# REALIZING THE CONTROL SERVICE OF HEALTHCARE QUALITY 201 ANNUAL REPORT





**TOGETHER** WE DEFINE **EXCELLENCE IN** HEALTHCARE QUALITY.



NAHQ 2011 ANNUAL REPORT

# **Focused on Our Promise**

We are pleased to present the National Association for Healthcare Quality (NAHQ) 2011 Annual Report on behalf of NAHQ's leaders, volunteers, members, and customers. In recent years, NAHQ has experienced *Waves of Change* and *Set the Stage* for the advancement of the association. Today, we are taking real steps to reach our goal of *Realizing the Promise of Healthcare Quality*.

As we consider those steps, we liken our journey to crossing a snowy field to reach a tree on the horizon, representing our vision. Rather than looking down at our feet and wavering off the most direct path, we instead remain focused on the tree (our vision) to keep our path straight and true. With that focus, we reach our destination in the most direct manner.

We are all invested in helping NAHQ, our members, our Certified Professional in Healthcare Quality (CPHQ) certificants, and our customers realize the promise of healthcare quality. Through the development of expanded partnership opportunities, new programs and services for members and customers, increased volunteer opportunities to engage members in the work of the association, and enhanced communications, the organization experienced an exciting year of growth and future-focused work in 2011.

Our journey across that field is well underway, and we have an important goal on the horizon. We thank you for your enduring support and look forward to continued collaboration to achieve the goal of realizing the promise of healthcare quality that benefits all.

Sincerely,



Susan T. Goodwin, MS RN FACHE CPHQ FNAHQ 2011 NAHQ President



Stacy Sochacki, MS NAHQ Executive Director





# **Professional Development**

Strategic Pillar: To create and promote platforms for developing professional competencies and expand educational opportunities

It's an important time to be a professional in healthcare quality and patient safety. ICD-10, healthcare reform, electronic health records—these areas can greatly improve healthcare quality and outcomes, but every new opportunity requires education and professional development for professionals to achieve success.

NAHQ members, customers, and purchasers look to the association to offer benefits, tools, and resources to help them prepare for their ever-changing field. Hundreds of those healthcare quality and patient safety professionals used several exciting programs in 2011.

A generous donation made in memory of Christopher Heller, MD, a healthcare quality leader, benefitted hundreds of NAHQ members through the Dr. Heller Memorial, launched in June 2011. Founder of MIDAS+, Dr. Heller was committed to the profession of healthcare quality. The Dr. Heller Memorial is the first of its kind for the association; this unique memorial offers NAHQ members complimentary access to the Institute for Healthcare Improvement (IHI) Open School. NAHQ members can take Open School courses and earn CPHQ continuing education (CE) credit.

More than 300 NAHQ members registered for the IHI Open School through the Dr. Heller Memorial in the first 6 months, benefitting from the education and credits to help them improve their quality and patient safety programs.





As new candidates become interested in the CPHQ credential, they look to prepare with the best resources. Requests for permission to use NAHQ's live CPHQ Review Course increased in 2011. To ensure candidates prepare with qualified instructors, the association developed a pool of approved CPHQ instructors. CPHQ candidates taking an in-person NAHQ CPHQ Review Course can be confident they are learning from the best.

Changes to the CPHQ certification's U.S. focus is expected to increase the credential's value in 2012, ensuring CPHQs are better prepared for success in the healthcare quality and patient-safety environment. Feedback about the program revealed that the lack of U.S. regulations and standards included in the exam affected U.S. employers' impressions of the value of the credential. In early 2011, the NAHQ Board responded, formulating questions on regulations and standards to reflect important knowledge and skills required of U.S.-based healthcare quality professionals, who comprise more than 90% of the CPHQ market. Members of the Healthcare Quality Certification Commission (HQCC) are working to develop this content and the new questions to be included in the CPHQ exam beginning in 2013.

More healthcare quality and patient safety professionals are gaining access to local education as NAHQ state affiliate leaders apply best practices in education and networking learned at NAHQ's State Leaders' Summit. In its fourth year, the NAHQ State Leaders' Summit trains affiliate leaders on how to expand their state offerings, providing more value to local members through those opportunities.



### **Education for the Real World**



"I learned about the Dr. Heller Memorial through NAHQ e-news and liked that it was an online course, providing an easy way to obtain ongoing CE for CPHQ recertification. The fact that the

courses were free for NAHQ members was also a huge incentive! At the time, I was revising the patient safety orientation curriculum a Seattle hospital where I work. I knew I was on the right track when I saw the key concepts and principles I hoped to cover were the same as those outlined in the IHI course. Lately I've been referring back to the curriculum as I consider additional certification options to help me prepare."

Jill Wright, BSW CPHQ



# **Commitment to Innovation**

Strategic Pillar: To focus on delivering innovative products and services with proven value and effectiveness

The way people work, learn, and network is constantly changing. Coupled with the rapid pace of change in the profession of healthcare quality and patient safety, NAHQ recognizes that our members, customers, and purchasers seek new and innovative ways to engage with their association.

Whether it's an educational product or event, a networking opportunity, or purchasing experience, NAHQ has made innovation a priority in the future of the organization. This spark of innovation ignited among the board members in 2011, leading to the development of a task team charged with applying innovative thinking to all areas of the association, including products, publications, educational programs, and more.

This team and the NAHQ Board recharged that spark with a unique presentation in December 2011 by Larry Keely of the Doblin Group, a consulting firm focused on innovation. Board leaders and volunteers left with a new understanding of innovation: ways to capture new thoughts and apply ideas, confirmation that "innovation" doesn't always have to mean "new," and the understanding that risk is necessary for reward, considering that less than 5% of innovations will succeed.

This presentation readied the group to apply their ideas in the coming year to position NAHQ as an innovative and forward-thinking organization prepared to navigate the myriad of changes facing the healthcare quality profession and the association industry moving forward.





# A Portrait of Innovation



"The Innovations Task
Team's work affords an
opportunity to shape
the future of NAHQ—
who wouldn't want to
be a part of that? Most
people think innovation is a huge change,
but most often, it's

small changes that make a big difference!

NAHQ is lucky to be the professional home of many intelligent and thought-leading individuals. We must leverage that important asset both to ensure the viability of the organization as well as to propel us into the future. Healthcare, especially healthcare quality, is changing so rapidly. NAHQ members are uniquely positioned to be influencers of the future of healthcare, and innovation culture must become the future of NAHQ."

-Dale Harvey, MSN RN Innovations Task Team Leader



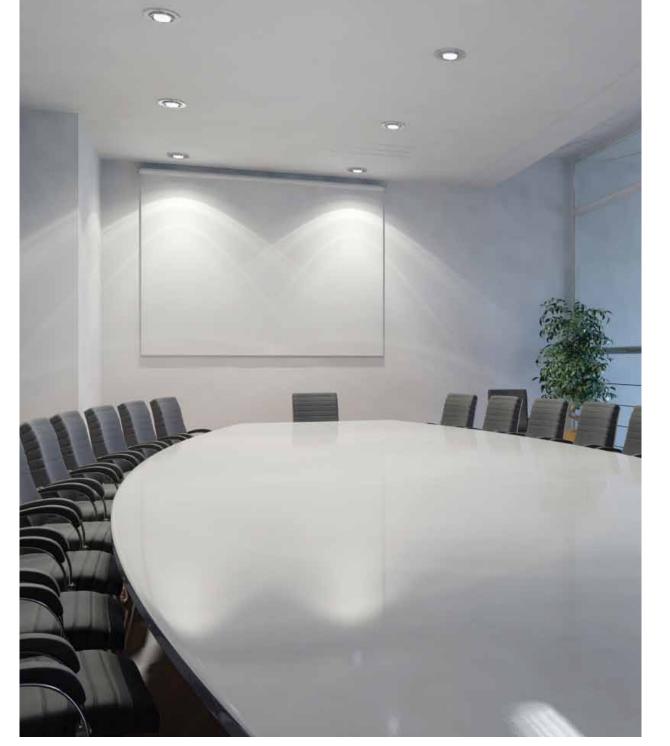
# **Leverage External Relationships**

Strategic Pillar: To enhance strategic relationships that support overall membership and programmatic development

Quality is everyone's priority. From the patient to the surgeon to the clinic administrator—everyone plays a part to make quality work. NAHQ believes strongly in the value and benefits of collaboration, knowing that by working together we can help our members, customers, and purchasers make an impact on quality of care and improved outcomes.

These collaborations are impacting the profession of healthcare quality and patient safety in many ways. The Ethical Challenges in Quality and Patient Safety Task Team gathered the collaborative input of members and partner organizations from 2010 meetings and are writing and reviewing a Call to Action document to be published in 2012.

Healthcare organizations continue to seek out the advice and expertise of NAHQ members. Barb Corn, MA BSN RN CPHQ, a 20-year NAHQ member, was elected as chair of the National Quality Forum (NQF) Quality Measurement, Research, and Improvement (QMRI) Council. She represents quality and patient safety professionals as she offers essential expertise when evaluating new measures, practices, and guidelines for endorsement as a part of this council. Volunteer and NAHQ Past President Cathy Munn, MPH RHIA CPHQ, represented quality professionals in the planning of the American Health Information Management Association's (AHIMA's) 2011 ICD-10 conference, for which NAHQ again served as a partner.





Such requests are coming to NAHQ more frequently, and members can now answer the call through the new Subject Matter Expert program, launched in summer 2011. Members indicate their interest in volunteering and their areas of expertise, then benefit professionally as they represent NAHQ when called upon to speak, author, or provide input.

In addition, the publication of research conducted by NAHQ volunteer and Past President Linda Scribner, BA CPHQ, and well-known healthcare educator Andrew N. Garmin, PsyD, is validating healthcare quality as a profession. The paper "Leading for Quality in Healthcare: Development and Validation of a Competency Model" was published in the November/December 2011 issue of the *Journal of Healthcare Management* and gives executives a framework for developing quality positions in their organizations.



# **Collaboration in Action**



"I have held various
NAHQ volunteer roles,
including serving as
chair of the NQF Rapid
Response Team, where
I then had the opportunity to run and be
elected as the chair

of the NQF QMRI Council. I now represent NAHQ as NQF looks at ways to improve the quality of America's healthcare. NAHQ's connection with NQF offers members opportunities to provide input on measures they may one day be asked to monitor and or measure. It's important for the quality professional to be informed about future measure sets. By endorsing national consensus standards for measuring and publicly reporting on performance, NQF is providing what consumers are looking for. NAHQ representing the voice of healthcare quality and patient safety professional is vital to that effort of building consensus on national priorities."

Barb Corn, MA BSN RN CPHQ
 National Quality Foundation QMRI Council Chair



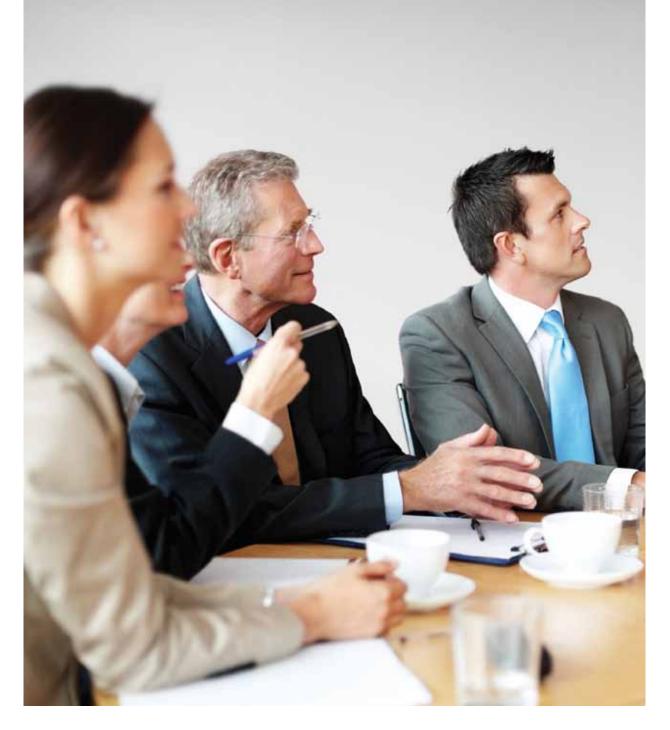
# **Enhance Communications**

Strategic Pillar: To develop new and expanded communication platforms for our customers to increase value

Healthcare is a rapidly changing environment. Quality and patient safety is an ever-moving target. To help our members, customers, and purchasers stay ahead of the game, NAHQ knows effective communication is key. That doesn't always mean *more* communication but rather communication that reaches the right people in the right place at the right time.

Healthcare quality and patient safety professionals have more access than ever before through NAHQ's redesigned website, launched in June 2011. Our customers were key to the redesign's success, providing feedback on how and why they used the site, areas for improvement, and enhancements they hoped to see implemented. The result is a cleaner, more intuitive site with greater searchability and mobile friendliness. More visitors are finding what they seek and an increasing number of new visitors are using www.NAHQ. org to obtain CPHQ certification, make a purchase, or become involved as a member.

Members are also finding increased ways to connect with the association and with one another. 2011 brought with it an explosion in social media activity, during which more than 3,000 new participants joined one of NAHQ's groups on Facebook, LinkedIn, or Twitter. Through these sources, users are learning about healthcare and patient-safety tools and resources and NAHQ activities, and gaining the opportunity to learn from one another.





NAHQ frequently looks to these online groups to gather information about what's on the minds of quality and patient safety professionals, what challenges they face, and what opportunities exist. We also realize the potential of reaching out to these active professionals, asking for input and feedback. One example is the selection of the 2011 Healthcare Quality Week theme "United in Quality," which was the winner in a vote by NAHQ Facebook fans.

Enhanced communication is having a positive effect for NAHQ, but the organization continues to learn about how to connect with our members, customers, and purchasers. As communication efforts expand, the organization is carefully collecting data about communication tools—such as website use, e-mails, and social media—to make the best use of visitors' time when they choose to read our e-mail or visit our site.



### The Voice of the Customer



"I was asked to comment on the NAHQ website as the organization managed a redesign in 20II. NAHQ had a great site, but there were opportunities for improvements! It was great to be able to provide some

feedback to improve it, and the association was great about soliciting comments and using them. Some of the specific feedback I gave was put to use and it was exciting to see. It was a nice way to get involved and good to know that even though it's huge, I had the opportunity to make a difference in my organization!"

-Matt Sevier, NHA RN CPHQ

# **Association Excellence**

Strategic Pillar: To demonstrate performance that exemplifies association best practices

NAHQ members, customers, and purchasers are leaders in healthcare quality and patient safety, looking to their association and one another to ensure they are practicing with the best tools and resources.

NAHQ leaders, volunteers, and staff seek the same support and work to ensure their organization is also a leader in the association profession: operating efficiently, acting as good financial stewards of member dollars, developing and advancing future leaders, and delivering real value to members, customers, and purchasers.

Leadership development is a key association goal. At the local and individual levels dozens of healthcare quality and patient safety professionals seek to achieve excellence through the NAHQ Professional Recognition program. The Award for Association Excellence and the corresponding subcategory awards honor state affiliates for offering exceptional membership services and benefits to quality and patient safety professionals in a local area through education, communication tools, and involvement with the NAHQ National Office. These coveted Awards for Association Excellence recognize the best in local association management.





Individual healthcare quality and patient safety professionals can also expect to gain recognition, respect, and possible professional advancement through NAHQ's Professional Recognition program. Recipients benefit personally and professionally from the awards offered annually and NAHQ adds to its pool of potential association leaders.

NAHQ leaders recognize that board service does not signal the end of developing leadership skills and that leadership development remains vital as they serve their terms. Board members assess their performance annually in 12 key areas outlined in the respected association publication *BoardSource* and use the scores to prioritize ongoing development. Throughout 2011, board members volunteered to host regular educational opportunities to generate enhanced performance, which resulted in increased scores at their next self-assessment.



# **Excellence on Display**



"I applied for the award when I noticed our organization was steps ahead of others in the clinical integration field. Being an award winner gave national recognition that the clinical inte-

gration work I have done for over a decade was valid and that it brings value to the industry. Personally, I'm proud of the work, and it allowed me to be recognized by others outside of my work. I encourage others to apply for awards to share processes and special projects to promote dissemination of best practices."

Kathleen Masiulis20II Luc R. Pelletier HealthcareQuality Award Recipient

# **2011 Organizational Metrics**

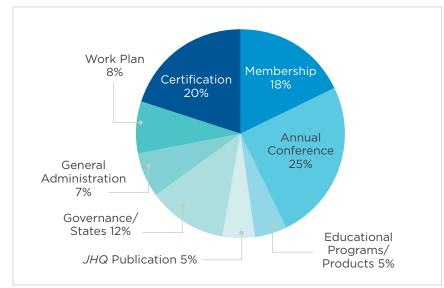
Quality and patient safety professionals rely on data to make important decisions. NAHQ leaders adhere to the same principles and understand the importance of making data-driven decisions. The organization continues to track important metrics to influence and drive the decisions that help NAHQ realize the promise of healthcare quality and patient safety.

### Finance

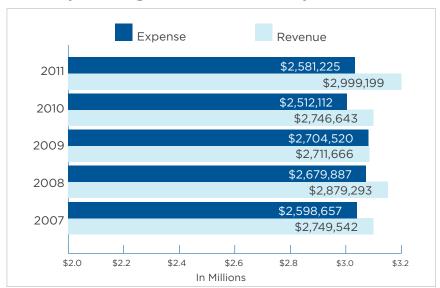
NAHQ closed the books on another profitable year with revenue far exceeding expenses. This strong year can be attributed to several factors, including membership growth of more than 9%, a growing number of candidates seeking certification, increased product offerings resulting in corresponding sales, and a continued focus on reducing expenses.

Although expenses for the year did increase, the minimal 3% rise resulted from the additional expenses required to service the growing number of members, customers, and programs added during the past year.

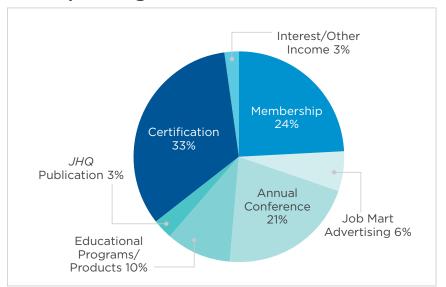
### **2011 Operating Expenses**



### 2011 Operating Revenue and Expenses



### 2011 Operating Revenue



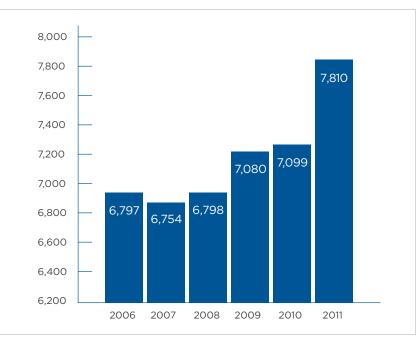
### 2011 Net Assets



### Certification

The CPHQ program continued its upward trend in 2011, welcoming more new CPHQs and enjoying a strong renewal rate. The program enjoyed a 10% growth rate over the past year. This growth comes from two factors: a 40% increase in candidates sitting for the CPHQ exam and a strong 87% recertification rate. Enhanced online information and access, as well as increased communication with certificants, is reflected in this growth.

### **Total CPHQs**





### Membership

NAHQ enjoyed unprecedented membership growth of 9% in 2011, adding more than 130 new members. With the help of a slightly improved retention rate of 74%, NAHQ expanded by more than 400 healthcare quality and patient safety professionals over the year.

This exciting growth can be attributed to many factors, including an improved website that made it easier for professionals to find and join the organization. In addition, a series of new and improved features such as the Dr. Heller Memorial, free Journal of Healthcare Quality (JHQ) CE, and special member savings and offers, increased value and thereby increased retention of the professional membership.

### **Total Membership (5 Years)**

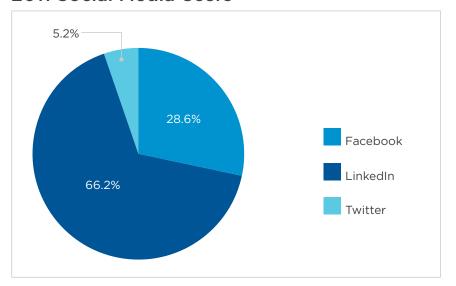


### Social Media

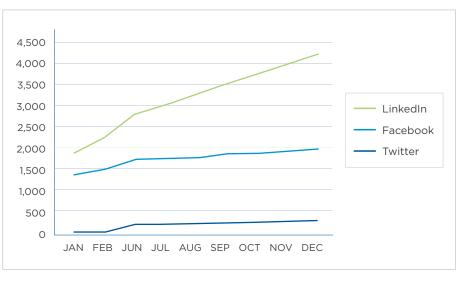
The association's continued investment in social media yielded the dramatic expansion of NAHQ's reach in the past year. More than 3,400 new fans and followers joined a NAHQ social media site in 2011, with most dramatic growth occurring on LinkedIn and Twitter.

Although many individuals learn about social media pages through the "likes" and posts of friends and colleagues, NAHQ brought attention to these pages and increased the number of users through special campaigns surrounding annual conference, Healthcare Quality Week, event postings, and more.

### 2011 Social Media Users



### 2011 Social Media Growth



# **HQF** Donor Report

The Healthcare Quality foundation (HQF), the philanthropic arm of NAHQ, is focused on realizing the promise of healthcare quality and patient safety by providing professionals access to education and certification through grants funded by the foundation's generous donors. The foundation enjoyed another successful year, returning the funds donated by individuals and state affiliates as grants to more applicants in 2011 than in years past.



# **2011 Grant Recipients**

### **Certification Grant**

Marjorie Blundon
Vandella Campbell
Ellen Hargett
Harleen Hieber
Mary-Ellen Jenkins
Wendy S. Kruger
Rebecca Lankford
Bren Manaugh
Yolette Milord
Glenda Stewart
Christina Williamson
Joyce Wirtz

# **Career Development Grant**

Edna Primas-Harrell

### **New Quality Professional Grant**

Meghan Zona

### State Educational Grant

Maine Association for Healthcare Quality
Michigan Association for Healthcare Quality
North Carolina Association for Healthcare Quality
Virginia Association for Healthcare Quality
Wisconsin Association for Healthcare Quality

# **2011 HQF Donors**

### **Affiliated State Association Donations**

### Platinum (\$500 and more)

Arizona Association for Healthcare Quality
Arkansas Association for Healthcare Quality
Florida Association for Healthcare Quality
Maryland Association for Healthcare Quality
Mississippi Association for Healthcare Quality
Ohio Association for Healthcare Quality
Texas Association for Healthcare Quality
Washington Association for Healthcare Quality

### Gold (\$200-\$499)

Louisiana Association for Healthcare Quality

### **Conference Raffle Prize Donors**

Arizona Association for Healthcare Quality
Arkansas Association for Healthcare Quality
California Association for Healthcare Quality
Connecticut Association for Healthcare Quality
Delaware Association for Healthcare Quality
Florida Association for Healthcare Quality
Georgia Association for Healthcare Quality
Illinois Association for Healthcare Quality
Indiana Association for Healthcare Quality
Iowa Association for Healthcare Quality

Louisiana Association for Healthcare Quality
Massachusetts Association for Healthcare Quality
Mississippi Association for Healthcare Quality
Nevada Association for Healthcare Quality
New Jersey Association for Healthcare Quality
New York Association for Healthcare Quality
Ohio Association for Healthcare Quality
Oregon Association for Healthcare Quality
Rhode Island Association for Healthcare Quality
South Carolina Association for Healthcare Quality
South Dakota Association for Healthcare Quality
Tennessee Association for Healthcare Quality

### **Individual Donations**

### Gold (\$200-\$499)

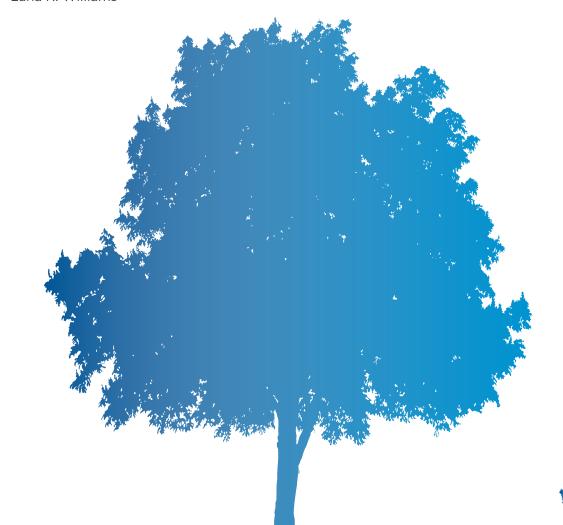
Elizabeth J. Brown Valerie Droog Susan T. Goodwin Lee Hamilton Linda H. Scribner Stacy Sochacki

### Silver (\$100-\$199)

Jacqueline L. Cole Tony & Jarita Davis Mary E. Huddleston Stephanie Iorio-Minnis Sherry Mazer Thomas M. Smith Nancy A. Terwoord

### Bronze (up to \$99)

Heidi Benson
Nancy D. Curdy
Anne Huben-Kearney
Graciela Lange
Susan Nance
Norma Jean Poasa
Christine Scully
Carolyn S. Townsend
Lana R. Williams



# **NAHQ** Teams and Volunteers

The organization's vision to realize the promise of healthcare improvement through innovative practices in quality and patient safety could not be achieved without the dedicated efforts of NAHQ's many volunteers. Whether serving on a standing team, a task force, or other volunteer need, NAHQ thanks them for their service.

### **2011 Board of Directors**

Susan T. Goodwin, President
Betty Brown, President-Elect
Linda H. Scribner, Immediate Past President
Lee Hamilton, Secretary/Treasurer
Michael Greer, HQCC Chair
Jacqueline L. Cole, Director at Large
Nancy Terwoord, Director at Large
Stephanie Iorio-Minnis, Director at Large
Stacy Sochacki, Executive Director



### **External Advisory Council**

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Paul Meyer, Principal Partner, Tecker Consultants Charles Mowll, Government and External Relations, The Joint Commission

Jonathan Perlin, President, Clinical and Physician Services Group and Chief Medical Officer, Healthcare Corporation of America (HCA)

Alan Spielman, President and CEO, URAC Nancy Wilson, Senior Advisor, Agency for Healthcare Research and Quality (AHRQ)

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Michael Greer, Chair Stephanie Iorio-Minnis, Board Liaison Charlotte Burkhardt Carrie Donovan Diana Martin Greg Smith Linda H. Scribner



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Sarah Pavelka, Coleader
Nancy Terwoord, Board Liaison
Anthony Heath
Denise Myrick
Susan Nance
Alberta Pedroja
Carole Pulaski

# Conference Planning Papers and Posters Team

Sarah Pavelka, Leader
Nancy Terwoord, Board Liaison
Marwa El Saidy
Susan Hendrickson
Michelle Horvath
Laura Lindberg
Lynn Pelligrino

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Lee Ann Hanna, Coleader
Linda H. Scribner, Board Liaison
Lecia Albright
Christy Beaudin
Kathryn Clinefelter
Nancy Lima
Len Parisi
Renae Spohn

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Lee Hamilton, Leader Nancy D. Curdy Carrie Donovan Stephanie Iorio-Minnis Susan T. Goodwin Linda H. Scribner

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Yvonne Acker, Leader Linda Weirauch, Coleader Lee Hamilton, Board Liaison Janet Dauman Terri Savino Mary Ellen Turk Ed Vasko, Jr. Billie Whittington

### JC PTAC

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Sherry Mazer, Coleader
Betty Brown, Board Liaison
Gayle Bilanski
Carol Clark
Anne Heins
Patti Hildebrand
Ann Latstetter
Maria Lowe
Kathleen Mechler
Mark Milner
Denise Weisberg

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Kathleen Mechler
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Kevin Park
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Pam Scarrow
David Shulkin
Wayne Soo Hoo
Kalahn Taylor-Clark
Kevin Warren

Susan White

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Linda H. Scribner, Leader Laura Connolly Sarah Cottington Leigh Humphrey Cathy Munn Sandra Robinson Karen Varda Carlene White

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Linda Comer, Coleader
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Barb Corn
Nancy D. Curdy
Theresa Knotts
Linda Ostermier
Julia Rieve
Victoria Ruetten
Susan Wante
Terry Willis

### **Professional Recognition**

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### **Special Interest Groups**

Nancy D. Curdy, Leader Nancy Terwoord, Board Liaison

### Facilitators

Gayle Hurt, Behavioral Health
Pam Kiser, Acute Care
Theresa Knotts, Long Term Care
Mark Powell, Critical Access/Rural
Brenda Sthen, Home Care
Constance Yancy, Managed Care

### Cofacilitators

Clara De La Cruz-Watal, Acute Care Wendy Kruger, Critical Access/ Rural Kristine Tomzik, Managed Care

# Ethical Challenges in Quality and Patient Safety Task Team

Cynthia Barnard, Leader
Lee Hamilton, Board Liaison
Claire M. Davis
Colleen M. Gallagher
Susan T. Goodwin
Sandra Jones
Roya Nassirpour
Ruth Nayko
Grena Porto

### **External Relations Task Team**

Matt Siever, Leader
Betty Brown, Board Liaison
Diane Storer Brown
Anna Marie Butrie
Barb Corn
Patricia A. Hildebrand
Thomas M. Smith

# Innovations in Education Task Team

Dale Harvey, Leader
Nancy Terwoord, Board Liaison
Evelinda Camacho
Deborah Flores
Shawna Forst
Tony Health
Judith Smith
Shelly van't Reit

### Leadership Development Task Team

Linda H. Scribner, Leader Susan T. Goodwin Leigh Humphrey Stephanie Iorio-Minnis Cathy Munn Sarah Pavelka Sandra Robinson Rose Steiner

### State Leaders Task Team

Suzanne Ciricillo, Leader
Jacqueline L. Cole, Board Liaison
Val Emery
Debra Flores
Sally Irrgang
Sarah Pavelka
Donna Scott
Helen Vance
Karen Varda

# Subject Matter Experts Task Team

Heidi Benson, Leader Linda H. Scribner, Board Liaison Kathleen T. Chai Jane Hooker Rebecca E. Hightower Rose M. Steiner Maureen Washburn Susan V. White

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Rebecca Dimitroff Jones (1976)
Becky Jones (1977)
Becky Eiss (1978)
Sandra Ambrosi (1979)

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Patsy Flensborg (1982) Mary Howland (1983)

Anna Prescott (1985)

Kay Speece (1986) Ann Schmitt (1987)

Kay Ceriak (1988)

Pat Lefkowitz-Ziegler (1989)

Sherry Peterson (1990)

Judy Homa-Lowry (1991)

Sandra Bassett Robinson (1992)

Claire Davis (1993)

Frank Appel (1994)

Jean Macrander (1995)

Janet Brown (1996)

Sarah Tackett (1997)

Diane Rogier (1998)

Diane Mikell (1999)

Jennifer Brown (2000)

Kathryn Clinefelter (2001)

Faye Wilson (2002)

lj Guthmann (2003)

Nancy Claflin (2004)

John Hartley (2005)

Anna Marie Butrie (2006)

Heidi Benson (2007)

Thomas Smith (2008)

Cathy Munn (2009)

Linda H. Scribner (2010)



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