Celebrating 20 Years of Collaborative Impact

2020/2021
ANNUAL IMPACT REPORT
Esteeemed Colleagues,

I am pleased to share the National Center for Healthcare Leadership’s (NCHL) first Annual Impact Report, which illustrates our collaborative impact and progress we have made together over the past year. NCHL has been powered by collaboration and peer sharing since its inception, bringing together leaders within hospitals, health systems, and graduate programs to engage in dialogue and share in the development of processes and practices for ensuring leadership and organizational excellence.

NCHL celebrates a big milestone this year – our 20th anniversary! Since our establishment, our work and mission have always focused on assuring the availability of high-quality, relevant, and accountable healthcare leadership.

NCHL achieves more through its Collaborative Impact of learning from each other, and we could not do what we do without the support and participation of our 130+ incredible program and corporate members! I am extremely grateful to our program and corporate partners who have continued to join and support NCHL, even during these recent turbulent times. It is through this collaborative work that the achievements outlined in this report have been possible.

Standing in partnership with all healthcare leaders, NCHL continues to advance industry standards and innovation for leadership excellence. Our collective work of collaboration, research and data, and other engaged learning and resources all aim to advance and support the work that you do every day.

2020-2021 has been a time in history that we all will remember. NCHL applauds the dedication and hard work of the healthcare professional community who during this past year demonstrated the amazing will and determination of strong and resilient leaders. Through perseverance and continued collaboration, healthcare leaders continue to rise to the challenges facing the industry. NCHL is proud to collaborate with these leaders, our program and corporate members, our board of directors, and the NCHL team. We are stronger together than by working alone, and that is the key to our success.

It is this cooperative spirit that has inspired our work and led to numerous achievements over this past year, including:
- Virtual meetings and new peer-to-peer learning initiatives
- Successful implementation of a virtual coaching academy
- Supporting members in developing business models for cross-border telemedicine and remote second opinions
- Development and implementation of a new NCHL mentorship program
- Relationship building with public and private stakeholders in the US and internationally
- Compilation and dissemination of COVID-19 resources

As we near the end of 2021, I hope you will join us again in 2022 as we can continue our efforts in keeping the healthcare community connected. Together, through our collaborative power, we can ensure the continuation of organizational and leadership excellence so that long-lasting changes to our nation’s healthcare system and improvements to healthcare access and infrastructure globally can be realized.

Sincerely,

LeAnn Swanson, MPH
Chief Executive Officer
National Center for Healthcare Leadership

"TOGETHER...OUR COLLABORATIVE POWER... CAN ENSURE THE CONTINUATION OF ORGANIZATIONAL AND LEADERSHIP EXCELLENCE."
MISSION
Dedicated to advancing healthcare leadership and organizational excellence by building diverse, inclusive, and collaborative relationships in the US and abroad.

VALUE
NCHL is widely recognized as the premier source for evidence-based healthcare leadership practices, cultivating communities for peer collaboration across organizations, and collectively developing industry models and benchmarks to improve healthcare.

20 YEARS OF COLLABORATIVE IMPACT
Over the past twenty years, we’ve seen tremendous growth and expansion of our combined impact. The collaboration, education, and research our members offer one another is unlike any other in the nation. Beginning with the development of our Leadership Excellence Networks in the early 2000’s, slowly expanding to include the US Cooperative for International Patient Programs in 2013, and the National Council on Administrative Fellowships program in 2015. We look forward to a future of additional collaborative impact.

NATIONAL COLLABORATION
2020–2021 Program Member Participation
# COLLECTIVE IMPACT

A list of all NCHL members by program affiliation, during the reporting period of July 1, 2020 through June 30, 2021.

<table>
<thead>
<tr>
<th>Category</th>
<th>States/Programs</th>
</tr>
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<tbody>
<tr>
<td>Alabama</td>
<td>UAB Medicine, University of Alabama Birmingham</td>
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<tr>
<td>Arkansas</td>
<td>Arkansas Children's, University of Arkansas for Medical Sciences</td>
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<tr>
<td>California</td>
<td>Alameda Health System, Cedars-Sinai, Children's Hospital of Los Angeles, Children's Hospital Orange County (CHOC Childrens), City of Hope National Medical Center, Dignity Health International, Emanate Health, Hoag Hospital &amp; Hoag Orthopedic Institute, Keck Medicine of the University of Southern California, Providence St. Joseph Health - Santa Rosa, Sharp HealthCare, St. Joseph Heritage Healthcare, Stanford Children's Health, Lucile Packard Children's Hospital Stanford, Stanford Health Care, UC Davis Health, University of California, Los Angeles (UCLA) Health, University of California, San Diego (UCSD) Health, University of California, San Francisco (UCSF) Health, ☐</td>
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<tr>
<td>Colorado</td>
<td>Centura Health, CommonSpirit Health, Denver Health, University of Colorado Denver, Hartford Health, Yale International Medicine Program, Yale New Haven Health System, ☐</td>
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<tr>
<td>Connecticut</td>
<td>Nemours Alfred I duPont Hospital for Children, ☐</td>
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<tr>
<td>District of Columbia</td>
<td>Children's National Hospital, George Washington University, George Washington University Hospital, MedStar Health, ☐</td>
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<tr>
<td>Florida</td>
<td>Baptist Health (Jacksonville), Baptist Health South Florida, Broward Health, Florida A&amp;M University, Memorial Healthcare System, Moffitt Cancer Center, Nicklaus Children's Health System, The Paley Institute at St. Mary's Medical Center, University of Central Florida, University of Florida, University of Florida Health - Shands Hospital, University of South Florida, ☐</td>
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<tr>
<td>Georgia</td>
<td>Emory Healthcare, Georgia Southern University, Georgia State University, American Hospital Association, Ann &amp; Robert H. Lurie Children's Hospital of Chicago, Cancer Treatment Centers of America, Memorial Health System, Northwestern Medicine, Rush University Medical Center, The Shirley Ryan AbilityLab, UChicago Medicine, Indiana University Health, Iowa, Brigham and Women's Hospital, Des Moines University, Genesis Health System, University of Iowa, ☐</td>
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<tr>
<td>Hawaii</td>
<td>The University of Hawaii at Manoa, ☐</td>
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<tr>
<td>Illinois</td>
<td>St. Elizabeth Healthcare, St. Elizabeth Physician, University of Kentucky HealthCare, ☐</td>
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<tr>
<td>Kentucky</td>
<td>St. Elizabeth Healthcare, St. Elizabeth Physician, University of Kentucky HealthCare, ☐</td>
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<tr>
<td>Louisiana</td>
<td>Ochsner Health System, ☐</td>
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<tr>
<td>Maryland</td>
<td>Bon Secours Mercy Health, Johns Hopkins Medicine, Kennedy Krieger Institute, ☐</td>
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<tr>
<td>Massachusetts</td>
<td>Atius Health, Boston Children's Hospital, Boston University School of Public Health, Lahey Hospital and Medical Center, Mass General Brigham, Massachusetts General Hospital, Tufts Medical Center, ☐</td>
</tr>
<tr>
<td>Michigan</td>
<td>Henry Ford Health System, Trinity Health, University of Michigan School of Public Health, ☐</td>
</tr>
<tr>
<td>Minnesota</td>
<td>Gillette Children's Specialty Healthcare, Mayo Clinic, University of Minnesota, ☐</td>
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<tr>
<td>Missouri</td>
<td>Ascension, Barnes Jewish Hospital, Children's Mercy Kansas City, Mercy (St. Louis), Saint Louis University, University of Missouri, Washington University School of Medicine in St. Louis, ☐</td>
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<tr>
<td>Nebraska</td>
<td>Children's Hospital Medical Center (Omaha), ☐</td>
</tr>
<tr>
<td>New Jersey</td>
<td>Atlantic Health System, Columbia University, Columbia University, Vagelos College of Physicians and Surgeons, Cornell University, Hospital for Special Surgery, Maimonides Medical Center, Memorial Sloan Kettering Cancer Center, Montefiore Medical Center, Mount Sinai Health System, New York University (NYU) Langone Health, NewYork-Presbyterian, Northwell Health, Rochester Regional Health, ☐</td>
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<tr>
<td>New York</td>
<td>Atrium Health, Cone Health, UNC Chapel Hill, Vidant Health, Wake Forest Baptist Health, ☐</td>
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<tr>
<td>North Carolina</td>
<td>Brigham Health/Dana-Farber Cancer Institute, Children's Hospital of the Carolinas, Cleveland Clinic, Nationwide Children's Hospital, The Ohio State University, The Ohio State University College of Public Health, University Hospitals Cleveland Medical Center, Xavier University, ☐</td>
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<tr>
<td>Ohio</td>
<td>Children's Hospital of Columbus, ☐</td>
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<tr>
<td>Oklahoma</td>
<td>INTEGRIS Health, ☐</td>
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<tr>
<td>Oregon</td>
<td>Oregon Health and Science University, Samaritan Health Services, ☐</td>
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<tr>
<td>Pennsylvania</td>
<td>Allegheny Health Network, Children's Hospital of Philadelphia, Lehigh Valley Health Network, Penn Medicine, Pennsylvania University, Philadelphia International Medical Center, The Guthrie Clinic, University of Pittsburgh, University of Pittsburgh Medical Center (UPMC) and Children's Hospital of Pittsburgh of UPMC, University of Scranton, UPMC, WellSpan Health, ☐</td>
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<tr>
<td>South Carolina</td>
<td>Lexington Medical Center, Medical University of South Carolina (University), Medical University of South Carolina Health (MUSC Health), Prisma Health, ☐</td>
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<tr>
<td>South Dakota</td>
<td>Sanford Health, ☐</td>
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<tr>
<td>Tennessee</td>
<td>Vanderbilt University Medical Center, ☐</td>
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<tr>
<td>Texas</td>
<td>Baylor St. Luke's Medical Center, Baylor University, Cook Children's Health Care System, Houston Methodist, MD Anderson Cancer Center, Memorial Hermann-Texas Medical Center, TIRR Memorial Hermann, Texas A&amp;M Health Science Center, Texas Children's Hospital, Texas Women's University, Trinity University, University of Texas at Arlington, University of Texas School of Public Health, ☐</td>
</tr>
<tr>
<td>Utah</td>
<td>Intermountain HealthCare, University of Utah Health, ☐</td>
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<tr>
<td>Virginia</td>
<td>Carilion Clinic, Dana-Farber Cancer Institute, Inova Health, Sentara Healthcare, Virginia Commonwealth University, ☐</td>
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<tr>
<td>Washington</td>
<td>PeaceHealth, University of Washington, ☐</td>
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<tr>
<td>West Virginia</td>
<td>Procter &amp; Gamble, The Medical College of West Virginia, ☐</td>
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<tr>
<td>Wisconsin</td>
<td>ProHealth Care, ☐</td>
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<tr>
<td>Wyoming</td>
<td>University of Wyoming, ☐</td>
</tr>
</tbody>
</table>

There are no NCHL program members in Alaska, Arizona, Hawaii, Idaho, Maine, Mississippi, Montana, Nevada, New Hampshire, New Mexico, North Dakota, Rhode Island, Vermont, or Wyoming.
COVID-19 dealt the healthcare delivery system an unexpected and swift blow – a mandate to care for incredibly sick patients without immediate access to financial resources, safety equipment shortages, and unknown treatments. The team at NCHL quickly began reaching out to members to identify where the most significant concerns and knowledge gaps existed – and then we got to work. Over the past year, we’ve continued to deliver on topics of greatest need. Coordinating learning opportunities that hospitals and health systems needed during this incredibly critical time in care delivery and healthcare leadership development has not been without challenge, but we remain dedicated to developing ongoing opportunities to help our members post-pandemic.

**Virtual Learning Opportunities**

- **21** Virtual Learning Opportunities
- **103** Average Number of People per Session
- **2169** Total Attendees

**What Our Members are Saying**

- "I really enjoy and have enjoyed NCHL team members, they continue to bring value to NCHL. I have appreciated NCHL's willingness to continue to provide new programming and ideas for their members." - Tara, Carilion Clinic

- "There's great value in this membership. We usually get very valuable information from meetings, webinars or simply from emails. Happy to be a member!" - Ana, Ochsner Health System

- "We like the connectivity with our peers and the ability to have a forum where we can exchange information and challenges." - Anonymous

- "Great job during unprecedented times." - Diane, Atrium Health
No one could have predicted the unprecedented crisis of COVID-19 that impacted the entire world last year and continues still today. Through it all, the power and resilience of healthcare leaders and front-line workers have not gone unnoticed, and the care for the patients and communities they serve has never waned. One thing the pandemic has demonstrated over the past 18 months is the need for exemplary leadership. The mission and work of NCHL were put to the test and our primary focus was to support our program members more than ever before during the time of stress and uncertainty, to help them navigate the uncharted waters.

The commonalities among the three premier programs at NCHL are collaboration, learning, and sharing from each other. Prior to the pandemic, our members were already meeting regularly, but we soon realized the focus of those meetings and sharing of information needed to change to focus primarily on the crisis at hand. The question on everyone’s mind was how do we – as a collective healthcare community – deal with this unknown.

NCHL implemented weekly touch base COVID-19 calls to serve as a channel for members to raise questions, express concerns, and share success stories. Topics and discussion items for these calls included, but were not limited to:

- Financial impact of the pandemic on hospitals and health systems
- Deployment and redeployment of staff
- Virtual learning and development
- Childcare services
- Remote work and supervision
- Staffing employee roles
- Virtual talent acquisition/onboarding
- Engagement and morale
- Compassionate communication
- Well-being and resilience
- Creating stability among the workforce
- PPE procurement

NCHL and its members do what we do best; we leaned on each other and continued the highly valued, peer-to-peer sharing to help our colleagues navigate the new normal. As a result of these weekly calls, NCHL developed a living document that was updated each week with new information – the Powering our People guide. The insights, ideas, and innovation that were shared during these calls proved to be indispensable to all of our members.

Although the weekly COVID-19 calls ended last year, the collaboration and connection of our members continue, as we are still dealing with this crisis. NCHL is proud of our members and their perseverance during these difficult times. NCHL was there for our members to provide valuable resources and opportunities for sharing, and we will continue to be here for our members well into the future – Powering our People.
Leadership Excellence Networks (LENS)
The Leadership Excellence Networks is a collaborative of US hospitals and health systems dedicated to strengthening leadership and organizational excellence through communities of practices focused on the advancement of diversity, equity, and inclusion; leadership development; well-being; and talent metrics, analytics, and planning. Senior leaders from LENS member organizations participate in a variety of shared learning activities and joint initiatives through a council structure.

US Cooperative for International Patient Programs (USCIPP)
USCIPP is a consortium of US academic medical centers and health systems that work with international patients and hospitals, foreign governments, and other partners from around the world. USCIPP operates on a member-driven agenda focused on continuing member education, international market research, peer benchmarking, inter-organizational collaboration, awareness building, and more. Representing the majority of US hospitals with active international programs, USCIPP's 58 organizational members include many of the country's preeminent institutions of medicine.

National Council on Administrative Fellowships (NCAF)
The National Council on Administrative Fellowships is a consortium of fellowship sites and graduate health management programs that work together to continuously improve early-career development opportunities for our next-generation healthcare leaders. NCAF creates an industry-standard in the recruitment of administrative fellows. In doing so, NCAF allows for a uniform and coordinated recruitment process, helps organizations access a national pipeline of the next generation of healthcare industry leaders, and brings fellowship sites and graduate health management programs together to share ideas and best practices.

"THE VALUE OUR MEMBERSHIP BRINGS TO MY ORGANIZATION IS OUTSTANDING" - NCHL, USCIPP MEMBER
Leaders increasingly recognize how important staff well-being is to organizational success, especially as the global pandemic has furthered the concern of burnout and PTSD among healthcare workers. However, there are few clear practice guidelines to inform organization-level efforts and the tremendous variety of practice across organizations. Even the definition of well-being can vary widely across organizations, making identifying successful practices more difficult.

With support and direction from the LENS Steering Committee, in 2021 the Leadership Excellence Networks launched a new council focused on well-being, with the goal of supporting leaders in making more informed decisions about how to invest their limited resources for maximum well-being impact. At the start of the year, 15 healthcare organizations joined forces to collaboratively address this important topic.

One of the council's early projects included the development of a Well-being Structure Survey to collect data on the well-being efforts of member organizations. Of the 13 organizations that completed the survey, only one organization reported that their well-being efforts were completely centralized. Our survey results showed that the most senior leader of well-being was inconsistent across organizations. The differences in approaches to well-being across organizations only reinforced the need for this council, as the group serves as a space where health systems can accelerate the dissemination of new learnings and best practices, that otherwise vary widely across institutional silos.

Dr. Katherine Meese, director of research at the UAB Medicine Office of Wellness is the inaugural chair of the council. She reports that “We look forward to a renewed focus on the well-being of our caregivers, which is central to realizing our potential as healthcare institutions.” The National Center for Healthcare Leadership is grateful for Dr. Meese’s leadership as well as the members of the Well-being Council, who are committed to moving this important agenda forward.
Over the past year, US hospitals with international programs have recognized both the need to scale up their international digital health offerings as well as the importance of working with global partners when travel to the US may not be possible. Recognizing the ever-growing importance of telemedicine and remote second opinions (RSOs) to US hospitals’ international business models, the USCIPP team at NCHL regularly organizes bespoke educational content and leads special industry initiatives for USCIPP member hospitals.

Peer Learning and Collaboration in Global Digital Health
USCIPP provides several platforms that encourage program members to compare notes, network, collaborate, and share knowledge and best practices in areas of shared interest, and the international telemedicine and RSO space is no exception. Over the past year, USCIPP has hosted a standing monthly call series on which program members regularly share best practices and industry insights related to the delivery of cross-border telemedicine and RSOs. Additionally, USCIPP invites expert speakers to speak during virtual learning sessions, such as “The Digital Healthcare Landscape in Mexico and Chile: Opportunities for US Healthcare Providers,” a webinar held in May 2020.

International Telemedicine & RSO Due Diligence Initiative
In 2019, USCIPP developed a mechanism that allows member hospitals to share in the costs of conducting legal assessments regarding the delivery of telemedicine and RSOs in countries of high interest to the broader USCIPP membership. The resultant documents address legal issues related to the provision of telemedicine and RSOs abroad as well as empower individual institutions’ business and legal teams to develop tailored models of care with appropriate legal documentation. Between July 2020 and June 2021, this project resulted in new reports for four markets – Costa Rica, India, Panama, and Peru – as well as fully refreshed analyses for the United Arab Emirates and the United Kingdom.

“"Our membership provides tremendous value in terms of international reports, peer data, and collaboration, including telemedicine and patient experience. The staff is very professional and responsive, always engages members to build and improve the program, and listens to and incorporates feedback. It is a pleasure to be a member.”

100% USCIPP members derive satisfaction from their membership.
Over the past year, hospitals and healthcare entities have been tested and tried harder than ever before. For some organizations, administrative fellowships became a staple of their COVID-19 response teams, while other organizations had to place fellowships on hold to deal with the overwhelming influx of needs.

In most years, June is a busy month for thousands of future healthcare leaders as MHA graduate students would begin summer internships at hospitals and health systems. In 2020, the COVID-19 pandemic forced almost half of those health systems to withdraw from those internships for safety, financial or bandwidth issues. In June 2021, things looked a little different, with only half the number of fellows beginning their position and teams adjusting to a workforce shortage among other challenges. Fortunately, as hospitals and health systems begin to prepare for summer 2022, we're seeing things shift once again as the number of fellowship sites and fellowship opportunities appear to be returning to pre-pandemic levels.

Earlier in the year, current NCAF members were surveyed and found that the majority of respondents planned to move forward with their fellowships in summer 2022.

However, many of the recruitment strategies have shifted dramatically. Many organizations are now inviting students to virtual interviews and facility tours and requiring COVID-19 vaccinations. Additionally, there is greater investment in diversity, equity, and inclusion practices during the recruitment process and on-boarding of graduate fellows.

Though the challenges posed against both fellowship sites and graduate programs, NCAF and NCHL still remain vital tools for members. One graduate program stated, "For programs that either require or strongly encourage post-graduate fellowships, I believe participation in NCAF is vital"
The NCHL 2022 call for membership is now open. We invite you to renew your membership or join as a new member in 2022 for one of our three premier programs, the US Cooperative of International Patient Programs, the National Council for Administrative Fellowships, and the Leadership Excellence Networks. Additionally, we're recruiting new corporate members. We invite you to join your peers and secure your membership for 2022 today.

**Leadership Excellence Networks (LENS)**

- **PREMIUM LEVEL** $25,000
- **BASIC LEVEL** $12,500
- **COUNCIL LEVEL** $5,000

**US Cooperative of International Patient Programs (USCIPP)**

- **PREMIUM PLUS LEVEL** $15,000
- **PREMIUM LEVEL** $11,000
- **STANDARD LEVEL** $6,000
- **ORGANIZATIONAL AFFILIATE** $11,000

**National Council on Administrative Fellowships (NCAF)**

- **STANDARD LEVEL** $1,250
- **NEW MEMBER SET-UP FEE** $500

**Corporate Membership**

- **LEADING LEVEL** $40,000
- **SUSTAINING LEVEL** $30,000
- **PARTNERING LEVEL** $20,000
- **CONTRIBUTING LEVEL** $15,000

To learn more about joining an NCHL premier program, contact us directly at info@nchl.org or visit nchl.org
25% of members participate in TWO or MORE programs.

90% of members agree or strongly agree that the breadth and depth of services provided by NCHL are of HIGH VALUE to their organization.

Top 5 Ways Members Engage
1. Council & Committee Participation
2. Conferences & Events
3. Online Learning Session
4. Website Resources
5. Direct Email Communications

FINANCIAL STEWARDSHIP
This financial snapshot provides an overview of NCHL financials during the 2020 fiscal year.

SUPPORT & REVENUE
$2.13 million
- MEMBERSHIP FEES 52%
- OTHER LEARNING PROGRAMS 34%
- Meetings & Fees: 3%
- Satisfaction of Restricted Revenue: 10%
- Other Misc Support: 0.3% (not pictured)

Operating Expenses
$1.93 million
- DIRECT NCHL MISSION 68%
- Conferences & Fundraising: 14%
- Management & General: 18%
- Donor Restrictions Met: 0.3%

$1.9 million operating budget
52% of revenue generated from membership fees
68% of expenses related directly for NCHL mission delivery
2020-2021 PREMIER EVENTS

Annual Series
- NCHL Coffee Chat Series
- NCHL Townhall Series

Summer 2020
- NCAF Summer Enrichment Learning Series
- Mindfulness to Decrease Physician Burnout: What Leaders Need to Know
- Managing International Patient Financial Operations and Risk in a COVID-19 World

Fall 2020
- USCIPP Annual Meeting
- Push and Pull for Talent: Insights from Talent Management Leaders Part I
- Human Capital Investment Conference
- Gail L. Warden Leadership Excellence Award
- Push and Pull for Talent: Insights from Talent Management Leaders Part II

Winter 2020/21
- International Healthcare Market Monitoring, Analysis, and Reporting Initiatives
- Enhancing Referrals from China through Remote Second Opinions

Spring 2021
- NCAF Annual Meeting
- NCAF Information Sessions
- USCIPP 2021 US-Mexico Healthcare Partnership Forum
- The Digital Healthcare Landscape in Mexico and Chile: Opportunities for US Healthcare Providers
Enhancing leadership and organizational excellence is at the core of what the National Center for Healthcare Leadership has been committed to for the past 20 years. This year, with the many unexpected challenges we have faced it has only highlighted the importance of leadership, collaboration, education, and research. As the industry remains diligent in service, I am continually impressed by the dedication, commitment, and ongoing improvement efforts our leaders and staff have demonstrated. I am proud to serve in this amazing industry and to provide guidance to NCHL as the 2020-2022 Board Chair.

In partnership,

NCHL’s Board of Directors is an exceptional cadre of high-level industry executives representing all healthcare sectors, including providers, suppliers, insurers, academics, professional organizations, and policymakers. These leaders support NCHL’s efforts to facilitate the spread of best practices, recognize individual and organizational leadership in the field, create collaborations, and build the evidence base to meet the industry’s challenges with improved leadership capabilities.

- Board Chair: Jill Schwieters, CEO, JAS & Associates
- Jeanne Armentrout, Executive Vice President & CAO, Carilion Clinic
- Bob Clarke, Chairman, Furst Group/NuBrick Partners
- Richard O. Davis, PhD, CEO, Henry Ford Hospital & Senior Vice President, South Market, Henry Ford Health System
- David Ertel, CFO, Vizient, Inc.
- Carrie Harris-Muller, Senior Vice President and Chief Population Health Officer, OhioHealth
- Ann Hines, Executive Vice President, Human Resources, Sodexo Healthcare – North America
- M. Michelle Hood, Executive Vice President & COO, American Hospital Association
- Christy Harris Lemak, PhD, Chair, Department of Health Services Administration, University of Alabama at Birmingham
- Beverly Malone, PhD, President and CEO, National League for Nursing
- Jessica Melton, President, Suburban Hospital, Johns Hopkins Medicine
- Joseph (Joe) Moscola, Executive Vice President, Enterprise Management, Northwell Health
- Barbara Ralston, Senior Consultant, Strategic Development, Dignity Health International
- John Talaga, Executive Vice President & General Manager, Healthcare, Flywire

MESSAGE FROM THE BOARD CHAIR
"Enhancing leadership and organizational excellence is at the core of what the National Center for Healthcare Leadership has been committed to for the past 20 years. This year, with the many unexpected challenges we have faced it has only highlighted the importance of leadership, collaboration, education, and research. As the industry remains diligent in service, I am continually impressed by the dedication, commitment, and ongoing improvement efforts our leaders and staff have demonstrated. I am proud to serve in this amazing industry and to provide guidance to NCHL as the 2020-2022 Board Chair."

In partnership,

Jill Schwieters
NCHL Board Chair
National Center for Healthcare Leadership

NCHL STAFF

- LeAnn Swanson, MPH, Chief Executive Officer
- Brandy Blanton, MLit, Research Coordinator, USCIPP
- Soleh Dermawan, Accountant
- Jarrett Fowler, MPPA, Director, USCIPP
- Alia Ibrahim, Manager, USCIPP
- Jen Kvasnicka, MHA, Program Manager, NCAF
- Callie Lambert, Research Manager
- Meghan Nousaine, MPH, Director, Communications & Membership
- Melanie Standish, MS, Program Manager, LENS
THANK YOU TO OUR 2021 CORPORATE MEMBERS

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