

Advancement to Fellow Application

Benefits

The designation of Fellow (FACHCA) represents the highest level of ACHCA membership.¹ Obtaining and maintaining the FACHCA distinction demonstrates the administrator's commitment to professionalism and dedication to leadership and service excellence. FACHCA is a mark of distinction that sets the administrator apart from his/her peers.

Requirements

The general requirements for Advancement to Fellow in ACHCA are specified in *Article II, Section 3* of the ACHCA Bylaws:

- a. **Fellow** is the highest status that voting members can attain. An ACHCA Fellow is distinguished by professional achievements and service standards well above the ordinary demands of his or her position.
- b. A Fellow shall always meet the qualifications for active status as a Voting Member. Fellow status and any rights to insignia or other intellectual property related to Fellow status shall terminate automatically if the Fellow does not maintain status as a Voting Member.
- c. Further qualifications of the process for recognition as Fellow shall be as established by the Board or the Fellow Advancement Subcommittee and include:
 - i. The candidate must have been a voting member in good standing for at least two years immediately prior to the application.
 - ii. She/he must have completed at least four years of acceptable training beyond high school, or the equivalent at the discretion of the Board of Directors.
 - iii. She/he must give evidence of:
 - (a) Service beyond the ordinary demands of her/his position.
 - (b) Continued adherence to the criteria for membership.
 - iv. She/he must in all other respects meet the requirements prescribed by the Board of Directors.
 - v. She/he must obtain the required minimum number of points in the overall evaluation as required by the Board of Directors.

Requirements for advancement are nondiscriminatory in relation to age, gender, race, religion or national origin. Advancement to Fellow is open to all voting members who meet the following requirements:

- Acknowledge ACHCA's <u>Code of Ethics</u>.
- Two years of current, voting ACHCA membership.
- Accumulation of the minimum number of points in each section of this Advancement to Fellow application.
- Accumulation of a total of 165 points on this Advancement Application.
- Once attained, Fellow status is a designation that is kept for life <u>as long as</u> ACHCA voting membership or retired fellow membership is maintained.

¹A 2012 salary survey conducted by *ADVANCE* magazine (January/February 2012 issue) and the ACHCA showed that a Fellow of the ACHCA makes an average \$23,808 more per year than their administrator peers without ACHCA Fellow status.

Personal Data				
NameLast Name	First Nam	e \ \	Middle Initial	
Exact Title of Present Position			riddic ilittai	
Facility/Company				
Business Address				
Business Phone	FAX			
Home Address				
Home Phone	FAX_			
E-mail Address (required)				
License Number(s), Type, and State(s)				
ACHCA Member #	Year Joine	ed		
I. Experience in Health Servic	es Administration (8	-40 points)	Applicant	Committee
 4 points per <i>full year</i> of service as an admin consultant, in long term health care, an officer health care administration. 1 point per full year of service as a department of point per quarter or semester as a part-time. 	in health care administration, or ent head in an LTC health care or	full-time instructor in long terroganization		Use Only Points:
Note: Although points can be achieved for the above a voting ACHCA Member. Starting with present position, list experience belo Dates (Mo/Yr) Position	w. Organization	City/State		
II. Formal EducationDegree Award points in only one category. Eight points for each year beyond high school Masters not related to health care administration	ol up to a baccalaureate degree	8-32 36	Points:	Points:
Masters reasonably related to health care adr Masters of Health Care Administration Doctorate not related to health care administration Doctorate reasonably related to health care a	ration	38 40 44 48		
School Name and Location	Degree Received	Major Field		
III. Continuing Education* (30- 1 point per five accredited continuing educ 3 points per full college or university seme	ation and/or instructorship hours		CE Points:	CE Points:
Please provide a list of courses completed W dates and continuing education hours or a sta from NAB/NCRS, a provider of CE education	ITHIN THE LAST FIVE YE te licensure board summary.	ARS on page 5, showing * CE hours are accepted	Academic Points:	Academic Points:
provider of Continuing Education. • *Please show the computation of points a: • *Not inclusive of academic credit earned			Total Points:	Total Points:

IV. Professional Activity (30-74) A. Health care professional associations to which you have belonged as an individual member or in which you currently function as the official representative of your facility over the past 5 years. (A professional association is one whose mission focuses on individual professionals; a provider or trade association is one whose mission focuses on the organization; this section focuses only on professional association affiliations) • 2 points per year for ACHCA membership up to five years; 1 point per year per membership in other health care professional membership organizations (up to five years)	Applicant Use Points:	Committee Use Only Points:
B. Health care or related offices and/or committee assignments you have held over the past <i>five years</i> (health care associations, provider or trade associations, professional societies or health agencies.) • 4 points per year ACHCA national or chapter level; • 2 points per year served in other health care organizations, provider associations, National Quality or Culture Change Initiatives **Association, Society or Agency** Office or Committee Assignments** Dates (Mo/Yr)	Points:	Points:
 C. Guest lecturing, paper presentations or legislative testimony in the health care field within the last 5 years. 2 points per event as a guest lecturer (only count the same lecture once) 2 points per paper presentation or legislative testimony Provide details on the group, college or university presented to, dates and the total number of CE hours lectured.	Points:	Points:
 D. Published articles or books in health care administration or related area within the last 5 years. Posts to Internet blog sites or social media outlets (examples: LinkedIn, Facebook, Peer2Peer open forum on ACHCAConnect) are not eligible for submission. 4 points per a published article in professional journals or White Papers 12 points per published book Please provide bibliographical information. 	Points:	Points:
E. Preceptor in AIT Program. • 4 points per Administrator-in-Training preceptor served within the last 5 years. List students and dates (Mo/Yr) of preceptorship.	Points:	Points:

F. ACHCA National and Chapter business meetings — National ACHCA <u>Business Meetings</u> = 4 points (Business Meetings held at Annual Convocation, installation activities, and meetings where official ACHCA business is conducted, excluding educational activities); Chapter ACHCA <u>annual meetings</u> = 1 point (not duplicative of CE sessions claimed under section III)	Applicant Use	Committee Use Only
Type of ACHCA meeting Location Dates	Points:	Points:
 G. Professional Certification 4 points for ACHCA Nursing Home Certification (CNHA) 4 points for ACHCA Assisted Living Certification (CALA) 4 points for ACHCA Subacute Care Certification (no longer available for new certificants) 3 points for NAB's Health Services Executive ™ credential (HSE) 	Points:	Points:
 H. Awards within the last five years 4 points as the recipient of ACHCA Eli Pick Facility Leadership Recipient of AHCA/NCAL National Quality Award: 3 points for Gold, 2 points for Silver, and 1 point for Bronze 		
Type of Award Date(s) Received		
I. Attendance at an International Symposium or National trade association conference (e.g., AHCA, Argentum, Leading Age) that focuses on post-acute and aging services healthcare. 1 point per meeting may be granted by the Committee; maximum of 4 points.		
Name of Conference/Symposium Date(s) Attended		
J. Service on State Licensure Board ● 1 point per year served Board Served Dates (Mo/Yr)	Points:	Points:
K. Applicant was the administrator of record for at least three out of the past five years of a facility with	Points:	Points:
Joint Commission accreditation yes no 4 points		
CARF accreditationyesno 4 points		
TOTAL POINTS FOR SECTION IV	Total:	Total:

 V. Civic and Community Active For the past 5 years, list: 1) Civic and communities assignments held for membersh service activities. 1 point per year for membership in a community veterans group such as the VFW, or religions. 1 point per year served on boards or communic clubs, or fundraising organizations such as include: Finance, Development, Recruitment. 1 point for each 10 hours of association, cludes, such as serving as a scout leader, par meals on wheels, serving as an usher at chuthat association/club/fund (up to a maximum.) 	numity clubs in which you held not clubs or fundraising organization or civic of cous auxiliaries/clubs such as a chuittees of either membership associate Cancer Society or United Funda, etc.) ub, or fund volunteer activities, set ticipating in a memory walk, parturch, or participating in social eve	club such as the PTA, arch choir; ations or civic/communit d Appeal. (Committees reparate from Board/commicipating in a soup kitche	ty night <u>ittee</u> en,	Points:	Points:	
	committee/service activity					
TOTAL POINTS FOR SECTION V		T	otal:			
* * * *	* * *	* *		Grand Total:	Grand Total:	
This application for advancement is the confidential property of ACHCA and the undersigned. Through my signature below, I agree to allow ACHCA use of this information for bona fide purposes related to the goals and purposes of ACHCA as expressed through its Bylaws. Through my signature, I also attest to the accuracy of the information included in this Application. I acknowledge that submission of documentation is desired but optional and agree to provide supportive documentation if selected in an annual audit sample. I also acknowledge the ACHCA Code of Ethics included in this application.						
Signature		Date				
Please review the checklis		you have complete	ed all t	he requiremen	ts.	
Advancement to Fellow Committee Review Total Number of Points:Advancement to Fellow:	w ☐ Recommended	☐ Not Recommend	led due	to:		
Evaluator:		Date of	Review	7:		

Ap	plica	tion Checklist				
	sheet	plete the application in its entiremay be used to list items. Each ate point totals in the column of	h section corresponds to	a range of points	that determine eligibility.	
			Minimum Allowa	able Points	Maximum Allow	able Points
	I.	Experience	8		40	
	II.	Formal Education*	32		48	
	III.	Continuing Education	30 (150 ho	urs)	80 (400 ho	ours)
	IV.	Professional Activity	30		74	
	V.	Civic and Community Activities	12		18	
		may request a waiver of the f				any of
	sumn Appli of all	nit a list of earned continuing enaries of credits earned over the icants are subject to an annual items listed on the application	ne last five years (Section 5% random audit. Those in the section is a section in the last five years (Section in 1997).	on III). Documenta	tion of other items is not	required.
	Revie	ew and agree to the ACHCA C	Code of Ethics.			
		n your signed application with itted become the property of the				low. All items
		ncement applications must be divancement to Fellow, or if add			Subcommittee. Applicants	will be notified
			Payment In	nstructions		
		The Advancement	to Fellow Application	n fee is \$250 (n	on-refundable)	
Attn:	Advar	ur completed application neement to Fellow, ACHCA ecticut Avenue, NW Suite 450 application to professionalad	Washington, DC 20036	`		
Pay	ment	Options (check one)				
	_ Che	ck enclosed (Payable to ACF	HCA)VISA _	AMEX _	MASTERCARD	DISCOVER
Cre	dit Ca	rd#		Exp. Date	C7	VV
Nar	ne on	Card		_ Signature:		
Bill	_	ddress for card: same as Home Address listed::	d on Page 2?	Is the same as	Business Address listed o	on Page 2?

Zip

State

Street

Advancement to Fello	W
Continuing Education	1

Name	

Please list courses completed **WITHIN THE LAST FIVE YEARS**, showing dates and classroom hours or a state licensure board summary. Divide the total number of CE hours by 5. Multiply the total number of academic credits by 3. Place totals on page 2, section III of this application. CE hours are accepted from NAB/NCRS, a provider of CE education approved by the state board or other professional providers of continuing education. **You may copy this form as needed.**

Date	CE Provider and Location	Seminar Name	Total CE Credit	Total Academic Credit
			Total credits =	Total credits =
			Credits/5 =	Credits x 3 =