HQCB through a Joint Organizational Leadership Team (JOLT). The board has also devoted time to overseeing the financial goals of the organization.

Among many changes that have occurred in the last year, NAHQ conducted market research, which resulted in refreshed mission and vision statements, new logos, and new marketing approaches (taglines and messaging platforms for internal and external customers) for both NAHQ and HQCB. NAHQ's enhanced new Web site was launched on September 7, 2007. *NAHQ E-News*, NAHQ's new monthly e-newsletter, premiered on September 8, 2007. It replaces the print *NAHQ News* and the monthly electronic *E-Qual Tips*. Most of the changes, both those that have occurred and those that are forthcoming, were driven by member feedback, including input from the Leadership Council.

In January, the board voted to put together the Governance Assessment Task Force to evaluate the association's governance structure. This decision was made following feedback from the Leadership Council and other members who expressed frustration with the current governance approach. Furthermore, the board wanted to determine how to more effectively and efficiently achieve the association's mission, vision, and goals. The process for conducting this assessment was reviewed.

- **April** – Phone interviews with representatives from various parts of the association were conducted.
- **May** – The NAHQ board met with a facilitator and members of the Governance Assessment Task Force. The task force, which included representatives of the board, Team Leaders, Past Presidents, State Presidents, and members at large, made recommendations to move NAHQ forward at that meeting.
- **June–July** – Recommendations were finalized and e-mailed to major NAHQ constituency groups. Phone calls were held with the Leadership Council, Nominating Team, Past Presidents, State Presidents, Team Leaders, and the Communities of Practice Team to explain the proposal, answer questions, and receive feedback.
- **August** – Two additional calls were held with state leadership groups to solicit further input. A Zoomerang survey was conducted to evaluate the willingness of the membership to move forward on the proposal. The recommendations as a whole were endorsed with a 97% approval rating.

Approval for the individual planks within the proposal were as follows:

- Creation of an external advisory board: 100%
- Change in the composition of the board: 93%
- Creation of a State Leadership Network: 100%
- Creation of Special Interest Groups (SIGs), which included the move away from a Leadership Council to participation by the full membership: 97%
- Change in the composition of the Nominating Team: 99%

Heidi noted that time will be allotted after the official business portion of the meeting for the Leadership Council to provide input about implementation strategies. The feedback obtained through the focused discussion will guide bylaws revisions and procedural changes. Heidi noted that if all goes as expected, voting on those bylaws should occur sometime in November or December, with implementation of the changes to be phased in over time.

The anticipated implementation timeline

- Creation of a State Leadership Network – January 2008
- Annual membership meeting to become town hall meeting – 2008 annual conference
- Change in the composition of the board – The HQCB chair will be able to vote in January 2008. The Nominating Team will solicit nominations for the new SIG position on the board for 2009.
- Change in the composition of the Nominating Team – Additional people will be appointed in 2008, and the current team members will continue to serve their terms, transitioning toward a fully appointed team by 2010.
- Creation of SIGs – SIGs will be built up from the current Communities of Practice (COPs), driven by member need.
- Creation of an external advisory board – Leaders within the healthcare field will be identified within the next several months.

V. Financial Report – Sandra Grinder

Sandra Grinder presented the 2006–2007 financial report, which included the combined assets of NAHQ, HQCB, and the Healthcare Quality Foundation (HQF). The assets have steadily grown through investments and through the transfer of HQCB's excess reserves to NAHQ. The decline in net revenue is the result of the 2006 investment in the market research project. The conference cancellation in 2005 was a positive because of the insurance reimbursement. Revenue has always exceeded expenses; however, for the first time NAHQ will see decreased revenue for 2007 as a result of investments in projects. Donations to HQF have increased, and the amount of grants given has increased. The target range for operating expenses is 6–8 months in reserves, and NAHQ has exceeded that amount. Information from Heidi in the summer 2007 *NAHQ News* stated that, based on future financial projections and restructuring, a dues increase has been approved for January 2008. Members may renew for 2008 at the 2007 rate, provided the renewal application is submitted by December 31, 2007.

VI. Alliances and Partnerships – Thomas Smith

State Leadership calls were combined this year to include State Presidents and Leadership Council members. More than 50 leaders were present on each call, with an average of 27–30 states represented. State leaders were engaged this year to assist with providing education on the calls and obtaining feedback. Two of the affiliated state associations provided education for the calls this year. Indiana provided information on strategic planning, and Delaware gave a presentation on membership recruitment and retention. The goal for 2008 is to continue to learn from those states using best practices, to have the association's agendas developed more by the states, and to increase traffic on the State Leaders' Listserv. State visits by board members (by invitation) were implemented so that the board could be more visible. Ten visits were made in 2007, and four are planned for 2008. NAHQ's willingness to send a board member does not depend on the number of individuals in attendance at the state meetings. An HQCB board member is also attending the state sessions with the NAHQ board member.

Partnerships with the National Quality Forum and the Joint Commission Professional and Technical Advisory Committee (PTAC) continue. Barbara Corn, chair of the NQF Team,

was recently elected as vice chair of the NQF Quality Measurement, Research and Improvement Council. Susan Goodwin has been chair of the Hospital PTAC for the past 2 years. She is continuing the work of NAHQ's Joint Commission PTAC Rapid Response Task Team on education, standards, and national policy and will meet with the Joint Commission at the end of September in Washington, DC, to engage its lobbying group to provide information to the NAHQ membership from a governmental standpoint. NAHQ is also currently developing alliances with the American Health Information Management Association (AHIMA), the American Society for Healthcare Risk Management (ASHRM), and the Case Management Society of America (CMSA).

VII. Member Services – Carol Lee Hamilton

Membership has increased during the past few years. Current membership is 4,980, with 885 new members joining since January 2007. The calling project to welcome new members is still in its pilot stage; a first round took place with the state new-member calls, and a second round is now occurring. Five affiliated states are participating: Arkansas, Florida, New York, Ohio, and Texas. Quality Volunteers are making calls to two unaffiliated states, Alabama and Oklahoma. These calls provide states with the opportunity to reach the new members and share information regarding their state associations.

“Virtual receptions” were begun in spring 2006. The teleconference calls introduce new members to the association, and a slide presentation is sent to participants before the call. AHIMA is looking at introducing this same format.

Through the work started by Nancy Claflin, the number of Quality Volunteers has grown. The former Volunteer Activities Board was improved and is now called the Quality Volunteers Board. Members can submit their résumés online and indicate a show of interest in various volunteer opportunities with NAHQ.

Volunteer Cheer is sent out every month to Quality Volunteers through the Quality Volunteer and Member Listservs. For the second consecutive year Quality Volunteers have been available to serve as conference guides.

The response rates for members' participation in the Zoomerang surveys on the Web site, mission and vision, and educational offerings were very high.

Communities of Practice in three areas—Hospital/Acute Care, Ambulatory/Non-Acute Care, and Professional Issues—are currently open to participants and are managed by the Communities of Practice Team, led by Pat Ford. Participation is made available on the NAHQ Web site. The team, which has faced some challenges, has recommended three new practice areas: Managed Care, Behavioral Health, and Home Health. The team wants to be more responsive to those who are not working in acute care. The existing and proposed COPs will be the forerunners of the forthcoming SIGs.

VII. Professional Development – Linda Scribner

In 2007, for the first time in NAHQ's history, the conference program book and session handouts were made available electronically, and more of the registration process was handled electronically. These initiatives enable NAHQ to remain competitive with like associations. Thanks to feedback from attendees, we learned about ways to improve these processes further and will work to incorporate them.

On the basis of member feedback, NAHQ offered additional educational sessions during 2007: Webinars, audioconferences, and regional courses. The audioconferences and Webinars have been very well attended, with representatives from 37–50 sites attending each offering. These offerings will be continued next year; a schedule will be available in early 2008.

The *Journal for Healthcare Quality* is one of the highest-rated benefits of membership, and the September/ October 2006 special issue on rural healthcare quality won a 2007 APEX Award for Publication Excellence in the category of Magazines and Journals—Writing. Luc Pelletier has been the editor in chief of the journal for 10 years and will be resigning at the end of 2007. A search for his replacement is under way. Luc was unable to be at the conference because of a recent surgery. He will be recognized publicly for all his hard work and efforts at the 2008 conference. The NAHQ board has approved a new award for next year for journal service and writing.

NAHQ E-News is a monthly electronic publication replacing *NAHQ News* (the quarterly print newsletter) and *E-Qual Tips*. The first issue (September 2007) featured an interview with Dennis O'Leary, outgoing president of the Joint Commission, and a future issue will feature Mark Chassin, the incoming president of the Joint Commission.

Last year the Leadership Academy Team investigated the need for a NAHQ leadership academy. On the basis of the information from focus groups held at the 2006 annual educational conference, it was determined that the majority of the need is for basic and intermediate training in the field of healthcare quality. The team has reorganized into a larger team to work on meeting the needs of our members in various stages of their career. Look for more to come as the team's work develops.

VIII. NAHQ/HQCB Partnership – Anna Marie Butrie

The Joint Organizational Leadership Team (JOLT) was formed about 2 years ago for the purpose of improving communication between the NAHQ and HQCB boards, while focusing on the growth of the healthcare quality profession. This group meets quarterly and is made up of the executive leadership teams of both boards. Accomplishments for the past 2 years include visits to state associations, exhibits at other conferences (the American Society for Healthcare Risk Management, the Association for Professionals in Infection Control and Epidemiology, the Institute for Healthcare Improvement, and the National Patient Safety Congress), advances in branding and marketing, distribution of the *Memory Joggers* booklets, publication of a joint NAHQ/HQCB calendar, and the development of the self-assessment exam for CPHQ, which is available through the Web sites of both organizations. Joint marketing efforts are planned for the future and will focus on how NAHQ and HQCB can support the healthcare quality profession.

IX. HQCB Report – Joan Boldrey

HQCB's new initiatives were the CPHQ exam based on the new content outline, which will be available October 1, 2007. Every 3 years a job analysis is completed to ensure that the exam reflects current practice in healthcare quality. The self-assessment exam was launched on September 1. The cost is \$65 for NAHQ members and \$95 for nonmembers. The self-assessment exam helps those who have not yet taken the exam to determine their readiness. In 2006, a total of 529 people tested for the CPHQ exam; the pass rate was 66%. From January through June 2007, 287 tested; the pass rate was 72%. In 2006, a total of 3,014 people recertified, and 3,318 are due to recertify by the end of 2007. Most recertifications come in during November and December; the deadline is December 31. So far, 186 have been received. Those missing the deadline must retake the exam. Reminders are sent out each year. Online recertification is available, and CE hours can also be tracked online.

The redesigned HQCB Web site is now live, and its branding and visual identity are similar to NAHQ's new look (in shades of green instead of shades of blue).

X. New Business

A resolution had been submitted by Frank Appel (see Section II above), but neither Frank nor a representative was present. The floor was opened for discussion. An amendment to the resolution was submitted directing the NAHQ board, in consultation with a team to be appointed, to explore a self-assessment of the association and report back to the membership on the findings. The board will report back at the town hall meeting at the 2008 educational conference. The amendment was approved, and the resolution was passed.

At the completion of the formal business, a discussion group activity was begun.