MHCA Spring Conference

Bound for Baltimore

After a winter to test the hardiest among us, spring is a welcome season that brings with it a trip to Baltimore for MHCA's second quarterly conference of 2010. Join us May 4-7 at the Intercontinental Harbor Court Baltimore where formal presentations and interactive forums will instruct and expand your business horizons. Two featured presentations are on the agenda. See below for information on Wednesday's presenter, Terry Brock and Thursday's speaker, David Whitehouse, MD.

Also visiting with us Wednesday morning is Jeremy Nelson, CEO of Afia, Inc. His topic is "Developing an IT Portfolio - Creating Strategies and Managing Investment Risk." Nelson will then join our Information and Technology Focus Group (IT) Wednesday afternoon to describe a web-based tool to assist behavioral health organizations with electronic health record vendor selection. Opposite IT will be the second meeting of MHCA's Quality Improvement Collaborative: Phase Two, facilitated by Dr. Allen Daniels. Those wishing to meet separately with Daniels to examine their individual organization's QI plans can do so throughout the conference but especially from 3:15 – 4:30 Thursday afternoon. Use the online registration form to indicate your interest in an appointment with Daniels.

A combined forums event will be held Thursday afternoon to allow New Trends, Futures, Applied Research and IT participants to further examine Dr. Whitehouse's message. Forum leaders will serve as a panel along with Whitehouse, engaging the audience in this unique learning opportunity.

Make plans now to attend our conference – hotel reservations and MHCA registration deadline is April 6. To register go to *http://www.mhca. com/Meetings/2MeetingRegistration-45.asp*. We invite you to explore Baltimore, a vibrant city where you will find something new around every corner. Our conference hotel is located in Baltimore's world-renowned Inner Harbor area, surrounded by historic neighborhoods where you will find unique shops and restaurants for every style and taste. Soak in springtime while joining your MHCA colleagues in another great learning conference. ❖

Two Featured Presentations

Whether you are of an age born into technology or a little more "experienced" and still having to rely on your kids to advise you about Twitter, you will find MHCA's Spring keynoter's message helpful for sorting out the useful from the midst of the techno jargon. Terry Brock brings his message of relationship marketing through technology to MHCA as a keynote presentation on May 5 when we meet in Baltimore. According to Brock, business success today is not about the technology, the E-commerce, the E-mail, cell phones, Google, Twitter, Facebook or even LinkedIn. It is about connecting with and relating to the right people to build your profitable business. A regular columnist for business journals across America ("Succeeding Today"), Brock has worked with professionals from many different fields, helping them recognize technology trends and use them to gain a strong competitive advantage.

On Thursday morning, we will hear a special address by David Whitehouse, MD. entitled, "Neuroscience Informed Mental Health - Looking into the Future." He will discuss clinical and ethical challenges and possibilities as psychiatry comes of age. As clinical lead at OptumHealth Behavioral Solutions, Whitehouse asks, "Advances in neuro-

science beg us to look again at our treat-

Terry Brock   *David Whitehouse*

ment offerings. Are antidepressants only a partial solution? Where are we with personalized medicine? How have advances in our understanding of neurogenesis and synaptogenesis changed daily practice? Can brain training really work? What are the ethical issues raised as we understand more about the brain and its potential and lack of potential to change?" Come hear what Whitehouse has to say about all this. ❖

Imbedded with a Peer Partners Group by Tara S. Boyter

The boss is away, attending the National Council conference in Orlando, and I'm using editor's privilege to usurp his regular column space! To borrow a term from the press, I recently was "imbedded" with a new MHCA Peer Partners group and loved it. Here's what I learned.

MHCA members Inman White (Longview, Texas), Galen Goode (Terre Haute, Indiana), Bill Kyles (Independence, Missouri) and Dennis Regnier (Tinley Park, Illinois) have decided to form a Peer Partnership under the guidance of Peer Partners, LLC. MHCA's Board of Directors formally adopted the Peer Partner concept as a member benefit in November 2008 and agreed to underwrite mentor expenses of the first meeting of any new group. Peer Partners, LLC was formed by four MHCA members whose partnership was the first formalized over a decade ago and includes Bill Sette, Wes Davidson, Mel Smith and Erv Brinker. Both Wes and Mel have since retired, and Mel has become the public face of the group, representing Peer Partners at each MHCA conference.

Wes Davidson was to serve as mentor for the White/Goode/Kyles/Regnier team when they held their first meeting at Community Healthcore in Longview, Texas on February 11-12 with Inman as host. Much to my delight, I was asked to meet with them as MHCA liaison. Groundwork had been laid, a project selected for study, and all logistics were in place. Then there was the "blizzard." Wes was grounded in Maine. Mel was called in to sub and hurriedly arranged a flight from his home in Gig Harbor, Washington. The rest of us straggled in one by one.

Under a steady dusting of snow, unusual for east Texas, the work commenced. Community Healthcore staff were extraordinary hosts – many thanks to all of them. The project selected by Inman for peer review was a bit different from the ordinary. Most peer reviews have focused on some internal challenge, but Inman was interested in peer consideration of the potential for limited collaboration with the Andrews Center in nearby Tyler, Texas where MHCA member Waymon Stewart is CEO. Though not part of the newly formed peer partnership, Waymon participated in Thursday morning's meeting via webcam along with several of his key staff and then hosted the group at the Andrews Center that afternoon. The Andrews staff also proved to be great hosts, and a big thanks is due them as well.

Together Inman and Waymon laid out for the team several potential areas for collaboration that would provide efficiencies and expand service to their two communities. Staff had their chance to provide opinion and ask questions. Galen, Bill and Dennis raised questions along with input from Mel, but the visitors primarily listened, absorbing facts, figures, energies and apprehensions. Then it was back to Longview where the day's deliberations were rehashed, digested and summarized.

The plan was to meet Friday morning at Community Healthcore with Waymon again participating by webcam. Mother Nature had other ideas – six inches or so of snow in east Texas can stop just about everything in its tracks! Resorting to "Plan B", the team met at the hotel instead, unfortunately without access to Waymon, but with an undeterred sense of mission and purpose. At the end of the day a clear set of recommendations was laid out for Inman to share with Waymon and staff of both organizations. New possibilities for collaboration were identified that only "new ears and eyes" could provide. Several areas of concern were recognized that had been just under the surface but warranted attention. Will the collaboration move forward? That's up to the Texas participants. But the concept was aired, new energy was brought to it, and the potential for important strides toward improved service delivery were made.

As the snow kept falling, we headed for various airports not knowing when we might get home. But it had been a great two days' work. In a spirit of cooperation, trust and shared mission, four MHCA colleagues had forged a partnership with significant cooperation from a fifth and valuable mentoring from a former member - a perfect example of how MHCA works and how Peer Partnerships provide a microcosm of MHCA's strengths. It was a wonderful experience for me, and I believe it will yield extraordinary return for those involved. They are headed next for Terre Haute where Galen will host the team. He certainly has a strong foundation on which to build. ❖

Newest Members

MHCA welcomed two new members in January bringing our membership to 137 in 32 states. Please join us in engaging these new members in the business and the collegial network of MHCA.

Buckelew Programs of San Rafael, California has become our second member in that state. CEO Steve Ramsland, EdD visited us at our 2009 Fall Conference in Scottsdale, Arizona. Steve is returning to MHCA - he was CEO of SERV Centers in New Jersey during the early 90s and brought that center

Steve Ramsland

Cathy Pope

into membership in 1992. Buckelew operates with a budget of $11 million and 137 FTEs serving Marin, Sonoma and Napa counties. Visit their website at http://www.buckelew.org Welcome back, Steve!

Lubbock Regional MHMR is our newest member from Texas. CEO Cathy Pope visited with us in May 2009 when we met in Savannah. Lubbock Regional was founded in 1964 as the South Plains Guidance Center and has grown to a comprehensive center operating with a $31 million budget. Visit them online at http://www.lubbockmhmr.org ❖

White, Stubbs Become MHCA Directors

Incoming MHCA Board members Inman White and Susan Stubbs were welcomed February 26 in Clearwater Beach, Florida. White has served as Executive Director of Community Healthcore in Longview, Texas since 1995. He was formerly Assistant Deputy Commissioner of Mental Health/Mental Retardation in Austin. Stubbs is CEO of ServiceNet in Northampton, Massachusetts. ServiceNet

Incoming Directors: Inman White and Sue Stubbs

has operated since 1995 with the merging of multiple area agencies and programs. It has since grown to its current size of over 600 employees with annual revenues of over $24 million. ❖

Awards for Service, Dedication

On February 24 MHCA recognized outgoing Board members Kenneth Jue and Daniel J. Ranieri, PhD whose combined 14 years service was praised by CEO Don Hevey. Jue recently retired as CEO at New Hampshire's Monadnock Family Services while Ranieri continues his role as CEO at LaFrontera in Arizona. Former Board member Gary Lamson received a unique gift of former MHCA conference badges he's worn and saved for over a decade – an award for frugality! ❖

Above: *Ken Jue, (left) is thanked for service to MHCA Board.*

Above: *Dan Ranieri, (left) is thanked for service to MHCA Board.*

Right: *MHCA CEO Don Hevey returns conference badges saved and notated for over a decade by Gary Lamson.*

Winter Conference Celebrates Anniversary, Attracts Record Numbers

MHCA's 2010 Winter Conference, held February 23-26 in Clearwater Beach, Florida, was a memorable occasion for members and friends alike. It was our 25th Anniversary, and it did not go unnoticed! Those who attended not only were privileged to participate in an exceptionally strong program but were treated to a celebratory event to be long cherished. Because there were so many great moments, we will publish a Special Edition of the *Executive Report* for full coverage. In this, our First Quarter Issue, we will cover the basics – be watching for the Special Edition!

Our program got off to a strong start with Tuesday's agenda that included the third session of MHCA's Integrated Healthcare Learning Community. It was facilitated by Kathy Reynolds, LMSW and Laura Galbreath of the National Council, and Fred Michel, MD of Pikes Peak Behavioral Health Group. The program continues to receive enthusiastic participation both by behavioral health and primary health partner participants.

As the beach warmed to a comfortable 60 degrees or so, the anniversary celebration began in earnest with "volleyball and games on the beach" coordinated by our own Phil Weaver and Larry Grinwis of Hope Network. The sun set and the fog rolled

Keynoter Dr. Lowell Catlett was welcomed by Diana Knaebe and MHCA CEO Don Hevey.

Dr. Dennis Morrison of Centerstone Research Institute addressed our New Trends Forum.

in, so a larger crowd gathered for a fun filled *indoor* Luau Reception that evening.

Dr. Lowell Catlett of New Mexico State University delivered Wednesday's keynote address on "Transformation Healthcare." His visit was preceded by a presentation of MHCA's Customer Satisfaction Management System's Best Practice Awards for excellence in 16 categories. Bestowing the awards was Greg Speed, CEO of Cape Counseling and Chairman of MHCA's Applied Research Committee. Wednesday afternoon offered several educational tracks. Presenting to our New Trends Forum was former MHCA member Dennis P. Morrison, PhD, now CEO of Centerstone Research Institute. He received high marks for his presentation on "Informatics, Effectiveness and Cost: How Cost and Effectiveness Data Will Shape the Future of the Behavioral Health Field." Sharing the afternoon time slot was the Marketing and Fund Development Focus Group Session I with a distance presentation by Robert Lang and onsite representation by John Van Camp. Their topic was "L3C: A Corporate Structure

MHCA Board Chair Dr. Tony Kopera and CEO Don Hevey co-presented with consultant Stu Winby (right) on our 2010-2012 Strategic Plan.

Concept and Valuable Tool for Non Profit Fundraising."

Wednesday evening was truly a night to remember as MHRRG and Negley Associates hosted a lovely reception and Genoa Healthcare hosted an elaborate banquet to honor our anniversary. Our Special Edition covers the story, complete with great photos and memorable quotes.

Thursday morning's General Session featured two presentations, the first provided by Florida members Linda DePiano, PhD, Jerry Kassab and Maggie Labarta, PhD along with Judge Steven Leifman, Special Advisor on Criminal Justice and Mental Health to the Supreme Court of Florida. An admirable alliance has been forged among these providers to improve the relationship of criminal justice and behavioral healthcare and elevate the level of care provided to clients caught up in both systems. Following their program, Stu Winby, facilitator of MHCA's 2010-2012 Strategic Planning

Negley Award Finalists: **Seated left to right:** *Melba Arthur and Mary Ann Guerra of David Lawrence Center; Rick Hankey and Tim Camp of LifeStream Behavioral Center.* **Standing:** *Ruth Mulder, Randy Hawkins and Ruth Cruz-Diaz of Lakeside Behavioral Healthcare.*

CSMS Best Practice Recipients: **Present at our Winter Conference,** **Left to right:** *Tony Kopera, CEO, Community Counseling Centers of Chicago, Presenter Greg Speed, MHCA Applied Research Chairman and CEO of Cape Counseling Services, and John Mans, CEO, CPC Behavioral Healthcare.*

Risk Retention Group Honors Longtime Directors Davidson and Bracco

MHRRG Board bids farewell to Wes Davidson and Howard Bracco and welcomes new Directors Don Hevey and David Ptaszek. **Pictured:** **Seated,** *Bracco and Davidson,* **Standing,** *Hevey, Board Chair Susan Buchwalter, and Ptaszek.* **Insets:** *Negley Associates Managing Director Nicholas Bozzo presents gifts to Davidson and Bracco.*

Marketing/Fund Development Focus Groups

Above: *John Van Camp and Nelson Burns.* **Right:** *Steve Ronik, Jean Drees, and OPEN MINDS presenter Jeremy Mann.*

High Performing Executive Teams *by Pam Bilbrey*

Senior leadership teams can make or break an organization. They are the hallmark of organizational performance that sets the tone for how employees at all levels of the organization work with one another. Behaviors that originate with the senior team are filtered down, where they are repeated and often magnified.

In May 2009 MHCA members completed an Organizational Mindset survey to gain insight into how the membership evaluates themselves on various components of high performance. One survey question addressed high performing executive teams: *Our senior leadership team is functioning at the highest level possible with maximum cohesion and clarity.* Of the 68 respondents, only 10.3% strongly agreed with the statement indicating that at least 89.7% felt there is an opportunity for their senior leadership team to perform at a higher level.

Creating a functional, cohesive team is one of the few remaining competitive advantages available to leaders. That's because teams that are functioning at their best make better and faster decisions than non high performing teams, they avoid wasting time and energy on politics and backstabbing and they create greater alignment because everyone is on the same page. In other words, they eliminate the distractions that prevent them from achieving their goals.

Jim Moore

Jerry Thompson

But great executive teams don't happen without putting in the time and energy to grow and develop the team. Jim Moore,, CEO of Indian River Mental Health Center in Tuscaloosa, Alabama and Dr. Jerry Thompson, CEO of Coastal Behavioral Health in Sarasota, Florida have done just that. Both have recently led efforts to create a higher performing executive team at their organizations Jim and Jerry share their insights and experiences throughout this article.

First Team Thinking

High performing teams embrace the concept of *first team*. In reality, however, teamwork is more often than not disenfranchised at the executive level by "I am my function" thinking. In other words, members of the team associate their role on the executive team as representing their area of expertise only. In these situations you will find, for example, that the CFO only participates in the discussion when financial topics are on the table. Teamwork is also harmed when the individual members of the team are there to represent their respective departments serving as the promoter and defender of their turf. Instead, first team thinking promotes the belief that team members must prioritize the team that they are a member of **over** the team that they lead or manage. It is often a difficult mindset for leaders to adopt given their allegiance to their staff but is absolutely necessary to ensuring the best decisions for the entire organization. "I find that there is no lack of commitment to the organization; however, that same level of commitment to the executive team, or first team concept, is often not recognized as a prerequisite for high performance," shares Dr. Thompson.

"The concept of first team or one heartbeat has created common language and a sense of identity for the IRMHC executive team," shares Moore. " It provides the mindset that individual goals, issues and interests are set aside to focus on what's best for the organization. I truly believe it is the one thing that keeps us from busting apart at the seams as we deal with the challenging issues of managing a complex business environment."

Moore often uses a sports analogy to make his point about first team thinking. "There is a Chicago Bulls story that illustrates the first team concept and the difficulty of setting aside personal needs for the team. A superstar in his own right, Scottie Pippen more often than not found himself in the shadow of Michael Jordon. When Michael Jordon retired before the 1994 season, Pippen took the spotlight. Perhaps the most infamous episode of Pippen's career came in the 1994 Eastern Conference semifinals against the New York Knicks. Phil Jackson needed a big play from his team to have any chance of

going to the finals. With 1.8 seconds left and the score tied, Jackson set up rookie Toni Kukoc for the last play with Pippen inbounding the basketball. Pippen, who had been the Bulls' leader all season, was so angered by Jackson's decision to not let him take the potential game-winner that he refused to leave the bench and re-enter the game when the timeout was over. Kukoc did hit the game-winner but Pippen's behavior dampened the celebration. To his credit, Pippen owned up to his inappropriate behavior and apologized to his teammates. The fact that he quit the game became one of the few negative marks on his impressive career."

Teamwork matters. A University of Connecticut study of 2,435 employees in 400 organizations found that being a team player ranked highest as the most important factor in getting ahead in the workplace. It ranked higher than intelligence, leadership skills, working long hours and even job performance. Yet, a disheartening statistic recently reported in *USA Today* revealed that over 50% of those surveyed indicated that a colleague has tried to make them look bad on the job. Teamwork is difficult and often undercut by the dynamics of the group. An understanding of team dynamics is a beginning step in moving to greater levels of effectiveness.

The Five Dysfunctions of a Team Model

Patrick Lencioni, in his New York Times best-selling book, *The Five Dysfunctions of a Team*, shares the dysfunctions that go to the very heart of why teams – even the best ones – often struggle. In fact, like it or not, all teams are potentially dysfunctional because they are made up of fallible and imperfect human beings.

To better understand the level of dysfunction that your team may be facing, ask yourself these questions:
• Do team members openly and readily disclose their opinions?
• Are meetings compelling and productive?
• Does the team come to decisions quickly and avoid getting bogged down by consensus?
• Do team members confront one another about unproductive behaviors or lack of follow through on commitments?

• Do team members sacrifice their own interests for the good of the team?

The Importance of Vulnerability-Based Trust

The **absence of trust** is the first and most important dysfunction. The type of trust that is critical to high performing teams is not predictive trust where you know how people will act or respond, although that type of trust is advantageous. It is *vulnerability-based trust* that has to do with the team members' ability to admit their mistakes, share their weaknesses, ask for help and acknowledge the strengths of others. When team members can't be vulnerable the trust level of the team suffers and an us vs. them mentality is created where the team members work at odds instead of collaboratively, team members jump to conclusions about the intentions of their colleagues, and time and energy is wasted in managing behaviors for effect. The result is that significant intellectual capital on the team goes untapped.

Moore adds, "Unlike some areas of team effectiveness that can be enhanced by adopting a new process, structure or tool, trust is a 'fragile commodity' that takes time to build and patience as often teams experience two steps forward and one back. My experience is that a crack in trust makes it hard to get acceleration in the other areas of team performance. One of the most powerful experiences our team had in building trust was through the Myers Briggs assessment. It provided such clarity on how people look at the same situation differently and how they tend to problem solve. That knowledge helped us be more accepting of each other and embrace the differences as strengths of our team."

Dr. Thompson's team participated in an exercise to help the team get comfortable being vulnerable where they shared experiences within their famiily of origin. "It was amazing to hear of people's experiences growing up and then see those same behaviors in the workplace. It helped us better understand each others' perspectives and opened the door to more transparent communication."

Promoting Unfiltered Passionate Debate

Is everyone on the team weighing in and sharing their opinions without reservation or are they holding back their opinions, choosing their battles, or even worst taking things offline because the team avoids having the conflict that is necessary to reach a decision? Even the best of teams are uncomfortable having conflict. But high performing teams argue, not in a mean-spirited or personality-focused way, but they have **passionate disagreements** about concepts and ideas that are important to the organization's success. They know that avoiding conflict and disagreement leads to compromises and artificial harmony that breeds mediocrity.

"From the perspective of a CEO, it can be challenging to promote conflict among the team. There is perhaps a belief or desire to fix the issue instead of letting the conflict take place and the team members work through their differences. But it is the experience of confronting controversial issues that builds the competency of the team and allows them to place critical problems on the table for discussion. Through our work on promoting productive conflict we have been able to take the personal edge off disagreements and work from a common understanding that minimizes politics and speeds up the decision-making process," reports Moore.

Likewise, Dr. Thompson found that teams generally put a great deal of energy in avoiding conflict, even when conflict is needed to determine the best course of action. "Our team realized that we were not having the level of conversations needed when faced with tough issues. We agreed to foster passionate debate in our team meetings and as a result have seen more honest disagreement surface during the meetings enabling us to get everyone's ideas and opinions on the table for consideration."

Achieving Buy-In and Commitment

Without healthy conflict teams will not be able to avoid the next dysfunction, **lack of commitment**. When team members are unwilling to weigh in and share their opinion, there is a very high likelihood that they will not buy into the decisions made. Without doing so, ambiguity among the team about direction and priorities is created; windows of opportunity close due to excessive analysis and second-guessing among team members is encouraged. An environment of "meetings after the meeting" prevails.

Meetings provide the primary venue for leaders to interact yet more often than not leaders report their meetings are redundant and unproductive. High performing teams force clarity and closure during their meetings to eliminate the ambiguity that creates confusion and competing priorities in the organization.

Moore shares his insight on the importance of clarity and closure. "Consistent communication at all levels of an agency can be difficult especially given the differences in how people interpret information. It is apparent that how we cascade information from our senior leadership meetings affects the quality of the communications our staff receive. By taking the time at the end of each meeting to make sure we have closure on issues and that each member of the leadership team is in sync on the key messages to be shared has created much greater alignment across the agency."

Embracing Accountability

The **avoidance of accountability** dysfunction is overcome when team members are willing to hold one another accountable for adhering to agreed upon standards and decisions instead of relying on the leader to intervene. "In my experience people find it hard to hold their colleagues accountable because they don't know how to do so without making it conflictive," shares Dr. Thomspson, "so they place the responsibility on the leader instead." However, peer pressure is more efficient and effective than going to the leader complaining about a colleague and asking that they intervene. Peer-to-peer accountability eliminates politics, resentment upon team members, and the back-channel gossip that is destructive to the morale of the team. The only way that team members will commit to confront one another when they see something that isn't serving the team is if the leader can effectively demonstrate their willingness to hold people accountable first.

Focus on Results

The **inattention to results** dysfunction occurs when team members' focus is placed on *their* department, *their* budget, or *their* career aspirations. Teams that trust one another, engage in conflict, commit to decisions, and hold one another accountable are very likely to set aside these individual needs and personal

Executive Teams, *continued from p. 7*

agendas to focus on what is best for the organization. As a result, team members are willing to make sacrifices in order to drive the collective results of the team.

Cascading the Model for High Performing Teams

"We have a commitment to continue to enhance the leadership and management skills at all levels of the agency. We found the ability to build and lead high performing teams to be especially critical to agencies such as ours where people work closely together, wear many hats and must work effectively across the organization to serve our clients" said Moore.

As the executive team embraces new knowledge and skills it is important that the behaviors of effective teams be embedded in the culture of the organization. By cascading the approaches and philosophy of effective teamwork to front-line managers and supervisors it will become the "way we do things around here" leading to greater levels of cohesion and collaboration.

As Dr. Thompson reminds us, "Perhaps the most difficult obstacle to building a high performing team is the ability to make the needed changes when challenged with running a complex business that operates 24/7." Lencioni says that "Successful teamwork is about embracing common sense with uncommon discipline and persistence." By committing to a small set of principles, team members can overcome the natural tendencies that make teamwork so elusive. ❖

Pam Bilbrey is a Principal Consultant with The Table Group, a Patrick Lencioni company, executive coach, speaker and author. She has shared best practices of high performing organ-

Pam Bilbrey

izations with 10,000+ leaders and has led cultural transformations in some of the most prestigious companies in the US, Canada and Europe. She is a prolific writer publishing numerous articles annually on organizational effectiveness, extraordinary leadership, employee engagement and high-performing teams. Her newest book is Ordinary Greatness: It's Where You Least Expect It…Everywhere *(Wiley, 2009). She and co-author Brian Jones keynoted MHCA's Spring 2009 Conference. Contact her at pam.bilbrey@tablegroupconsulting.com*

Conference, *continued from p. 4*

process, provided an overview of that work along with input from MHCA Board Chair Tony Kopera, PhD and CEO Don Hevey.

Finalists in the 2010 Negley Awards for Excellence in Risk Management presented their programs on Thursday afternoon for final judging. Taking top prize ($10,000) was Lakeside Behavioral Healthcare of Orlando, Florida, whose entry is provided as a supplement to this issue of the *Executive Report*. Runners-up ($5,000 each) were David Lawrence Center of Naples, Florida, and LifeStream Behavioral Center of Leesburg, Florida. All three will present their programs again at the National Council's conference in March. Future ER supplements will feature the programs of David Lawrence Center and LifeStream.

The Marketing and Fund Development Focus Group held its second session Thursday afternoon on the topic, "Manage Marketing Dollars Using Performance Metrics." Guest speaker was Jeremy Mann, Senior Associate of OPEN MINDS. Sharing the Thursday afternoon agenda was the first meeting of MHCA's Quality Improvement Collaborative: Phase Two with facilitation by Allen S. Daniels, EdD.

MHCA is indebted to its generous sponsors and fine exhibitors whose support was evident throughout the conference. Special photography was provided by Livingston Galleries. Photos available for purchase may be accessed at: **www.pictage.com/801953**

CALENDAR

National Council's 40th National Mental Health and Addictions Conference & Expo
Dates: March 15-17, 2010
Location: Coronado Springs Disney World Orlando, Florida

MHCA 2010 Spring Conference
Dates: May 4-7, 2010
Location: **Note Hotel Change:** Intercontinental Harbor Court Baltimore, Maryland
Reservations: 800-824-0076
Local: 410-234-0550
Rate: $189 single/double
Deadline: April 6, 2010

IIMHL 2010 Leadership Exchange
Citizens in Partnership - Inclusion or Illusion
Dates: May 17-21, 2010
Location: United Kingdom and Ireland
For More Information:
http://www.iimhl.com/Meetings/2010KillarneyIE-RegForm.asp

MHCA 2010 SummerConference
Dates: August 17-20, 2010
Location: Westin Chicago River North Chicago, Illinois
Reservations: 800-233-4100
Rate: $189 single/double
Deadline: July 15, 2010

Communicare Names New CEO

Communicare, Inc. of Elizabethtown, Kentucky, has named its former Associate CEO Dan Simpson to the top position on the retirement of Bill Osbourne. Osbourne, who retired once before from Communicare, was called back to service in 2006. We welcome Dan, who officially takes over in April. ❖

Dan Simpson   **Bill Osbourne**