



FLASHPAGE

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EMPOWERMENT HOUR



October 8th

The excitement starts:

1:01pm EST

Presenter:

Nancy Mueller

Model Magician

FREE for MVI Clients
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Integrus Hospice Management — Really?

Integrity in management is not a soft concept. It means doing what you know needs to be done, even when it is difficult, expensive, or unpopular. It means refusing to rationalize cutting corners as “fiscal responsibility” when the real motivation is protecting your own comfort. It means holding people Accountable—including yourself—and taking Complete Accountability for your Quality and the Standards you have committed to.

I have seen too many Hospice Leaders who know what World-Class Quality requires and who choose not to pursue it because it is hard or perceived as hard. If you know what needs to be done and you are not doing it, I have a simple message: Do it! Or step aside for someone who will. Our Hospice MISSION is too sacred for our respective organizations to be managed sloppily. We need to be true Hospice Professionals, full of Intelligence and Integrity!

Most CEOs and Hospice Managers probably believe they have high Standards regarding Integrity. I suspect we all think we are Integrus. I think Hospice people, in general, are salt-of-the-earth, top-rung human beings. They don't steal, lie, or exaggerate (However, some do exaggerate regarding “Hospice Size,” I have found). They pay their bills and taxes. They are good citizens and are often pillars of the community. Yet, I think that Integrity is one of the biggest problems in Hospiceland and healthcare in general. I know that this statement may at first appear harsh and it may hurt a bit, but as one contemplates this important topic beyond a superficial consideration, I would say that we have our work cut out for us. And I always include myself in the equation. I think a

the excitement continues on next page....



truly Integrous person is someone who commits themselves to understanding the truth and has the courage to leave behind egoist positions in favor of it. The Integrous seek the highest ideals of the human experience. *“So, Andrew, why do you say that Integrity is one of the biggest problems in Hospice?”*

Here we go... [It is also a problem with virtually all other movements and industries, but I think Hospices should have higher Standards if we are truly still a “Movement.”]

- **Do you think it is right to ask the community for support when there is “more than enough” reimbursement from Medicare and other sources to fund a World-Class Hospice experience if it is managed well?** People work hard for their money! Donna Summer wasn’t kidding! Money represents their time and effort, sacrifice and sweat. I don’t think it is right to ask the community to bail out poor or even average management. It is even worse when a Hospice justifies its poor management under the guise of “compassion” and “high quality!” Do you really think that “spending more” equates to higher quality?
- **Is it right to retain Managers who can’t manage?** If a Manager can’t perform the functions at the Quality level needed by the organization at or below the cost Standards of the organization, is it right to keep that Manager? Do we think we are setting a good example or precedent? Do we think we are being kind by holding on to sub-performing Managers? An example of a great Manager was Mother Teresa. She was a GREAT MANAGER! She would NOT tolerate waste! And she removed Managers who wasted resources in her view. She held the Mission over favoring any individual. She knew she would not be respected unless her Standards were high enough to inspire those committed to the Mission.
- **Is it right to retain sub-performing staff and thereby disrespect the hardworking?** This Integrity-probing question is closely linked to the preceding one. All Managers are judged daily by those they manage. The brightest, most energetic, and most Integrous people do not want to work for Managers with low Standards and low Accountability. They will leave these meaningless, low-Quality organizations eventually. If a new RN is doing 4 to 5 high-quality visits a day with no problem and then realizes that others are doing 3 or fewer visits, and they are paid the same, what do you think will happen to the motivation of that RN? This is why a Manager has to be very careful what he or she tolerates.
- **Does your organization give the same pay increases despite significant differences in performance levels?** The United States is a “Meritocracy” where the fastest rabbit gets the most lettuce—and there is nothing wrong with that. There is no point in trying to make that wrong or perceive it as wrong. Again, is giving the same pay raises to sub-performers as well as to the highly productive motivating?
- **Every time a Hospice has a service failure, it is a broken promise or vow.** A business is a vow. Our Standards are the promises of a business. Failure to do what you communicated you would do is a lie. Promises and vows must be taken seriously. We have to commit to doing 100% of our Standards on a “day-to-day” basis. Yes, we all make mistakes over extended periods of time and certainly we should learn from our mistakes, but don’t make it a habit or even accept them on a regular basis! If you tolerate service failures, your Standards as a Leader/Manager simply are not high enough!
- **Don’t say that “People are our greatest asset” unless you have a jaw-dropping People Development System evidenced by 10% or less turnover and 100% of your Standards done on a “day-to-day” basis.** If people are truly valued, they don’t leave due to FEELING unappreciated, overworked, and underpaid. Would your staff say they are extraordinarily well-trained? Would they say that the training they received during onboarding, as well as on an ongoing basis, is second to none, even life-changing? Now, one could make an affirmative statement out of ignorance, but if a CEO is aware of superior methods for developing staff and does not employ them, there is an Integrity problem. If the CEO is not aware, then they are simply ignorant.

They are not a bad person, but lack understanding of this *cause and effect* relationship—the #1 Strategic Direction and the place where all Quality is created. The Mission is still only accomplished through people, last time I checked.

- **Is it right to not pay people well if you can?** Is it right to waste resources and thus unnecessarily deprive the people who fulfill the Mission of the means to contribute to their welfare? Why can't a Hospice pay its staff well, perhaps even better than a hospital or the health system? The fact is, a Hospice can—IF it manages well! If you manage well, you need fewer people. These people tend to be more competent. Thus, you have fewer people to manage, which makes managing easier, and you have more money to pay out!
- **Is it right to not hold Board Members to the same Standards as Staff?** Integrity at the Board of Directors level is critical. And nearly ALL of the items mentioned above converge at the Board level (and with the CEO). These people are charged with the *Duty of Care obligation*. Yet, as I work with Boards, I find a lack of Standards. I find a lack of understanding of boundaries (operational vs strategic). I find that Board Members are neither trained in the Standards of the organization nor in the business of Hospice! Often, they are allowed to miss and be late to meetings without any meaningful Accountability. I see confusion about the absolute need for great management resulting in healthy levels of financial reserves. I see recommendations, born from a lack of professional perspective, to get “more community \ support” to bail out poor management. This is a training and Integrity issue.
- **Tired and retiring Hospice CEOs who have convinced their Boards that “Small Hospices can't make it, so we have to merge.”** *“This place can't make it without me!”* is the real statement. This is ego. It is so common for us as human beings to transpose our views (FEELINGS) onto situations. What this CEO is really saying is *“I don't know how to manage well enough and prepare for this organization to continue.”* Then, ignorant Boards of Directors that have NOT been trained in the business of Hospice, that lack the perspective that comes from Benchmarking, nod in agreement. And thus, Hospices are unnecessarily “absorbed” into larger health systems where management is so often utterly atrocious due to lack of focus. It takes a great deal of Integrity to own up to the reality that you have not managed well and that the merger deal was more about you than the welfare of the organization you led. But by then, it is too late.

There is a direct relationship between *High Standards* that inspire and retention of Talent, Quality, and profitability. In fact, it is a paradox of sorts that “the higher an organization's or Manager's Standards, the more attractive the organization or Manager becomes to the Talented.” The Talented of this world don't want to work with the mediocre, and they certainly won't align with liars. If a Leader or Manager lacks Integrity, the Talented will leave at the first opportunity once it is discovered.

When you blow it...

And when you blow it in the Integrity department, own it! Acknowledge it, apologize, have a decent amount of regret, let it hurt, and learn from the pain. Then move on!!! I find that people are generally more forgiving than you'd think when you own your mistakes. However, recognize that there are also such violations of trust that one can never recover from in a career.

You are Innocent as a Manager

As one commits to understanding Integrity on a deeper level, one inevitably will discover shortcomings as a person that manifest in what one manages. So here is some relief. You are innocent as a Manager. As Socrates said, (paraphrased), *“All people do what they do because they believe it is right [or of personal benefit/payoff] in their own eyes.”* The Carpenter said, *“Forgive them, for they know not what they do.”* Now contemplating that statement will change your view of humanity!

We all do things for a payoff. Sometimes the payoff is to be the “victim” to gain attention and to get people to feel sorry for you. On TV, people often even try to “out-victim” each other! Sometimes people get angry and a FEELING of “righteous indignation” is the payoff! Right now, you are doing your best. You are managing the best you can, based on what you know about management and what you have the Integrity to do. Managing is more than an intellectual exercise. You may know what to do intellectually to improve your management, but you may not have followed through because you can’t emotionally bring yourself to do it. Thus, what needs to be done is not done! Holding people Accountable is a good example of this. People don’t want to do it, and thus, don’t or delay it to the detriment of the organization.

If you know you could do better and are NOT doing it, you should be FIRED! Where’s the Integrity in that? *“Well, they don’t pay me enough to do more and manage better, Andrew.”* If that is your motivation for working in Hospice, then go do something else for work! Why should anyone expect more pay unless they are ALREADY doing MORE than they are paid to do?

And let me add this: now that you have been exposed to these points, you cannot ignore them and be innocent—for that would be a demonstration of a lack of Integrity.

So, let’s go to work on consciously increasing our Integrity! I know it is not a popular topic. I went to a Hospice workshop on this topic presented by a very good person at one of our National Management Conferences—out of 1,000+ conference attendees, 25 people attended the workshop (and 5 of those left!) And to boot, of those remaining 20, most were my friends! All surprised that we were all drawn to this particular session without each other’s foreknowledge! Ha!

Integrity is NOT a hot topic... but it is a good topic! I can only speculate as to why, but I think that anyone interested in the topic of Integrity would have to be a pretty good egg!

I hope this helps!

Serving from a place of Love for ALL Expressions of Life...
~ Andrew



Finding Our Way: The Hard Work Behind Building One Hospice Standard



Written by: Sharon Lutz

Executive Director of Hospice of the North Coast

People often ask me what changed at Hospice of the North Coast.

The simple answer is that we became more disciplined.

The more truthful answer is that we spent years transforming nearly every aspect of how we delivered hospice care. It wasn't one initiative or one strategic plan. It was hundreds of decisions—some small, some incredibly difficult—all centered around one question:

"How do we ensure every patient receives the same exceptional experience, regardless of who walks through the front door?"

When I became Executive Director, I knew we had extraordinary people. Our staff cared deeply about patients and families, and that compassion had built a trusted reputation in our community.

But compassion alone was not enough.

Like many hospices that had grown over time, we had developed different ways of practicing. Every clinician had their own style. Every manager approached accountability a little differently. Documentation varied. Visit structure varied. Communication varied.

We were relying on individual excellence instead of organizational excellence. That realization became the turning point for our organization. It also became the beginning of one of the most difficult periods in our history.

We made a decision that if we were going to fulfill our mission at the highest level, we needed more than dedicated clinicians. We needed a system that made exceptional care predictable. That decision led us to adopt the MVI Model and ultimately create what we now call **The HNC Way**.

The transformation did not happen quickly. It unfolded over years.

It required rebuilding workflows, redefining accountability, retraining managers, redesigning case management, strengthening our Quality Assessment and Performance Improvement program, and developing leaders who could coach instead of simply supervise.

Perhaps most importantly, it required changing our culture. Some people embraced the vision immediately. Others needed time. Some decided this was no longer the organization where they wanted to practice, and we respected those decisions. There were also times when leadership had to make difficult decisions because maintaining different standards of care was no longer fair to our patients or to the employees who had committed themselves to the new direction.

Those were painful moments.

No Executive Director enjoys losing good people. But I learned that preserving relationships can never come at the expense of preserving standards. As our team became more aligned, something remarkable began to happen. The chaos gave way to consistency.

- Managers spent less time solving preventable problems and more time developing their teams.
- Clinical conversations became focused on patient outcomes instead of process failures.
- Interdisciplinary team meetings became stronger because everyone was working from the same playbook.

Families noticed.

- They experienced more coordinated care, clearer communication, and greater confidence that every member of our team understood their loved one's needs.
- Our quality outcomes reflected those changes.
- So did our family satisfaction scores.
- But another transformation was taking place at the same time.
- As our clinical operations became more disciplined, our financial health improved as well.

Reducing unnecessary variation improved productivity without sacrificing compassion. Stronger case management supported more appropriate visit utilization. Better documentation strengthened compliance. Managers learned to make decisions using both clinical outcomes and operational data.

Financial stewardship was no longer separate from patient care. It became one more way of protecting our mission.

Today, Hospice of the North Coast is recognized as one of the leading independent hospices in North County San Diego—not because we found a shortcut, but because we committed ourselves to doing the hard work of building a culture where compassionate care and operational excellence reinforce one another every single day.

Looking back, I don't believe our greatest accomplishment was implementing the MVI Model. Our greatest accomplishment was creating an organization where every employee understands that excellence isn't left to chance. It is built into every visit, every conversation, every decision, and every patient entrusted to our care.

That is the HNC Way.

And that is the legacy I hope we leave behind.

When Compassion, Discipline, and Financial Stewardship Work Together

For many years, I hesitated to talk about financial performance in hospice.

Some people believe that if a hospice is financially successful, it must somehow be compromising patient care. I have come to believe exactly the opposite.

When an organization is financially healthy because it delivers consistent, efficient, high-quality care, financial stewardship becomes one of the greatest expressions of its mission.

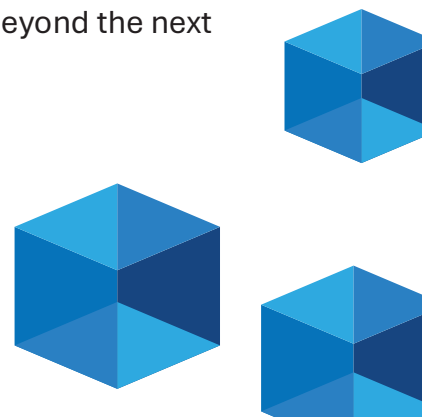
The goal was never to make money. The goal was to ensure that Hospice of the North Coast would remain strong enough to care for our community for generations to come.

Building a Hospice That Could Stand the Test of Time

When I became Executive Director, Hospice of the North Coast was caring for approximately 47 patients each day.

Like many independent nonprofit hospices, we faced significant financial pressures. Every decision felt urgent. Resources were limited, and it was difficult to think beyond the next budget cycle.

We knew we could not continue operating that way.



As we implemented the MVI Model and built what became known as the HNC Way, something remarkable happened. Clinical excellence and financial strength began to grow together. Within six months, the organization became profitable. Over the following years, our average daily census grew to more than 200 patients.

Operating margins approached 30 percent while we continued investing in our staff, our programs, our community, and our future. We built an investment portfolio that grew to between \$26 million and \$40 million—not as a measure of success, but as a measure of security.

Those resources represented something much bigger than a balance sheet. They represented stability.

They meant we could continue serving our community through changing reimbursement models, economic uncertainty, and increasing regulatory demands without compromising the quality of care our patients deserved.

Financial Health Protects Patient Care

Patients never ask to see a hospice's financial statements. But they experience the effects of financial stability every day. A financially healthy organization can hire and retain excellent clinicians.

It can invest in education, technology, quality improvement, and innovative programs. It can maintain staffing levels based on patient need instead of financial desperation. It can respond thoughtfully to change rather than reacting out of crisis.

The numbers themselves are not the mission. They simply make it possible to fulfill the mission well.

Integrity Is an Operational Strategy

The hospice industry has changed dramatically over the past decade. Competition has increased. Labor costs continue to rise. Regulatory oversight has become more intensive. The fraudulent practices of some organizations have damaged public trust and placed ethical hospices under increased scrutiny.

During these years, we made a conscious decision about the kind of organization we wanted to be.

We would never offer inducements for referrals. We would never admit patients who did not meet hospice eligibility. We would never bill for care that was not fully supported by

clinical documentation. There were times we chose not to pursue reimbursement opportunities because doing so did not align with our values or our interpretation of regulatory intent.

Those decisions were not always the easiest. But they were always the right ones. Integrity is not simply an ethical principle.

It is an operational strategy that protects the organization, strengthens community trust, and safeguards the patients we serve.

Why the MVI Model Endures

The MVI Model has never been just a productivity system. For Hospice of the North Coast, it became the framework that connected compassionate care with operational discipline.

- It gave leaders visibility into performance.
- It provided consistency for clinicians.
- It reduced unnecessary variation.
- It strengthened accountability.

Most importantly, it helped ensure that every patient received thoughtful, coordinated, patient-centered care regardless of who provided the visit.

Even as healthcare continues to evolve, those principles remain remarkably durable.

Because they are built around patients—not payment systems.

Looking Back

When I reflect on the past fourteen years, I do not measure success by census growth, operating margins, or investment balances alone.

- I think about the thousands of patients and families who trusted us during the most sacred moments of their lives.
- I think about the clinicians who embraced a higher standard and became stronger because they challenged themselves to grow.
- I think about an organization that chose discipline over shortcuts, accountability over complacency, and integrity over convenience.

Hospice of the North Coast found its way by aligning four essential commitments:

- Exceptional patient-centered care.
- Clinical accountability.
- Operational discipline.
- Responsible financial stewardship.

None of these can stand alone. Together, they created an organization that is stronger, more resilient, and better prepared to serve our community for generations to come.

If there is one lesson I hope other hospice leaders take from our journey, it is this:

Financial strength is never the destination.

It is the foundation that allows your mission to endure.

At the end of every strategic discussion, every budget meeting, every difficult personnel decision, and every operational improvement, I came back to the same question:

Will this help us care for patients and families better?

If the answer was yes, we moved forward.

That simple question became the compass that guided Hospice of the North Coast from uncertainty to stability—and ultimately to becoming one of the most respected nonprofit hospices in North County San Diego.

Because in hospice, every decision eventually reaches the bedside.

That is where leadership matters most.

- Sharon Lutz

Executive Director of Hospice of the North Coast



PERFECT PHONES ARE THE FRONT DOOR OF YOUR HOSPICE



We can't wait to show you how **PERFECT PHONES** from **MVI** can be used to **SOLVE** so many common Hospice frustrations and problems!



CLICK HERE



EMPOWERMENT HOUR

This webinar will be focused on the **Perfect Visit** in detail!

The PERFECT Visit™



WHERE TO START?... *the Perfect Visit!* After working with hundreds of hospices since the 1990's, we can say with certainty that implementing Perfect Visits with Perfect Documentation cures most Financial and Quality issues within an organization! In this Empowerment Hour, we will take a deep dive into the Perfect Visit structure with a focus on the "Why". This Empowerment Hour is the first in a series of 3. "Why" the Perfect Visit; Teaching the Visit according to **System7**; and Rolling Out the Perfect Visit in your Organization.



October 8th @1:01pm EST

Presenter:

Nancy Mueller

Model Magician

FREE for MVI Clients

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BenchPress



Gain Organizational Strength through Comparison with Reality and the Toughest Competitors in the Business! It is via the regular/frequent comparison with the External References that provides perhaps the most insight into an organization's actual performance.
"So what if you're hitting your own marks in a vacuum... ~ Jack Welsh

One of the questions we are asked from time to time here at the Bench Desk is: "What does the number of **Locations** in the **Benchmarking Application (BA)** reports represent?"

Executive Dashboard		Locations: 679 Count: 303		MVI Multi-View Incorporated BENCHMARKING	
Version: 24.0.1 Indicator					
Organizational Statistics					
Days in Accounts Receivable	Your Data	Median	MVI Model	Your Rank	
		44.5	45.0		
Net Org Operational Income \$ (Thousands)	Your Data	Median	MVI Model	Your Rank	
	\$	(260)			

Locations are self-reported by each participating Hospice program. The primary method used is to report the total:

- Separate CMS Certification Numbers (aka "CCN" ... what was formerly known as your "Provider Number")
- And/or Medicare-approved Multiple Locations (Branches) which are Benchmarked as one entity in their Upload.

For example, if Sunny Day Hospice has 3 Medicare-approved Multiple Locations whose information is included in their Benchmarking Upload, they'd enter Hospice Locations = 3 on the **[Setup Tab]** of their **Management Application (MA)**:

Management Application - Setup

The BOLD lines indicate available query fields when running the Benchmarking Application (BA).

Company Setup			
Company Information		Extracurricular Name	
Company	Sunny Day Hospice	Grants - Program	
Multi-View Client ID Number	8888	Kids Camp	
Hospice Locations	3	Pediatric	
Your State	FL	Thrift Store	
Service Area Population	125,000	Bake Sale	
Fiscal Year End	December	Bike-A-Thon	
Tax Status	Not for Profit	Butterfly Release	

Since Hospice programs change and grow over time, your number may not have been updated to reflect any changes. So, we encourage you to review the Hospice Locations number entered in your MA and update it As Soon As Practical. We know everyone will appreciate seeing the most current numbers!

Inspiration Page



BEING NICE IS PUNK ROCK

My teenage son and I have a weekly tradition of grabbing coffee together. During a recent trip, we pulled up to the drive-through window and were greeted by a barista with vibrant, bright green hair.

As a guy quickly closing in on 50 years old, it's wild to look back on now, but in the mid-1990s, I was a punk rock skater. That was another lifetime ago entirely. Just days earlier, I had unearthed an old photo of myself rocking a similar shade of green hair. Looking at my current state, decidedly "plain" self, I told my son I was going to show her the picture to see if I could get a laugh.

"Don't be weird, Dad," he muttered. I ignored him and pushed ahead anyway. I told her I really liked her hair and asked, "Can I show you a picture of what my hair looked like 30 years ago?"

"Yes, of course!" she said, leaning forward.

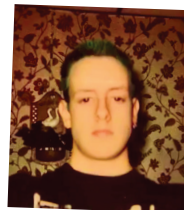
When I turned my phone around, her face completely transformed. The connection was instant. She laughed so hard and said "There is no way that's you!" We had a good laugh. She then went on to tell us that the vivid green hair was a gift to herself. She explained that she is currently living with stage 4 cancer that is in remission, and is managing it through a long-term maintenance plan. Her hair had only recently grown back, and she wanted to celebrate her survival by doing something wild and fun. It was cool to see someone so happy to be alive!

We spent the next few minutes sharing laughs and swapping stories, only cutting the conversation short when the next car pulled up behind us. I wished her the best and we drove away.

As we grow older, it is incredibly easy to let subconscious assumptions take over and judge a book by its cover. But that brief window reminded me of a simple truth: being kind, breaking down barriers, and connecting with people will always be the most punk rock way to live. Punk rock was always about going against society. And in our world where it's almost accepted that people can be so cruel to each other, I can think of nothing more punk rock than being nice.

I hope this helps!

~ Bernie



MVI Tough Training Schedule

The Proprietary Model Workshop

SCHEDULED BY INDIVIDUAL HOSPICES

The Proprietary Model Workshop is a 2-day transformational program where Andrew guides an individual Hospice or Healthcare system through the design of its proprietary Model. The Model is an approach to operating a Hospice as an integrated, coherent and coordinated "system of care" that creates a high-quality, predictable experience that is financially balanced. Andrew's role in this unique program is to keep a Hospice's team FOCUSED, clock management and to introduce insights gained from experience with hundreds of Hospices. Andrew will press to make sure the team walks out with the key Model parameters and Accountability established. This program is a cost-effective way to unify your team and establish long-term organizational structures that have helped Hospices set the benchmarks in quality as well as economic performance. NASBA approved: 16 CPE hours. [More Info>>](#)

NEW! Virtual Training Program OPTION for Individual Hospices!

Scheduled by Individual Hospices or Hospice Groups

Choose YOUR TOPICS! Upon request, Andrew will conduct Virtual trainings for individual or specific Hospice groups!

During these times, we must be flexible and provide OPTIONS to EMPOWER Hospice Leaders and Clinicians with Best Known Practices (Patterns)! We will cover ALL topics of interest by the Hospice or group with fluid and open exchange between your team and Andrew. [More Info>>](#)

Inpatient Units & The Model Training

TBA | Virtual

This program covers the 8 BIG MOVES an IPU needs to make to be financially successful and increase quality! In addition, 58 other Best Known Practices to-date will be shared regarding the management of Hospice IPUs so it can be financially viable. This insight is based on our work with 200+ IPUs that MVI has helped construct as well as hundreds of others. This program also has direct application to Continuous Care programs. If a Hospice has even an annual \$100,000 loss over a decade, this translates to a MILLION DOLLARS that COULD HAVE been used to compensate staff better or build much needed financial reserves! One of the large units Andrew managed had a 108% occupancy rate and double digit profits! Time to STOP the LOSSES! Bring a laptop with Microsoft Excel, the reports you currently use to manage your IPU, Medicare rates (GIP, Routine, CC), average hourly rate by discipline and cost information regarding your Hospice's current IPU operations. This is a 1 day program. [More Info>>](#)

Compensation & The Model

TBA | Virtual

Compensation is your LARGEST cost. Yet most organizations use traditional methods and get traditional results. Compensation is the most POWERFUL STRUCTURAL tool a Manager has to create a happy and productive work atmosphere with ultra-strong Accountability. This workshop is for the most forward-thinking Hospices. 100% of Hospices that operate in the 90th percentile have great compensation systems. Yes, 100%! A Hospice's most dramatic advances in quality and profits will come from movements of Talent and the compensation of that Talent. A great compensation system makes management VASTLY easier. Compensation systems also directly impact an organization's People Attraction and Retention system. Talent must be retained over the long-term as the turnover of Talent is the biggest destroyer of quality. A great compensation system is a key! Get rid of the "poverty mindset" regarding how you reward staff! Why not pay better than the hospital or other healthcare entities! Compensation is the fastest way out of financial troubles, as well as one of the most effective structural means to create a healthy Hospice culture. You will need a laptop with Microsoft Excel. Compensation was the beginning of MVI and where we started as a company. MVI only holds the Compensation & the Model Workshop annually. This is a 1 day program. [More Info>>](#)



Balancing Purpose and Profit...

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Multi-View Incorporated Systems

www.multiviewinc.com

MVI Tough Training Schedule

Designing an Extraordinary People Development System

TBA

This entire workshop will focus on creating a world-class training system for your organization where the paradigm of the Hospice changes to that of a "teaching organization": first and foremost. In this fascinating program, we will explore the teaching practices of master-class teachers in-depth and how these practices translate to a Hospice organization. How to Teach Visit Structures and Phone Interactions will receive extreme emphasis. The workshop is directed toward anyone that either instructs or coordinates training at a Hospice program. People Development IS the center of your Hospice universe as the mission is only accomplished through people.

[More Info>>](#)

The CEO Retreat

TBA

This is an Executive Retreat that helps CEOs become aware of what Outliers (the 90th percentile) are doing...because you have to see it in order to build it! This is a pragmatic program which would benefit any Executive Level person as most all Leaders come to a point where they realize the absolute need for STANDARDIZATION, SYSTEMS and STREAM-LINED PROCESSES...and that these are the solution to virtually all of an organization's frustrations. It is a humble and open program where, as a safe group, we speak candidly and delve into the biggest challenges we face as Hospice & Homecare CEOs. We will also cover 3 Key Strategic areas – 1) Operational, 2) Positioning and 3) Growth, which includes the 21 PROVEN Ways to grow a Hospice. This will help simplify work on all levels through Standardization and understanding of Process. Many of these insights were used when we helped the only Hospice ever to win the Malcom Baldrige Award in our area. [More Info >>](#)

The Extraordinary Clinical Leader

TBA

The Extraordinary Clinical Leader Program is a LIFE-CHANGING and rigorous 2-day program with laser-beam FOCUS on the Leadership and Management skillset needed to be a TRUE Professional Hospice Leader. There is nothing else like it. If a Clinical Leader masters this material, they can literally "Write their own ticket in Hospiceland" This program is designed to instill the mindset and advanced technical competencies into motivated individuals that want to be TOP Hospice Clinical Leaders. This program is a crash course about the BUSINESS of Hospice. [More Info>>](#)

The CFO Program

TBA

A TOP RUNG CFO is essential to the success of an organization as REALITY has to be quantified and effectively communicated. This program will teach the technical skills and mindset for dramatic IMPACT on operational RESULTS. The CFO Program has proven to be an EFFECTIVE advancement system for CFOs. The CFO is armed with some of the most persuasive information in the organization, the quantified facts of the business...data! The underlying reality is that the economic model MUST work. To be effective, the CFO must accurately quantify the current state of the organization, interpret the situation with predictive insight, formulate strategies, and influence others to execute positive action. The EVIDENCE of an effective CFO is in the numbers! An effective CFO can help a Hospice be radically successful. A poor CFO can help a Hospice out of business. Participants undergo a sequence of testing, training, and retesting until the subject matter is mastered. Participants will have 6 opportunities to score 100% in order to pass the 300 question exam which includes Hospice scenarios, best practices, and measurements. [More Info>>](#)



Balancing Purpose and Profit...

Multi-View Incorporated P.O. Box 2327 Hendersonville, NC 28793

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FLASHPAGE *Reference*

Here is a list of past Flashpages by topic over the past 2 years for reference, plus a few of particular significance. Normally, Flashpages cover material on a high level, so it is *highly* recommended that more comprehensive Best Known Practice information (manuals, PDFs, financial tools, templates, videos and audio messages) be obtained by accessing the MVI Website and/or by contacting the MVI offices for unlimited support. All calls are answered within 3 rings.

- [!\[\]\(bd416a8536ad6d035be85a90bc470d6b_img.jpg\) AUGUST 2026 – FINANCIAL MANAGEMENT – FINDING OUR WAY](#)
- [!\[\]\(3415704c65ffa3ec278c40a7001e091c_img.jpg\) JULY 2026 – ADMISSIONS REIMAGINING – 4 DAY WORK WEEK](#)
- [!\[\]\(1b58dd7ba1efe3f199fcfbf87ceba024_img.jpg\) MAY 2026 – ADMISSIONS REIMAGINING FROM THE PATIENT CHAIR – 4 DAY WORK WEEK](#)
- [!\[\]\(da074490d701c0aa3279593c63b6af2e_img.jpg\) APRIL 2026 – COMPENSATION & THE MODEL TOUGH TRAINING – “HOW DO YOU PROVE QUALITY”](#)
- [!\[\]\(7ccd6571dec78f4120236d219b90e138_img.jpg\) MARCH 2026 – QUALITY & LEADERSHIP – HOW DO YOU PROVE QUALITY](#)
- [!\[\]\(a796a51e9980ab91be011b61dc326a94_img.jpg\) JANUARY 2026 – THE HOSPICE AGGREGATE CAP – MVI CAP SERVICES](#)
- [!\[\]\(4267f1b7d33fa8e678b19b443ab1f836_img.jpg\) DECEMBER 2025 – HOSPICE SUCCESS STRATEGY – EMPOWERMENT HOUR: HOSPICE CAP](#)
- [!\[\]\(8f8e69c29464740500661b0fbc9f2bf1_img.jpg\) NOVEMBER 2025 – WE DON’T HAVE ENOUGH TIME – EMPOWERMENT HOUR: HOSPICE CAP](#)
- [!\[\]\(f291082643b012adb3e2e73dda99536d_img.jpg\) OCTOBER 2025 – DIRECTIONAL CORRECTNESS FOR THE ASPIRATIONAL HOSPICE, WITH JIM](#)
- [!\[\]\(61b66ae575194b2d95dfd84c106bf5ab_img.jpg\) SEPTEMBER 2025 – WHERE SHOULD CFOS SPEND THEIR TIME? – “LESS IS MORE”](#)
- [!\[\]\(d11ba2fc1ff455f83f6d292bb74b4e09_img.jpg\) AUGUST 2025 - PRODUCTS AS IRMS WEBINAR – EMR COMPARISON REPORT IS OUT!](#)
- [!\[\]\(db80c308b3a603ee628efda8f25fd491_img.jpg\) JULY 2025 – PERFECT MEETINGS EMPOWERMENT HOUR – EMR COMPARISON REPORT](#)
- [!\[\]\(c30ac7826d447148d7dfc66a005bc4ae_img.jpg\) JUNE 2025 – EMR COMPARISON REPORT – DEVELOP YOUR LEADERS](#)
- [!\[\]\(9e7f800eeba1bbbec75aec3a3b1a11b6_img.jpg\) MAY 2025 – HOW TO USE MVI PODCASTS TO HELP DEVELOP YOUR LEADERS & MANAGERS!](#)
- [!\[\]\(03bffd0d368a8429ca700362be7dc2fc_img.jpg\) APRIL 2025 – NEW EPIC MVI PODCASTS! – WHAT ARE THE PODCASTS ABOUT?](#)
- [!\[\]\(599ec6b8778c9719ad8d2c3409ce4da3_img.jpg\) MARCH 2025 – BLACK COVE/BIG HUNGRY FIRE – NBC NEWS W/ LESTER HOLT INTERVIEWS ANDREW](#)
- [!\[\]\(9bfc5a1d13e7c5660c97456bfd02da78_img.jpg\) FEBRUARY 2025 – BEST-KNOWN SUCCESS PATTERNS/PRACTICES – TONE FROM THE TOP JANUARY](#)
- [!\[\]\(8335d8d1da30d3271484007ca9787646_img.jpg\) 2025 – MVI COURSES ON STANDARDIZATION – TONE FROM THE TOP](#)
- [!\[\]\(a6bab11d461efdac417bdc1fe6d2aab3_img.jpg\) DECEMBER 2024 – MAKE 2025 EPIC – ADVANCED BUSINESS SEGMENTS](#)
- [!\[\]\(52d669fc7dfdb9b851b48c22cacf8967_img.jpg\) NOVEMBER 2024 – THE MVI “SIMPLE COMPENSATION PLAN” THAT WILL CHANGE YOUR HOSPICE](#)
- [!\[\]\(f35176f928df8d5608a777cd162f5860_img.jpg\) OCTOBER 2024 – HELENE – LESSONS & EXPERIENCES](#)
- [!\[\]\(e3c60dd8206467eade1cdec7c53e0509_img.jpg\) SEPTEMBER 2024 - QUALITY & GROWTH - WHAT'S IT ALL ABOUT](#)
- [!\[\]\(a47d6a8bf24eab19a696db4c450a4ce0_img.jpg\) AUGUST 2024 – WE DON’T HAVE ENOUGH TIME – GETTING SOME EDGE!](#)
- [!\[\]\(9cadadecbe290993001d702b4340447b_img.jpg\) JULY 2024 – CEO2CEO EMPOWERMENT HOUR – SHOW ME THE INCENTIVE – BENCHMARKING JUNE](#)
- [!\[\]\(8a7105940dd57477b91e7feb611d13ec_img.jpg\) 2024 – HOW TO BECOME A FIVE – STAR HOSPICE – WHEN DO THINGS HAPPEN](#)
- [!\[\]\(2b6b53f953d0a3cb285d805d578a4263_img.jpg\) MAY 2024 – INSIGHTS FOR GROWTH FROM MEGA HOSPICES – QUICK SUMMARY OF MEGA HOSPICE](#)
- [!\[\]\(ebe346264a690b74a4f0bee444dfb23d_img.jpg\) APRIL 2024 – CLINICAL LEADERS – 70%ERS! – KENT BROOKS MAGICLITE – LABOR BREAKOUTS](#)
- [!\[\]\(9ef3ccd32334312e4fe83d8fa859bbf3_img.jpg\) MARCH 2024 – OPERATIONALIZING YOUR MODEL – CEO AFTERPARTY 2024](#)
- [!\[\]\(e7fc7dc4b84c05f32e689d769838c99c_img.jpg\) FEBRUARY 2024 – CEO RETREAT 2024 – LEADERSHIP & THE CEO – THE VALUE OF BENCHMARKING](#)
- [!\[\]\(a1458a33807909b840a9abc318c47b03_img.jpg\) JANUARY 2024 – TROY GEHRKE CAP VIDEOS – EMR COMPARISON REPORT](#)
- [!\[\]\(ba461f3bfa21ed7f777ee6b3c9a1b395_img.jpg\) DECEMBER 2023 - SUCCESS STRATEGY – EMR COMPARISON REPORT](#)
- [!\[\]\(7be79dfe8e1351b41a0dc246300eed8b_img.jpg\) NOVEMBER 2023 – EMR COMPARISON REPORT-BENCHMARKING DRILL DOWN FEATURE - OCTOBER](#)
- [!\[\]\(b4f672f7b7babb37625b69711b082166_img.jpg\) 2023 – NEW MODEL NPR% – EMR REPORT IS BACK – THE TOTAL COST OF YOUR EMR AUGUST 2023 –](#)
- [!\[\]\(ae6c84ce41a2aaaa80fd38997d0cfdbe_img.jpg\) LEADERSHIP – PART 1 – RAISES & PROMOTIONS – MOST SOFTEST CONTEST](#)
- [!\[\]\(e9fa99e3ef725d0313ddc09e49331fcd_img.jpg\) JULY 2023 – EMPOWERMENT HOUR VIDEO – CHANTAL REED 1998-2023 – MOST NICEST CONTEST](#)
- [!\[\]\(24d1a4500a48b2cf68c16cb94b3691be_img.jpg\) JUNE 2023 – WHERE DO WE START – SELF LEARNING MODULES – 3 & 1/2 HABITS HIGHLY EFFECTIVE PEOPLE](#)
- [!\[\]\(1cf49ca9eead5b9ac47f9021cfd441de_img.jpg\) MAY 2023 - What Happened to Customer Service - Most Nicest Contest - EMR Benchmarking](#)
- [!\[\]\(6b60de8ab764982d7a9d0cb74e3c5f5b_img.jpg\) APRIL 2023 – COST REPORT WARS – REVOLUTIONARY BEREAVEMENT – VIRGIN MUSIC DEAL](#)



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- 📖 [FEBRUARY 2023 – TRUE SCIENCE – DOUBLE SHOT VIDEO LINKS – GROWTH](#)
- 📖 [January 2023 – Modern Scarelines – Tough Training Schedule 2023 – Your Compensation System](#)
- 📖 [December 2022 – YOUR NUMBERS ARE YOUR TRUTH – STARTING POINT OF SUCCESS – CLASSIC ALBUM COVERS – ADVENTURES IN SELF HELP – REALITY = NATURE](#)
- 📖 [November 2022 - Just Go Ahead & Stop Your Inpatient Unit Losses - You Should Care About What People Think](#)
- 📖 [October 2022 – Where Do We Start - Self Learning Modules - 3 and a Half Habits Highly Effective People](#)
- 📖 [September 2022 - Financial Models - What Is F9 - Remedy Out of Balance](#)
- 📖 [August 2022 - Percentages of NPR & Not Budgets - Baldest Man Contest - Map of Consciousness](#)
- 📖 [July 2022 - Action Accountant - Getting Clear About Financial Statements - Accounting Centerfold-How To Transform Yourself - Clients](#)
- 📖 [June 2022 - Modern Hellthcare - Value of Standardization Pt2 - New Benchmarking Decision Dashboard-CEO Attitude About Money - Best Mullet](#)
- 📖 [May 2022 - True Job - Value of Standardization - New Benchmarking Decision Dashboard - CHAP Operations Certification](#)
- 📖 [April 2022 - Real Work - Disappearing Nurses Webinar - What You Want From 70ers - Least Worst Healthcare - CHAP Operations Certification](#)
- 📖 [March 2022 - Resources For Key Frustrations - Most Exciting Time In Hospice - Cost Report Wars](#)
- 📖 [February 2022 – Clinical Manager's Toolbox – Kent Brooks Wins Hospice Award](#)
- 📖 [January 2022 - Hospices Grow Census w/Covid - Why Not Pay People Well?-CHAP Operations Certifications](#)
- 📖 [December 2021 - Make 2022 the Best Operational Year Ever - We Don't Have Enough Time - What Practices Andrew](#)
- 📖 [November 2021 - Managing on a Month to Month Basis - The Magic Formula is the FOCUS of these 2 areas - Where are a Homecare and Hospice Biggest Economic Opportunities - Universal Music Release - Tough Training Schedule 2022](#)
- 📖 [October 2021 - New Benchmarking Version21 - Why Benchmark](#)
- 📖 [September 2021 Pre-save-Twisted-World-Universal-Music-Selling-Your-Culture-How-to-be-successful-in-this-world](#)
- 📖 [August 2021 – CEO2CEO – Retention of clinicians issues – Virtual Extraordinary Clinical Leader Program](#)
- 📖 [July 2021 - Part 2 Turnover - Why do people come to work at a hospice - how do we take care of people - How do we take care of our people](#)
- 📖 [June 2021 - Creating the Inspiring-Electric- Life-Changing” Work Atmosphere- Culture with Meaning & Purpose - Turnover Nursing Shortage - tough trainings at MVI conference center!](#)



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