ACHEMT
American College of Healthcare Executives of Middle Tennessee

An Independent Chapter of
American College of Healthcare Executives
for leaders who care®

MIDDLE TENNESSEE
CHAPTER NEWSLETTER

PASSING THE BATON

It sounds so easy, but watching the Olympic athletes striving to hand that small cylinder to their teammate while running at full speed shows that it takes something special to be done well. If you had to assume your boss' job, how hard would that actually be? Would you know the "secret" information they know, or have the experience to consider all the pros/cons to make the "big" decisions that you've not had to make yet? How long would it take to know if you were being successful in taking over this role?

And if you were the one passing the baton to your number two, could you leave today and know everything you have worked towards would be in good hands? Would you be able to take on your new assignment/role/job/retirement and be able to focus on that without having to be called back to "fix" foundational mistakes your successor might make?

"Succession planning" is the buzzword, but its a real thing that when it eventually hits, it would definitely be good to be intentional about it vs. everyone having to scramble at the last minute. If you are further along in your career, think about how much you have to give back, are you doing that or have you inadvertently kept that to yourself? And maybe you don't have someone in your team to give back to, it doesn't have to be just there, it could be a colleague that is growing their career/abilities in a new area for them that is old news for you, that you could help them navigate quickly through.

A couple of years ago, the chapter leadership made a slight change to how we onboard the rising board. The "old" way used to be the rising chair would officially assume responsibility on January 1, at which time the outgoing chair for roll off of the board. The assumption was that the rising chair had shadowed the outgoing chair for the year and was 100% ready to take action and keep things going for their area. In reality, the new chair had learned the "academics" of what needed to be done but had never "applied" what was needed, resulting in three to four months of chapter operations slowing down considerably. After seeing this as a recurring theme and realizing this was more of a timing/process issue than personnel, a timing adjustment was made to the onboarding process. Now, the rising chair will shadow/observe/help the current chair for the first six months. In July, a warm hand-off will occur and they will assume full operational responsibility for the rest of the year. What really makes this work, is that during this time, the outgoing chair is still participating but is now in the "second chair". He or she is available and coaching the rising chair to make sure the handoff is successful. This ensures that when January 1 comes, not a beat is missed.

Sometimes it helps to "turn the dial", like the example above, or to participate in mentoring or being mentored. ACHE of Middle TN has a fantastic mentor/mentee program that has just launched the application process for this year's cohort. I personally think it would be great for everyone to participate in this program, either as an experienced leader giving back to the emerging leaders, as an emerging leader that is wise enough to know that they can learn from others that have gone before them, or to do both!

And one last introduction, is to formally pass the baton to Gerd Peters, our rising President. She will be writing our next President's pen. Make sure to say hello to her on LinkedIn as well as at upcoming events. She is a wonderful leader and will do an amazing job leading our chapter forward with the rest of the rising board!

Best wishes, Jon Puncochar

A MESSAGE FROM YOUR ACHE REGENT

I've been thinking quite a bit lately about 'joy' in our work, and I know that we are fortunate to work in a field where the work we do helps others at their most basic level of need. We see these themes come through in Daniel H. Pink's *Drive* and Simon Sinek's *Start with Why* (among other written works) that speak to the connections between the fundamental work we do and what satisfies our individual need for living our values. I also believe that part of finding joy in our work is recognizing the great work of others, and we'll do that below.

As a part of ACHE, we're fortunate to be part of an organization that stretches around the world with the mission of advancing our members and healthcare leadership excellence. For those fortunate to serve in these roles, this mission resonates perfectly with the work that we're called to do each and every day. Four great examples of leaders who have embodied the mission of ACHE have been honored with the Tennessee Regent's Awards for 2023 – 2024, as nominated by our Regent's Advisory Council. It gives me joy to recognize them here:

Joseph Webb, DSc, FACHE, CEO of Nashville General Hospital

Dr. Webb is our second Senior Careerist awardee for this year. Dr. Webb has been a great advocate of ACHE and can frequently be found participating on educational panels. He's also a respected leader in social determinants of health and other healthcare initiatives in the Nashville community.

Russell C. Peters, Director of Brain & Spine Services, UT Medical Center

Russ has served in many of the roles within the East Tennessee Chapter, including President. He's UTMC's Executive Sponsor for the Knoxville Heart Walk and has been asked to Chair next year's Centennial event. His nominator says, "he's always willing to do anything, he always does a great job, and he has a huge impact on the success of our local chapter.

Tim P. Adams, FACHE, Regional Operations Officer, Ascension

Tim is one of our Senior Careerist awardees for this year, and he's taken a leadership role in our state for years, not only within Ascension but also THA and ACHE. As an example, Tim was installed as the Chairman of the THA Board this past September.

Robin Womeodu, MD, FACHE, Chief Academic Officer, Methodist LeBonheur Healthcare

Dr. Womeodu is recognized for Excellence in Diversity, and specifically for her work in eliminating disparities in health. She is the Chief Academic Officer for Methodist LeBonheur Healthcare and she's led the re-start of the Internal Medicine Residency here at MLH.

Please join me in congratulating each of these four leaders when you see them, and let's all commit to recognizing those around us who demonstrate the best in healthcare leadership. I don't know about you, but celebrating leaders like these brings me joy!

Tim

UPCOMING EVENTS

UPCOMING EVENTS

SEP12

CHAPTER ORIENTATION

Get involved with your chapter!

View Details ▶

REGISTER

OCT 3

COMING SOON! COOKING FOR A CAUSE

October 2024 details being finalized

View Details ▶

OCT25

ACHE OF MIDDLE TENNESSEE ANNUAL MEETING (VIRTUAL)

A special members-only meeting to hear from your chapter leaders, we hope you will join us!

View Details ▶

REGISTER

NOV14

CHAPTER ORIENTATION

Get involved with your chapter!

View Details ▶

DEC11

COMING SOON! ANNUAL HOLIDAY VOLUNTEER & APPRECIATION PARTY

Let's celebrate and reflect on a job well done.

View Details ▶

ACHEMT MENTORSHIP PROGRAM ANTICIPATES A SUCCESSFUL YEAR

Following a year with 20+ successful matches, the ACHEMT Mentoring Committee enthusiastically opened applications for the 2024/25 Mentoring Program.

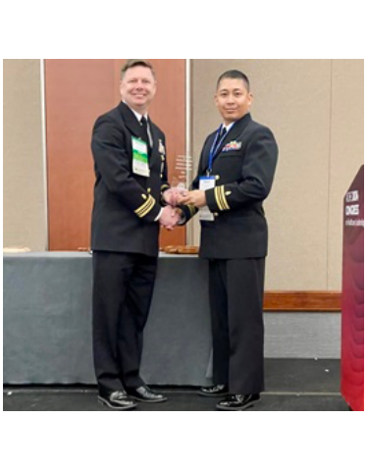
If you are a student member or early/mid-healthcare careerist interested in growth and development, this program is for you. If you are a senior leader, this is an opportunity to share your wisdom, insights, experiences, and to give back to the profession by serving as a mentor. Candidates for Fellow can use the mentoring experience as volunteering credit toward their Fellowship. Additional mentors are needed due to anticipated mentee interest.
The application period ends September 27, 2024. Apply on the "Mentorship" page of the ACHEMT website.

Each mentee's interests and career goals are used to match the mentee with a seasoned healthcare professional, who will provide advice on important steps and experiences necessary to achieve both near-term and long-term career goals.
Mentorship Matching Announcement Date: October 7, 2024
Program Kickoff: October 14, 2024

Following the match announcements, a Mentee/Mentor Match Kickoff Program will officially begin the mentoring process. An ACHEMT Mentorship Guide and several ACHE supportive career tracking and assessment tools will be available.

Program Duration: The mentee and mentor will collaboratively set their agendas and schedules for the remainder of the 2024-25 mentoring year.

Additional Information: Members of the Mentorship Committee will be available at ACHEMT's Program Meetings and will respond to questions emailed to mentorship@ACHEMT.org.



U.S. NAVY OFFICERS RECEIVE PRESTIGIOUS HEALTH INFORMATION TECHNOLOGY AWARD

ACHEMT is committed to highlighting Excellence in Military Healthcare Service Delivery. As our newsletters roll out, we will offer a continuous stream of information related to what is happening as reported by our Service Branch ACHE Regents, more specifically, a bit of National activity as well as happenings in middle TN! To that end, this month we are highlighting National ACHE Naval accomplishments!

Navy officers are recent recipients of two prestigious awards for their health information technology leadership, including their work to optimize the electronic health records system for the Department of Defense. The EHR, called MHS GENESIS, recently completed its global deployment (Health.mil News article) across the DOD.

The Navy Medical Service Corps chief selected U.S. Navy Lt. Cmdr. "Gean" Michael Bocaas the Medical Service Corps Officer of the Year (Senior Information Technology Officer) for 2023. Boca will receive his honor during the annual Defense Health Information Technology Symposiu , Aug. 20–22, 2024, in Dallas, Texas.

U.S. Navy Lt. Cmdr. Raben Talvo won the 2024 American College of Healthcare Executives Navy Regent Early Career Healthcare Executive Award, which was presented to him in March 2024 at the Lewis E. Angelo Professional Symposium in Chicago, Illinois.

Go Navy!!!

EDITOR'S CORNER

GARY SHAW, LFACH

The Threat of Ransomware Attacks on Hospital Patient Care Networks in the United States

It should come as no surprise these days that ransomware attacks on hospital patient care networks have emerged as a significant threat to healthcare institutions across the United States. These cyberattacks involve malicious software that encrypts critical data, rendering it inaccessible until a ransom is paid to the attackers.

The consequences of such attacks are particularly severe in healthcare settings, where the inability to access patient records, medical devices, and other essential systems can lead to delays in treatment, compromise patient care, and even cause loss of life. In this article I discuss a few of the problems ransomware attacks create on hospital networks and propose potential solutions to mitigate this ever-growing threat.

Ransomware attacks on hospitals have become increasingly common, with high-profile incidents demonstrating the vulnerability of healthcare institutions. For example, the WannaCry attack in 2017 impacted hospitals in multiple countries, including the United States, causing widespread disruptions. In 2020, the Ryuk ransomware attack severely disrupted services at hospitals across the U.S., highlighting the ongoing risk.

Several factors contribute to the vulnerability of hospital networks to ransomware attacks. First, the reliance on outdated software and systems, which often lack the necessary security updates, creates entry points for cybercriminals. Second, the interconnectivity of hospital networks, which includes everything from electronic health records (EHRs) to medical devices, increases the attack potential, making it easier for ransomware to spread rapidly. Third, the high value of patient data makes healthcare institutions attractive targets for attackers seeking financial gain. Finally, the pressure to restore operations quickly often leads hospitals to pay ransoms, which only encourages further attacks.

The impact of ransomware attacks on patient care cannot be overstated. When hospital networks are compromised, critical systems become inaccessible, delaying diagnosis, treatment, and surgery. In some cases, patients have been diverted to other facilities, leading to increased wait times and potential harm. To that end, the financial burden of these attacks, including the cost of ransom payments, system restoration, and potential legal liabilities, places further strain on already overburdened healthcare systems.

Addressing the threat of ransomware attacks on hospital networks requires a multi-faceted approach. One of the most effective strategies is the implementation of robust cybersecurity measures. This includes regular updates and patches to software systems, the use of advanced encryption methods, and the deployment of intrusion detection systems to identify and mitigate threats before they can cause harm.

Another critical solution is employee training and awareness. Human error is a common factor in ransomware attacks, with phishing emails often serving as the entry point for malicious software. By educating staff on how to recognize and respond to potential threats, hospitals can reduce the likelihood of successful attacks.

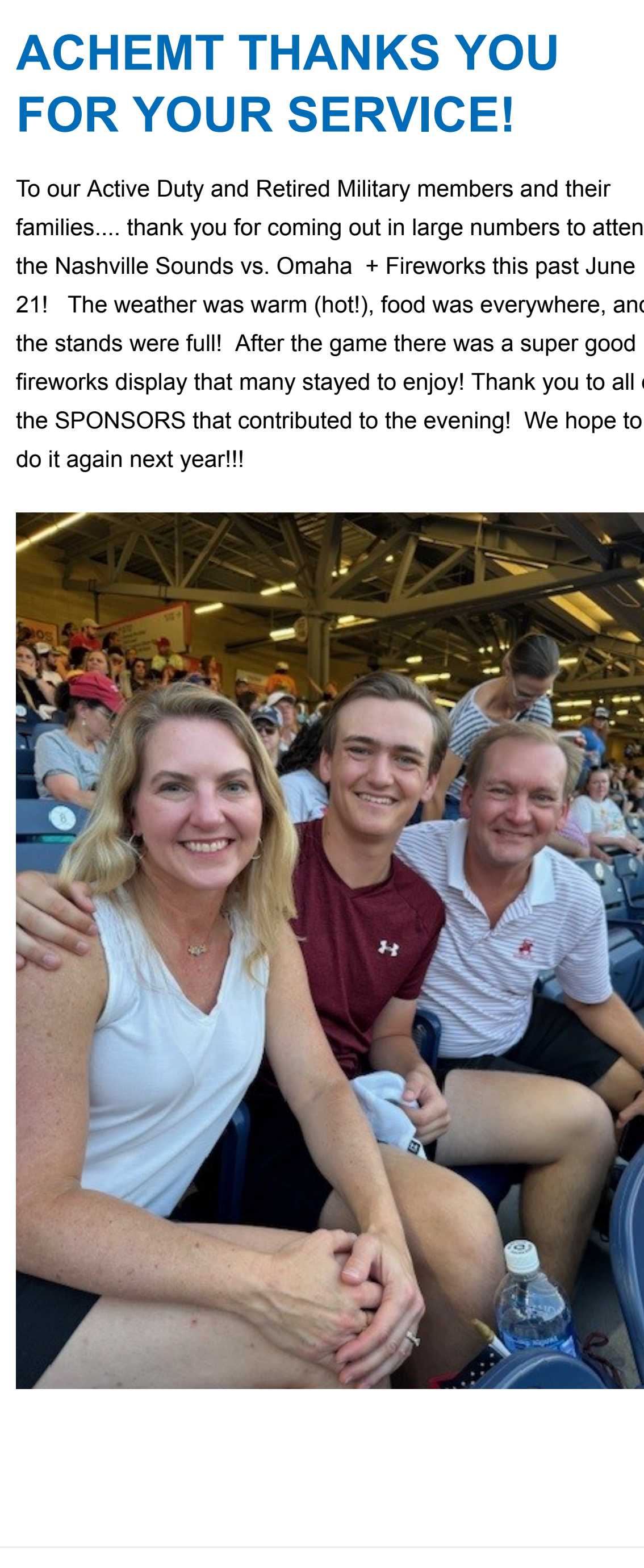
Moving forward, hospitals should develop comprehensive incident response plans that include regular backups of critical data and systems. These backups should be stored securely and offline to ensure that they are not compromised in the event of an attack. In the event of a ransomware attack, having a reliable backup can allow hospitals to restore operations without paying a ransom.

Collaboration between healthcare institutions, government agencies, and cybersecurity experts is also essential. The development of industry-wide standards and best practices, as well as the sharing of threat intelligence, can help hospitals stay ahead of emerging threats. Furthermore, the government can play a role by providing funding and resources to help smaller hospitals implement necessary security measures.

Ransomware attacks on hospital patient care networks pose a serious threat to the safety and well-being of patients in the United States. To mitigate this risk, hospitals must adopt a proactive approach that includes strong/updated cybersecurity measures, employee training, robust incident response plans, and collaboration with other stakeholders. By taking these steps, healthcare institutions can better protect themselves against ransomware attacks and ensure that patient care is not compromised.

NASHVILLE Sounds

ACHEMT THANKS YOU FOR YOUR SERVICE!

To our Active Duty and Retired Military members and their families.... thank you for coming out in large numbers to attend the Nashville Sounds vs. Omaha + Fireworks this past June 21! The weather was warm (hot!), food was everywhere, and the stands were full! After the game there was a super good fireworks display that many stayed to enjoy! Thank you to all of the SPONSORS that contributed to the evening! We hope to do it again next year!!!