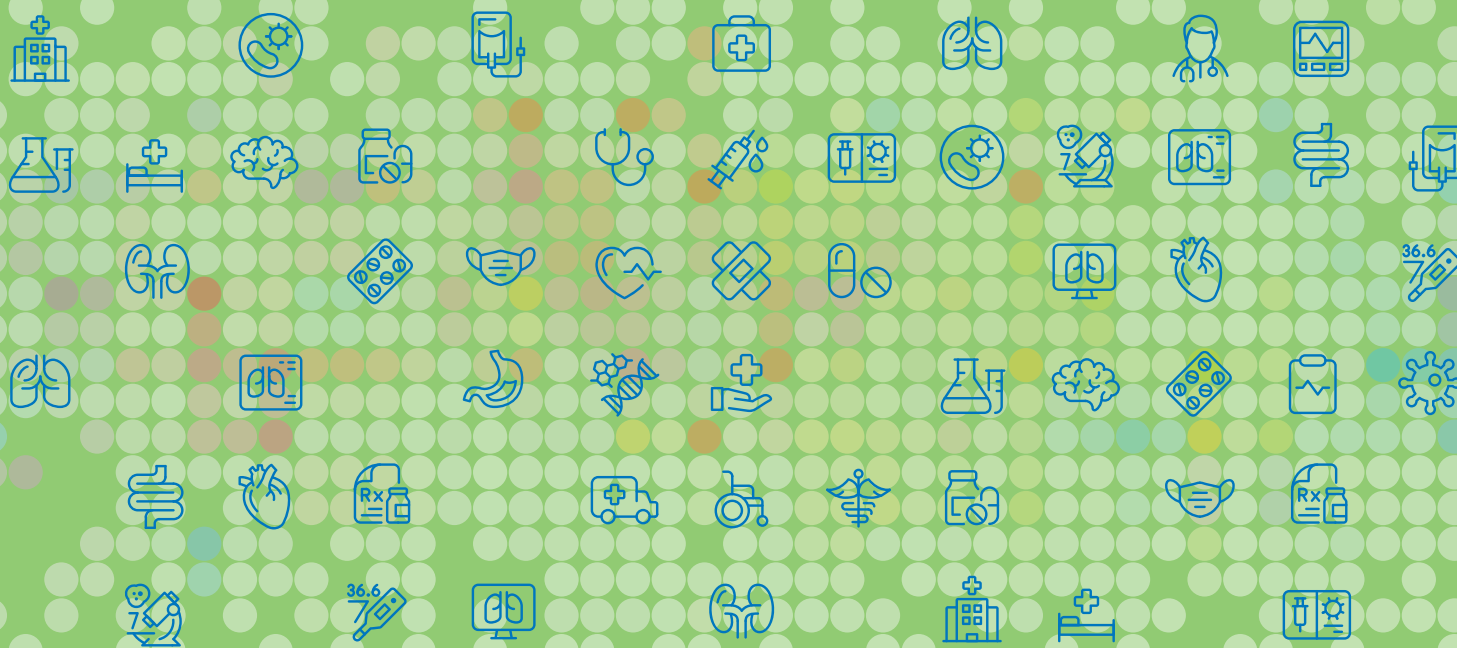


# 2022 | Annual Report



**CHPSO**

*Eliminating preventable harm  
and improving the quality of  
health care delivery*

**Collaborative Healthcare Patient Safety Organization**

A DIVISION OF THE HOSPITAL QUALITY INSTITUTE

# About Us

## CHPSO MISSION

**Eliminating preventable harm and improving the quality of health care delivery**

## CHPSO VISION

**CHPSO's members will lead the nation in providing the safest and highest quality health care**

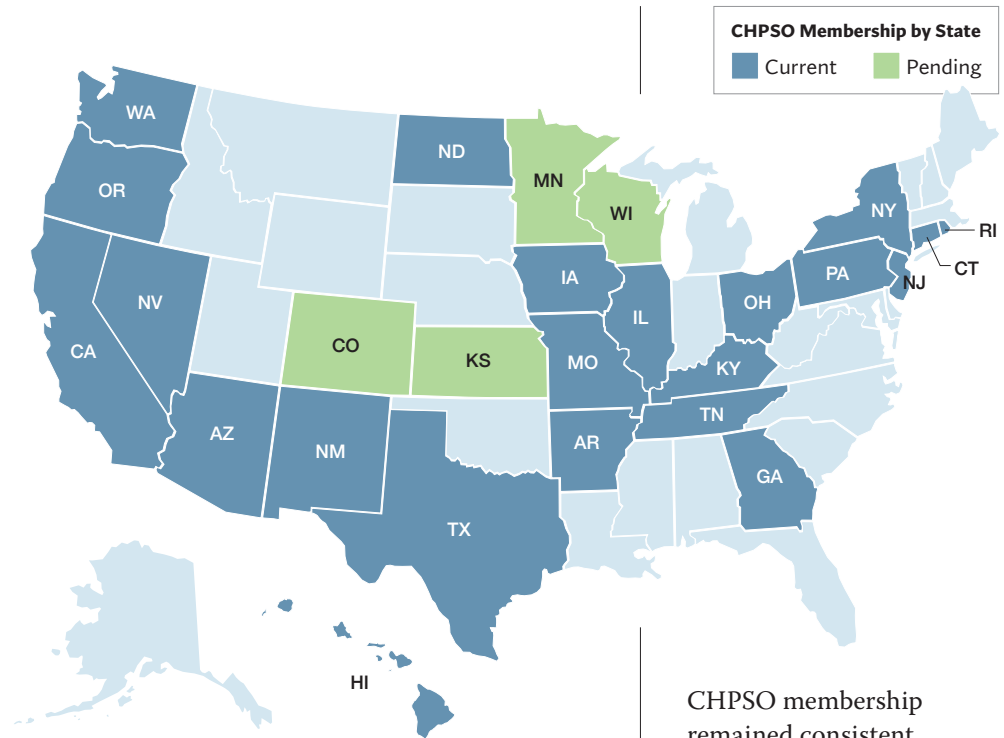
## PARTICIPATE

CHPSO collaborates with its members to enhance and simplify the data submission process. The process begins with members creating a spreadsheet based on their local data sources. Subsequently, members can upload their spreadsheets onto our newly developed platform, CHPSOData. This platform is the result of our partnership with SpeedTrack and NewVolt and offers dynamic mapping capabilities and incorporates several advanced security features, aimed at improving data organization and enhancing data security measures.

For more information, contact CHPSO at [info@chpso.org](mailto:info@chpso.org) or visit our website, [www.chpso.org](http://www.chpso.org).

## BENEFITS

- Patient Safety Work Product privilege
- Collaborate and problem solve with other providers
- Periodic safety event evaluations
- Custom research requests
- Event feedback and consultation
- Educational webinars and safe table forums
- Alerts and quarterly newsletters
- Continuing Education credits
- Legal counsel discussion group
- Job board



CHPSO membership remained consistent in 2022 with over 490 members across 21 states: Arizona, Arkansas, California, Connecticut, Georgia, Hawaii, Illinois, Iowa, Kentucky, Missouri, Nevada, New Jersey, New Mexico, New York, Ohio, Oregon, Pennsylvania, Rhode Island, Tennessee, Texas, and Washington. Additionally, there are currently 62 new facilities/organizations from various states in the process of joining. Together, these members have contributed to a continually expanding database of over 3.9 million safety events.

# President's Message



A handwritten signature in black ink that reads "Robert Imhoff".

**Robert Imhoff**, President  
HOSPITAL QUALITY INSTITUTE

**Patient safety and awareness are at the heart of what CHPSO does.**

**We are dedicated to advancing discussions about these important topics as we continue the movement to improve the safety of the health care system — not just for patients but for the health care workforce. We strive to offer programs and resources that benefit hospitals and add value to their members to bolster patient safety and quality improvement.**

This **2022 CHPSO Annual Report** details our activities from Jan. 1 to Dec. 31, 2022, and offers a look at the work we have done.

Report highlights include:

- Details on a CHPSO study that looks at patient falls, health disparities, and inequities. The findings emphasize the need for health care organizations to address the disparities that exist between limited English proficient and English proficient patients to effectively reduce fall events.
- A recap of Safe Tables and webinars from the past year. Safe Tables are opportunities for members to discuss cases on pre-selected topics in a confidential and privileged setting while webinars provide an opportunity to engage in a collaborative learning environment that is inclusive for non-members.
- A look at hospital workplace violence, which remains widespread yet underreported. Addressing underreporting will be a key part of HQI's program strategy on workplace violence going forward. HQI will investigate opportunities to assist hospitals with monitoring, surveillance, and actionable reporting of workplace violence incidents.
- A review of CHPSOData's current capabilities as well as newly introduced and upcoming features. We are hopeful this will encourage you to fully engage with the platform and maximize its value for all users.

There's much more to explore in the report, and I encourage you to not only read it in its entirety but also to share it with your co-workers.

We look forward to continued collaboration with members this year and for many years to come. If you have questions about the data or information included in the report or would like to learn more about CHPSO or any of our programs, email [info@chpso.org](mailto:info@chpso.org).

**Patient safety and awareness are at the heart of what CHPSO does.**

# Don't Forget to Take Advantage of All That CHPSOData Has to Offer

In the fall of 2022, we launched our new data platform, CHPSOData, with the aim of enhancing security and analytics reporting. CHPSOData has already proven its effectiveness, with over 250,000 adverse events submitted using the platform. However, around half of our members have not yet uploaded and mapped data in CHPSOData. To help members understand the full potential of the platform and the benefits it can provide, let's review its current capabilities, as well as newly introduced and upcoming features. Hopefully, this will encourage you to fully engage with your new CHPSOData platform and maximize its value.

One of the primary goals we set out to achieve with CHPSOData was to improve platform security, and we've made significant strides in this area. One of the foundational improvements was the introduction of dual-factor authentication (2FA) to enhance log-in security. With CHPSOData's 2FA, you now experience improved authentication via a confirmation email, or you can alternately use Google authenticator. We've also added encryption capabilities for file uploads and downloads. You can leverage Excel's built-in ability to encrypt your spreadsheets before you upload them. Upon upload, CHPSOData will prompt you to provide your password so your spreadsheet can be decrypted and read during the data mapping phase. On the file download side, you can request that CHPSOData encrypt your file exports and a one-time-use decryption password will be sent to your CHPSOData-registered email ID. Both the upload and download encryption features supplement the in-transit encryption already used by the CHPSOData website, providing additional layers of security to safeguard your data. With these enhanced capabilities, we are confident that CHPSOData offers state-of-the-art security to all our users.

Improving our analytics capability was also a top priority, and we hope the initial reporting provided by CHPSOData has offered a good start. It begins with a dynamic mapping approach that helps you keep CHPSO more up to date with changes to your spreadsheet structure and data input, ensuring that the output generated is as accurate as possible. We've also added new reports that enable you to compare your facility or system on key measures against anonymized organizational groupings, giving you valuable insights into how you stack up against your peers. The recent addition of SpeedTrack — an enhanced, real-time presentation

**By working together, we can continue to refine and optimize the CHPSOData platform to better meet your needs.**

tool — will help you gain a deeper understanding of your data and its underlying relationships. Perhaps the best news is that we have opportunities to quickly enhance and expand these tools moving forward. However, we need your help to ensure that these improvements benefit you. By working together, we can continue to refine and optimize the CHPSOData platform to better meet your needs.

In [last year's CHPSO Annual Report](#), the article titled "The Persistent Problem of 'Other' CHPSO Safety Events" described a new methodology that CHPSO has for classifying adverse events. As last year's article indicated, the new methodology leverages artificial intelligence/natural language processing (AI/NLP) algorithms to apply trained knowledge to your event description narratives. The resulting output is a classification of those events into one or more of over 40 meaningful quality and safety of care topical categories. This methodology is now providing data that are enabling new reports in both CHPSOData and the SpeedTrack option. As with most inferential methods, the results may not always be accurate at the level of individual records or small datasets. However, given the confirmed confidence levels, we believe that it's more than reasonable to use this new option to analyze event data at a higher, aggregate level.

As we look back on our journey so far, we are grateful for your support and partnership. However, the journey is far from over, and we are excited to continue growing and evolving CHPSOData with you. We are closely aligned with the CHPSOData development team, which means we can improve and expand the platform more quickly than would be possible with a legacy enterprise vendor. Your input as CHPSO members is critical to guiding us in a direction that best meets your needs. We welcome all members who haven't yet joined us on the CHPSOData journey and look forward to working with you to help you get the most out of the platform. Whether you are a six-month veteran or a new user, we are here to help you every step of the way. Together, we can continue to build on the positive momentum we've generated so far.

# Event Categories

## CHPSODATA REPORTING

Figure 1 shows the percentage of patient safety events reported in 2022 as classified by CHPSO members, according to AHRQ Event Category (DE21). Once again, the most frequent Event Type category reported in 2022 was the infamous “Other” category at 51%. Given that this broad category is of limited use for identifying emerging trends in patient safety events, CHPSO came up with a solution to the problem last year. This solution — an Enhanced Event Type Classification Taxonomy and artificial intelligence algorithm using natural language processing — re-categorizes patient safety events with more granularity than do the basic AHRQ Event Categories. Reports based on this capability were provided in last year’s CHPSO annual report, and an evolving set of similar reports are now available in CHPSO’s new data platform – CHPSOData.

**Figure 1. Percentage of Patient Safety Events in 2021 Classified by AHRQ Event Category (DE21)**

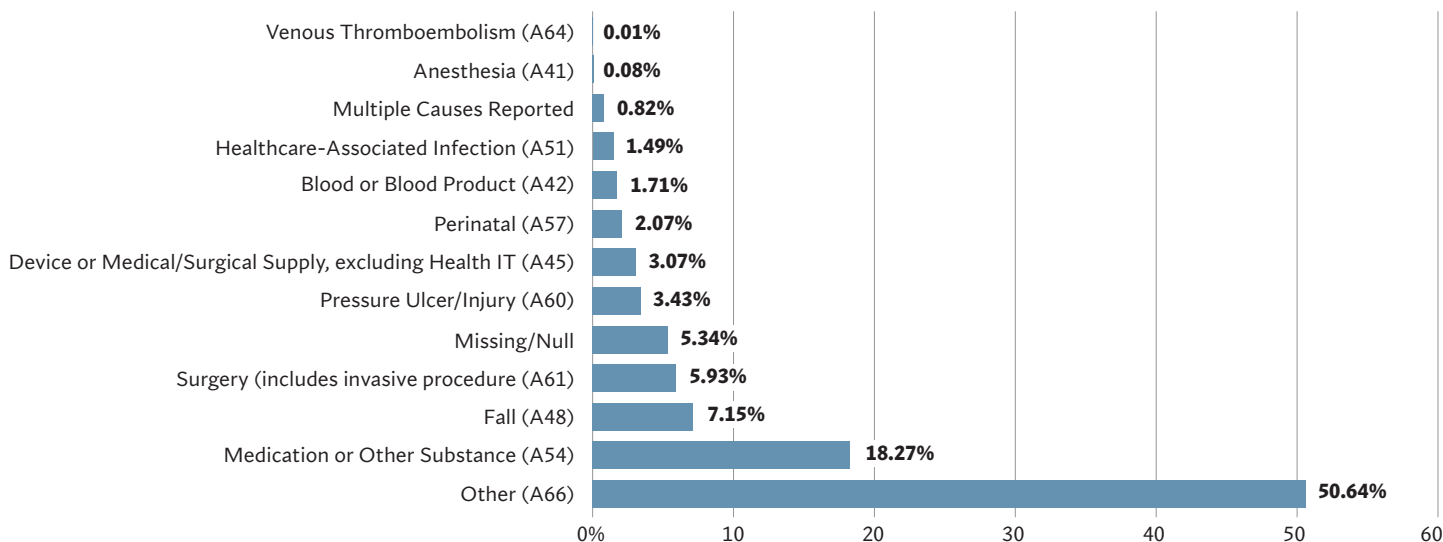


Figure 2 shows the progress you have made in migrating to CHPSOData. Given that submissions for systems are usually handled by only a few people (or one brave one!), the count tallies discrete systems and standalone facilities into a single total. This means that a system with 20 facilities would be counted as one. We appreciate your efforts to date and are here to help you make further progress. The CHPSOData platform is discussed in detail on page 4 of this report.

**Figure 2. Status of Member Submissions to CHPSOData**

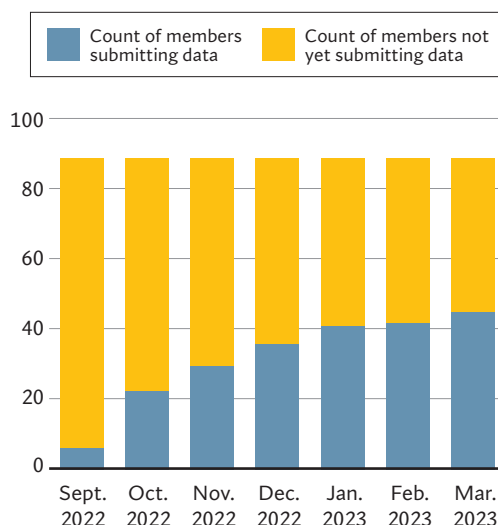
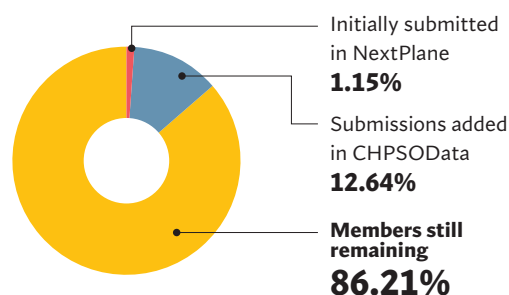


Figure 3 shows the progress you have made in adding race and ethnicity data into your CHPSO platform submissions. We appreciate the progress to date, but we do have more work ahead of us to meet looming regulatory requirements for submitting race and ethnicity data to CHPSOData.

**Figure 3. Submission of Race and Ethnicity Data**



# CHPSO Study Looks at Patient Falls, Health Disparities, and Inequities

Health disparities between limited English proficient (LEP) patients and English proficient (EP) patients are a significant concern in the health care system. Language barriers can impede effective communication, leading to reduced access to care, lower quality of care, and increased risks such as patient falls. LEP patients face unique challenges in comprehending important safety information. Many patients struggle with understanding medical instructions and expressing their symptoms accurately. These disparities highlight the need for targeted interventions, such as cultural competence, and language access services to ensure equitable health care outcomes and enhance patient safety. By recognizing and addressing the specific needs of LEP patients, health care providers can mitigate the risks of patient falls and promote a safer health care environment for all individuals, regardless of their language proficiency.

A CHPSO study looking at patient falls, health disparities, and inequities had three goals:

- (a) To examine significant risk factors for fall events within two sample groups
- (b) To determine if there are meaningful contrasts in the incidence of falls between the two groups (LEP patients and EP patients)
- (c) To use “language” as a proxy to investigate if race/ethnicity and other relevant equity factors contribute to patient falls across the care continuum. Because structured language data are not tracked in the CHPSO Database and only 0.8% of the events included race/ethnicity data in 2021, proxies for these variables were created based on text within event reports for analysis purposes, as described in the [methodological supplement](#).

**By recognizing and addressing the specific needs of LEP patients, health care providers can mitigate the risks of patient falls and promote a safer health care environment for all individuals, regardless of their language proficiency.**

## DEMOGRAPHIC/HARM FINDINGS

- More males than females (50% vs. 41%) were represented in the fall events, particularly among the EP group (53% vs. 48% for LEP; Table 1).

**Table 1. Sex Distribution of Fall Events by Patient English Proficiency**

Cohort	Female	Male	Unknown	Total
English Proficient	124 (38%)	174 (53%)	31 (9%)	329
Limited English Proficient	146 (44%)	158 (48%)	25 (8%)	329
<b>Total</b>	<b>270 (41%)</b>	<b>332 (50%)</b>	<b>56 (9%)</b>	<b>658</b>



- Mature adults aged 65 or older (41%, n = 268) were the most prevalent among fall events and the average patient age among fall events for the EP group was somewhat younger at 60 years old vs. 68 years old for the LEP group (Table 2).

**Table 2. Age Distribution of Fall Events by Patient English Proficiency**

Age Group	English Proficient	Limited English Proficient	Total
Neonate or Infant (< 1 year)	0 (<1%)	3 (1%)	3 (<1%)
Early Childhood (1 to 5 years)	5 (2%)	3 (1%)	8 (1%)
Late Childhood (6 to 11 years)	1 (<1%)	2 (1%)	3 (<1%)
Adolescent (12 to 18 years)	4 (1%)	1 (<1%)	5 (1%)
Adult (19 to 24)	8 (2%)	2 (1%)	10 (2%)
Adult (25 to 34)	14 (4%)	4 (1%)	18 (3%)
Adult (35 to 44)	18 (5%)	12 (4%)	30 (5%)
Adult (45 to 54)	28 (9%)	21 (6%)	49 (7%)
Adult (55 to 64)	51 (16%)	32 (10%)	83 (13%)
Mature Adult (65 to 74)	41 (12%)	63 (19%)	104 (16%)
Older Adult (75 to 84)	35 (11%)	54 (16%)	89(14%)
Aged Adult (85+)	26 (8%)	49 (15%)	75 (11%)
Null	98 (30%)	83 (25%)	181 (28%)
<b>Total</b>	<b>329</b>	<b>329</b>	<b>658</b>

- Nearly 70% of the overall patients were not harmed during the fall events and the distributions of harms for LEP and EP fall patients were similar (Table 3).

**Table 3. Harm Distribution of Fall Events by Patient English Proficiency**

Harm/Language	English Proficient	Limited English Proficient	Total
No Harm	224 (49%)	235 (51%)	459 (70%)
Mild Harm	66 (52%)	61 (48%)	127 (19%)
Moderate Harm	4 (33%)	8 (67%)	12 (2%)
Severe Harm	1 (50%)	1 (50%)	2 (<1%)
Unknown	1 (100%)	0 (0%)	1 (<1%)
Null	33 (58%)	24 (42%)	57 (9%)
<b>Total</b>	<b>329</b>	<b>329</b>	<b>658</b>

### DIFFERENCES IN FACTORS CONTRIBUTING TO PATIENT FALL EVENTS BY ENGLISH PROFICIENCY

- The LEP falls group had nearly double the rate of falls contributing factors of the EP group (36.8% LEP vs. 18.5% EP). Cognitive impairment was the contributing factor associated with the largest difference (16.4% LEP vs. 6.7% EP), followed by chronic health conditions (10.3% LEP vs. 9.1% EP), room type or setting (6.4% LEP vs. 2.1% EP), and lastly vision, hearing and other physical deficit (3.6% LEP vs. 0.6% EP).
- In the LEP falls group, “cognitive impairment” was the highest contributing factor. Of these, 75% involved confusion or disorientation, and 13% involved multiple situations where alarms were either not heard, not turned on, or inappropriately configured.

- In the EP falls group, “chronic conditions” was the highest contributing factor. Seizure (37%) was the most prevalent co-occurring diagnosis followed by diabetes (33%) and substance use disorders (27%).

## CONCLUSIONS AND RECOMMENDATIONS

- This study shows the intricate connection among patient falls, health disparities, and inequities. The findings emphasize the pressing need for health care organizations to address the disparities that exist between LEP and EP individuals to effectively reduce fall events. To mitigate these disparities, health care organizations should adopt comprehensive strategies that [prioritize language access services](#). This can be achieved by always ensuring the availability of interpreters, providing cultural competence training, and customizing care plans and fall assessments for LEP patients, particularly those with cognitive deficits. Providing clear communication, language assistance, and culturally sensitive care can enhance patient safety, improve understanding of fall prevention measures, and ultimately reduce fall rates among LEP populations. By taking proactive steps to bridge the gap between LEP and EP patients, health care organizations can make significant strides in reducing fall events and promoting health equity for all.

**Providing clear communication, language assistance, and culturally sensitive care can enhance patient safety, improve understanding of fall prevention measures, and ultimately reduce fall rates among LEP populations.**



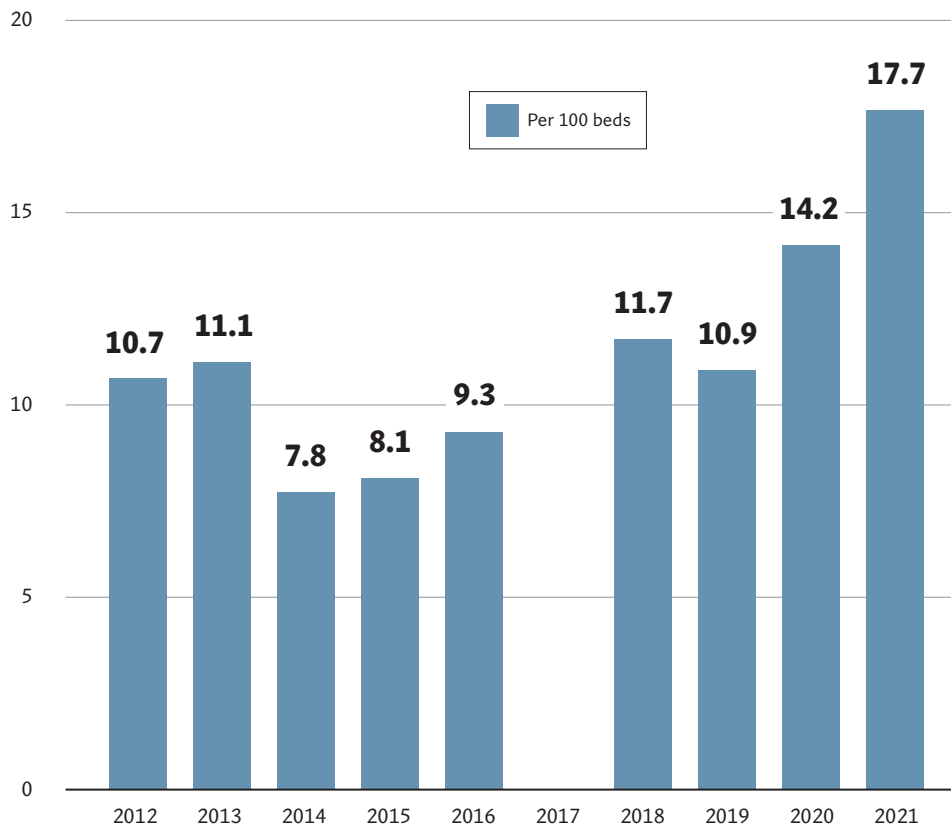
# Hospital Workplace Violence: Widespread Yet Underreported

In recent years, and especially coinciding with the COVID-19 pandemic, hospitals have experienced unprecedented surges in workplace violence, which is defined by [OSHA](#) as acts or threats of physical violence, harassment, intimidation, or other threatening disruptive behavior that occurs at work.

Evidence of this increase is plentiful. A [2021 study](#) of nurses found that 44% reported being subject to physical violence, while 68% reported verbal abuse (Byon HD, 2021). An annual survey of security personnel in U.S. hospitals, conducted by the International Association for Healthcare Security and Safety, revealed a sharp increase in assaults since the onset of the COVID-19 pandemic (Figure 1).

**Figure 1. Simple Assault per 100 Hospital Beds Nationally: 2012-2021**

(International Association for Healthcare Security and Safety, [2022 Healthcare Crime Survey](#))



Note: Crime survey was not conducted in 2017

**Workplace safety is inextricably linked to patient safety. Unless caregivers are given the protection, respect, and support they need, they are more likely to make errors, fail to follow safe practices, and not work well in teams.**

[Lucian Leape Institute, 2013](#)

California hospitals have not been immune to this national trend. As one article noted, "Getting spit on by a patient is so common that it's hardly worth mentioning. It's the bites, punches, firearms and airborne objects that you really need to watch out for" ([San Diego Union-Tribune, 2018](#)).

The impact of workplace violence cannot be overstated. The well-being of the health care workforce is a basic precondition for delivering safe and effective patient care. Yet, due in part to the trauma brought on by violence and harassment, health care professionals have been leaving the field in growing numbers.

In an effort to help hospitals manage this challenging issue, HQI has developed a new white paper: [Workplace Violence in Hospitals: Issues, Trends, Prevention, and Response](#). The paper reviews the challenges faced by hospitals regarding workforce violence and outlines strategies HQI, CHA, and our Regional Associations are undertaking to support members.

**Underreporting of incidents, however, seriously undermines the effectiveness of any effort to deal with workplace violence.**

One key obstacle to successfully preventing and managing workplace violence in hospitals is that **these incidents tend to be significantly underreported**. A [2015 study](#) found that the majority of health care workers who experienced a violent event did not report it via their hospitals' formal electronic incident reporting systems (Arnetz, 2015). The reasons for

this are numerous and include complex and sometimes confusing incident reporting systems, as well as the culturally conditioned beliefs that violence is simply "a part of the job," which can make hospital staff reluctant to hold patients accountable for violent behavior. Underreporting of incidents, however, seriously undermines the effectiveness of any effort to deal with workplace violence.

Addressing underreporting will be a key part of HQI's program strategy on workplace violence going forward. HQI will investigate opportunities to assist hospitals with monitoring, surveillance, and actionable reporting of workplace violence incidents.

HQI will also continue to provide education and training on various salient topics related to workplace violence. Finally, HQI is in the process of developing a Community of Practice for individuals leading workplace violence programs in our member hospitals. This facilitated, collaborative professional network will offer regular opportunities for peer-to-peer exchange, learning, and problem-solving around the shared issue.

■ Contact [Boris Kalanj](#), HQI's director of programs, with questions or for more information.

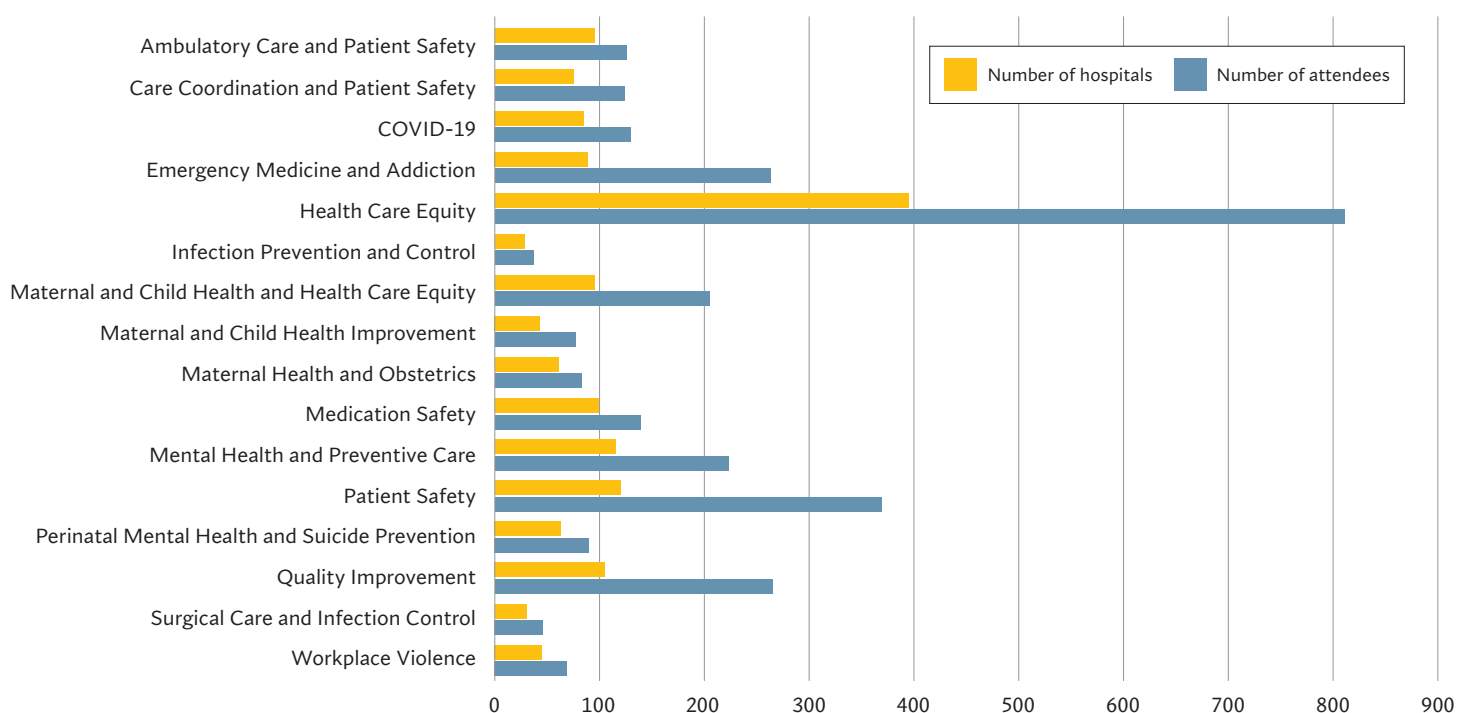
Sources: (OSHA, 2016), (Byon HD, 2021), (McGuire, 2022), (WHO, 2022), (Byon HD, 2021), (Arnetz, 2015), (NACNEP, 2007), (Rankins, 1999)

# CHPSO Safe Tables and Webinars

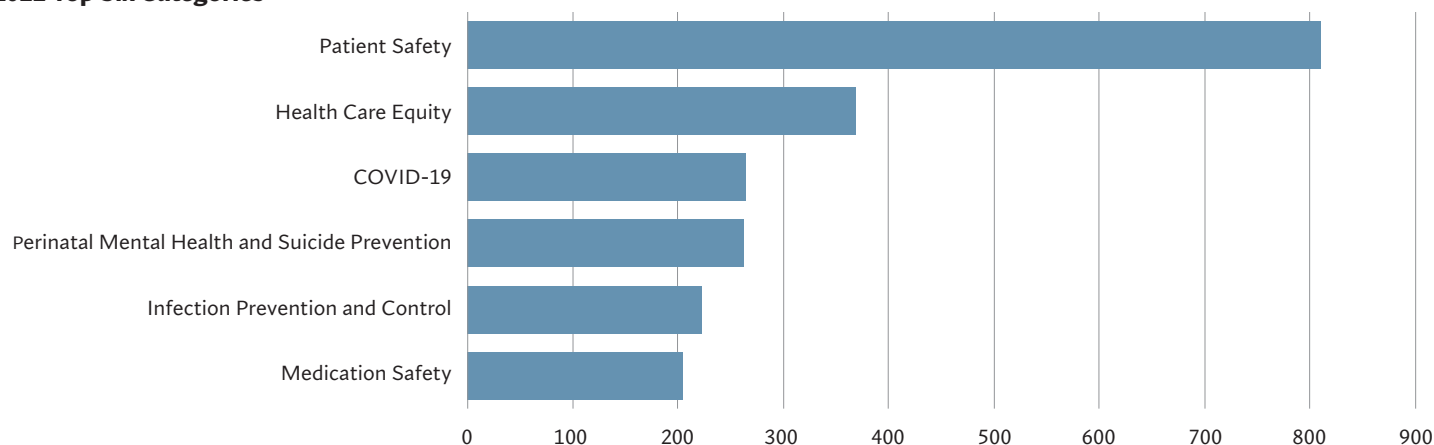
**Safe Tables provide a confidential and privileged setting for members to discuss cases on pre-selected topics.**

**Additionally, our webinars offer a collaborative learning environment that is inclusive to non-members.** These forums are designed to empower attendees to bring back valuable lessons learned and resources to their healthcare organizations. In 2022, patient safety emerged as the leading category of discussion, closely followed by health care equity. Please note that the attendance figures noted below exclude participation in other CHPSO educational events, such as the Root Cause Analysis Innovation Virtual Summit and the HQI Annual Conference.

## CHPSO Events 2022



## 2022 Top Six Categories



# In Their Own Words

**“Learning from peers through Safe Tables is an invaluable experience as it provides the opportunity to benefit from tested and proven solutions to various issues. One example of such efficacy is the utilization of two registered nurses for patient assessment upon admission, particularly in the context of wound evaluation. This approach not only enhances the assessment process but also reinforces its reliability and effectiveness.”**

**“I enjoy the real world examples and action items that the organization implemented to make change.”**

**“The Safe Tables and webinars offered by CHPSO are vital to staying on top of the latest patient safety issues healthcare organizations are facing today. CHPSO’s ability to engage health care leaders and member organizations creates a safe and protected environment where conversations on sensitive topics foster proactive learning. Member organizations benefit by learning from peers on how they leveraged innovative approaches to situations that support the delivery of safe patient care.”**

**Dawn M. Evans, DNP, MSN, MBA, RN, PHN, CPPS, CPHQ**

Director of Patient Safety | Barton Health

**“The Safe Table forums encompass regulatory requirements, community practices, and national standards. These forums provide valuable input for our Root Cause Analysis and policy development processes.”**

**“Gaining insights into the obstacles that impede safe patient care can be valuable by listening to other organizations and understanding the initiatives they have undertaken.”**

**“All instances of patient safety issues, along with their corresponding examples, serve as valuable teaching tools. Whether they occur in hospitals or clinics, we are committed to learning and growing from these experiences.”**

**“I really enjoy learning from acquiring knowledge through the experiences of other organizations, be it in the context of patient harm events or quality improvement projects. The shared knowledge is incredibly valuable to me.”**

**“As the health care risk management representative for my organization, it has helped me pose more effective investigatory questions concerning patient safety event reports. For instance, based on insights gained from the Safe Table discussion on falls, I have developed improved inquiries to investigate factors that may have contributed to a fall.”**

**“I appreciate the question-and-answer segment of the Safe Table, as it enables me to compare the approaches taken by other organizations in managing various situations. This provides valuable insights and allows for the exchange of best practices.”**

**“This webinar truly sparked deep contemplation. In the health care field, instances of mistreatment are unfortunately all too common, often leaving individuals feeling helpless due to the underlying conditions most patients face.”**

**The presenter demonstrated exceptional knowledge and effectively delivered the information in a practical and understandable manner, enabling me to implement it within my organization.**

**The presentation was excellent, showcasing the collaboration between various organizations for the betterment of the community. It was inspiring to witness their collective efforts.**

# CHPSO

## Member Listing

Member	City	State
Adventist Health	Roseville	CA
Adventist Health and Rideout	Marysville	CA
Adventist Health Bakersfield	Bakersfield	CA
Adventist Health Castle	Kailua	HI
Adventist Health Clear Lake	Clearlake	CA
Adventist Health Delano	Delano	CA
Adventist Health Feather River	Paradise	CA
Adventist Health Glendale	Glendale	CA
Adventist Health Hanford	Hanford	CA
Adventist Health Howard Memorial	Willits	CA
Adventist Health Lodi Memorial	Lodi	CA
Adventist Health Mendocino Coast	Fort Bragg	CA
Adventist Health Portland	Portland	OR
Adventist Health Reedley	Reedley	CA
Adventist Health Selma	Selma	CA
Adventist Health Simi Valley	Simi Valley	CA
Adventist Health Sonora	Sonora	CA
Adventist Health St. Helena	Saint Helena	CA
Adventist Health Tehachapi Valley	Tehachapi	CA
Adventist Health Tillamook	Tillamook	WA
Adventist Health Tulare	Tulare	CA
Adventist Health Ukiah Valley	Ukiah	CA
Adventist Health White Memorial	Los Angeles	CA
AHMC Anaheim Regional Medical Center	Anaheim	CA
AHMC Healthcare, Inc.	Alhambra	CA
Alameda Health System	Oakland	CA
Alameda Hospital	Alameda	CA
Alhambra Hospital Medical Center	Alhambra	CA
Alta Bates Summit Medical Center – Alta Bates Campus	Berkeley	CA
Alta Bates Summit Medical Center – Herrick Campus	Berkeley	CA
Alta Bates Summit Medical Center – Summit Campus	Oakland	CA
Alta Bates Summit Medical Center – Summit Campus, Summit	Oakland	CA
Alta Hospital System, LLC	Culver City	CA
Alvarado Hospital Medical Center	San Diego	CA
Anaheim Global Medical Center	Anaheim	CA
Antelope Valley Health Center	Lancaster	CA
Antelope Valley Hospital	Lancaster	CA
Arrowhead Regional Medical Center	Colton	CA
Arroyo Grande Community Hospital	Arroyo Grande	CA
Athletic Rehabilitation Center – Chino	Chino	CA
Athletic Rehabilitation Center – Glendora	Glendora	CA
Athletic Rehabilitation Center – West Covina	West Covina	CA
Bailey-Boushay House & Clinics	Seattle	WA
Bakersfield Behavioral Healthcare Hospital	Bakersfield	CA
Bakersfield Heart Hospital	Bakersfield	CA
Bakersfield Memorial Hospital	Bakersfield	CA
Ballard Rehabilitation Hospital	San Bernardino	CA
Banner Lassen Medical Center	Susanville	CA
Barlow Respiratory Hospital	Los Angeles	CA
Barton Memorial Hospital	South Lake Tahoe	CA
Bear Valley Community Hospital	Big Bear Lake	CA
Bellflower Health Center	Bellflower	CA
Brazosport Regional Health System (St. Luke's)	Lake Jackson	TX
Burleson St. Joseph Health Center	Caldwell	TX
Burleson St. Joseph Manor – Caldwell	Caldwell	TX
California Cancer Center	Fresno	CA
California Diagnostic Imaging Center	Glendora	CA
California Hospital Medical Center	Los Angeles	CA
California Pacific Medical Center	San Francisco	CA
California Pacific Medical Center – California Campus	San Francisco	CA
California Pacific Medical Center – Davies Campus	San Francisco	CA
California Pacific Medical Center – Mission Bernal Campus	San Francisco	CA

Member	City	State
California Pacific Medical Center – Pacific Campus	San Francisco	CA
Catalina Island Medical Center	Avalon	CA
Cedars-Sinai Health System	Los Angeles	CA
Cedars-Sinai Marina Del Rey Hospital	Marina Del Rey	CA
Cedars-Sinai Medical Center	Los Angeles	CA
Centinela Hospital Medical Center	Inglewood	CA
Oracle	Kansas City	MO
Chandler Regional Medical Center	Chandler	AZ
Chapman Global Medical Center	Orange	CA
CHI Memorial Hospital – Chattanooga	Chattanooga	TN
CHI Memorial Hospital – Fort Oglethorpe	Fort Oglethorpe	GA
CHI St. Alexius Health – Bismarck	Bismarck	TX
CHI St. Alexius Health – Garrison	Garrison	TX
CHI St. Alexius Health – Turtle Lake	Turtle Lake	TX
CHI St. Luke's Health Baylor Med Ctr	Houston	TX
CHI St. Vincent – Morrilton	Morrilton	AK
CHI St. Vincent Health Services – Little Rock	Little Rock	AK
CHI St. Vincent Medical Center North	Sherwood	AK
Children's Hospital Los Angeles	Los Angeles	CA
Children's Hospital of Orange County	Orange	CA
Chinese Hospital	San Francisco	CA
Chino Valley Medical Center	Chino	CA
CHOC Children's	Orange	CA
CHOC Children's at Mission Hospital	Orange	CA
City Hospital at White Rock	Dallas	TX
City of Hope	Duarte	CA
Clovis Community Medical Center	Clovis	CA
Coalinga Regional Medical Center	Coalinga	CA
Coast Plaza Hospital	Norwalk	CA
College Medical Center	Long Beach	CA
CommonSpirit Health	Chicago	IL
Community Behavioral Health Center	Clovis	CA
Community Health Center – Sierra	Fresno	CA
Community Hospital Long Beach	Long Beach	CA
Community Hospital of Huntington Park	Huntington Park	CA
Community Hospital of San Bernardino	San Bernardino	CA
Community Hospital of the Monterey Peninsula	Monterey	CA
Community Medical Centers	Fresno	CA
Community Memorial Health System	Ventura	CA
Community Memorial Hospital	Ventura	CA
Community Regional Medical Center	Fresno	CA
Community Subacute and Transitional Care Center	Fresno	CA
Continuing Care Hospital – SJH	Lexington	KY
Cottage Health System	Santa Barbara	CA
Cottage Rehabilitation Hospital Campus of Santa Barbara Cottage Hosp.	Santa Barbara	CA
Crozer Chester Medical Center	Upland	PA
Deran Koligian Ambulatory Care Center	Fresno	CA
Desert Valley Hospital	Victorville	CA
Dignity Health	San Francisco	CA
Dignity Health Medical Foundation	San Francisco	CA
Dollarhide Health Center	Compton	CA
Dominican Hospital	Santa Cruz	CA
East Los Angeles Doctors Hospital	Los Angeles	CA
East Orange General Hospital	East Orange	NJ
Eastern Connecticut Health Network	Vernon	CT
Eastern Connecticut Health Network	Manchester	CT
Eden Medical Center	Castro Valley	CA
Edward R. Roybal Comprehensive Health Center	Los Angeles	CA
Eisenhower Medical Center	Rancho Mirage	CA
El Camino Hospital	Mountain View	CA
El Camino Hospital Los Gatos	Santa Clara	CA
El Centro Regional Medical Center	El Centro	CA

Member	City	State
El Monte Comprehensive Health Center	El Monte	CA
Emanate Health Hospice and Home Health	West Covina	CA
Emanate Health Medical Center — Inter-Community Campus	Covina	CA
Emanate Health Medical Center — Queen of the Valley Campus	West Covina	CA
Emanate Health Partners	Covina	CA
Encino Hospital Medical Center	Encino	CA
Enloe Medical Center	Chico	CA
Enloe Medical Center – Cohasset Campus	Chico	CA
Enloe Regional Cancer Center	Chico	CA
Enloe Rehabilitation Center	Chico	CA
Fairchild Medical Center	Yreka	CA
Fairmont Campus of Alameda Health System	San Leandro	CA
Flaget Memorial Hospital	Bardstown	KY
Flatiron Health	New York	NY
Flatiron Health, Inc.	New York	NY
Foothill Family Practice Medical Group	Glendora	CA
Foothill Presbyterian Hospital	Glendora	CA
Foothill Regional Medical Center	Tustin	CA
Franciscan Medical Group	Tacoma	WA
Fremont Medical Center Campus of Rideout Memorial Hospital	Yuba City	CA
French Hospital Medical Center	San Luis Obispo	CA
Fresno Heart & Surgical Hospital	Fresno	CA
Garden Grove Hospital and Medical Center	Garden Grove	CA
Garfield Medical Center	Monterey Park	CA
Gateways Hospital and Mental Health Center	Los Angeles	CA
General Hospital Campus of St. Joseph Hospital	Eureka	CA
George L. Mee Memorial Hospital	King City	CA
Glendale Health Center	Glendale	CA
Glendale Memorial Hospital and Health Center	Glendale	CA
Glendora Community Hospital	Glendora	CA
Glendora Surgery Center	Glendora	CA
Glenn Medical Center	Willows	CA
Goleta Valley Cottage Hospital	Santa Barbara	CA
Good Samaritan Hospital	Bakersfield	CA
Greater El Monte Community Hospital	South El Monte	CA
Grimes St. Joseph Health Center	Navasota	TX
H. Claude Hudson Comprehensive Health Center	Los Angeles	CA
Harbor – UCLA Medical Center	Torrance	CA
Harrison Medical Center dba St. Michael Medical Center	Silverdale	WA
Hazel Hawkins Memorial Hospital	Hollister	CA
Healdsburg Hospital	Healdsburg	CA
Hemet Valley Medical Center	Hemet	CA
Henry Mayo Newhall Memorial Hospital	Valencia	CA
High Desert Regional Health Center	Lancaster	CA
Highland Campus of Alameda Health System	Oakland	CA
Highline Medical Center dba St. Anne Hospital	Burien	WA
Hoag Hospital Irvine Campus of Hoag Memorial Hospital Presbyterian	Irvine	CA
Hoag Memorial Hospital Presbyterian	Newport Beach	CA
Hoag Orthopedic Institute	Irvine	CA
Hollywood Presbyterian Medical Center	Los Angeles	CA
Hubert H. Humphrey Comprehensive Health Center	Los Angeles	CA
Huntington Beach Hospital	Huntington Beach	CA
Huntington Hospital	Pasadena	CA
Incline Village Community Hospital	Incline Village	NV
Inland Valley Medical Center Campus of Southwest Healthcare System, Murrieta and Wildomar	Wildomar	CA
Jerold Phelps Community Hospital	Garberville	CA
Joe Arrington Cancer Center	Lubbock	TX
John C. Fremont Healthcare District	Mariposa	CA
John George Psychiatric Pavilion Campus of Alameda Health System	San Leandro	CA
John Muir Behavioral Health Center	Concord	CA
John Muir Medical Center, Concord Campus	Concord	CA
John Muir Medical Center, Walnut Creek Campus	Walnut Creek	CA
K hi M hala Behavioral Health	Ewa Beach	CA
Kaweah Delta Health Care District	Visalia	CA
Kaweah Delta Medical Center — South Campus	Visalia	CA
Kaweah Delta Mental Health Hospital	Visalia	CA
Kaweah Delta Rehabilitation Hospital	Visalia	CA
Kentfield Rehabilitation & Specialty Hospital	Kentfield	CA
Kern Medical	Bakersfield	CA
Kern Valley Healthcare District	Lake Isabella	CA
Kindred Hospital — Brea	Brea	CA
Kindred Hospital — San Diego	San Diego	CA
Kindred Hospital — San Francisco Bay Area	San Leandro	CA
KPC Healthcare, Inc.	Orange	CA

Member	City	State
La Palma Intercommunity Hospital	La Palma	CA
La Puente Health Center	La Puente	CA
Lake Los Angeles Community Clinic	Lake Los Angeles	CA
Littlerock Community Clinic	Littlerock	CA
Loma Linda University Children's Hospital Campus of Loma Linda University Medical Center	Loma Linda	CA
Loma Linda University Medical Center — Murrieta	Murrieta	CA
Lompoc Valley Medical Center	Lompoc	CA
Long Beach Comprehensive Health Center	Long Beach	CA
Long Beach Memorial	Long Beach	CA
Los Angeles Community Hospital at Bellflower	Bellflower	CA
Los Angeles Community Hospital at Los Angeles	Los Angeles	CA
Los Angeles Community Hospital at Norwalk	Norwalk	CA
Los Angeles County Department of Health Services	Los Angeles	CA
Los Angeles General Medical Center (LAGMC)	Los Angeles	CA
Lucile Salter Packard Children's Hospital	Palo Alto	CA
Mad River Hospital	Arcata	CA
Madison St. Joseph Health Center – Madisonville	Madisonville	TX
Mammoth Hospital	Mammoth Lakes	CA
Marian Regional Medical Center	Santa Maria	CA
Marian Regional Medical Center West Campus of Marian Regional Medical Center	Santa Maria	CA
Marin General Hospital	Greenbrae	CA
Mark Twain Medical Center	San Andreas	CA
Marshall Medical Cameron Park Campus of Marshall Medical Center	Cameron Park	CA
Marshall Medical Center	Placerville	CA
Martin Luther King Jr. Community Hospital	Los Angeles	CA
Martin Luther King, Jr. Outpatient Center	Los Angeles	CA
Mayers Memorial Hospital District	Fall River Mills	CA
Memorial Hospital Los Banos	Los Banos	CA
Memorial Hospital of Gardena	Gardena	CA
Memorial Medical Center	Modesto	TX
Memorial Medical Center – Livingston	Livingston	TX
Memorial Medical Center – San Augustine	San Augustine	TX
Memorial Medical Center of East Texas	Lufkin	TX
Menifee Valley Medical Center	Sun City	CA
Menlo Park Surgical Hospital	Menlo Park	CA
Mercy General Hospital	Sacramento	CA
Mercy Gilbert Medical Center	Gilbert	AZ
Mercy Hospital of Folsom	Folsom	CA
Mercy Hospital Southwest	Bakersfield	CA
Mercy Hospitals of Bakersfield	Bakersfield	CA
Mercy Medical Center Merced	Merced	CA
Mercy Medical Center Mount Shasta	Mount Shasta	CA
Mercy Medical Center Redding	Redding	CA
Mercy Medical Center Roseburg	Roseburg	OR
Mercy Medical Pavilion Campus of Mercy Medical Center	Merced	CA
Mercy San Juan Medical Center	Carmichael	CA
Methodist Hospital of Sacramento	Sacramento	CA
Mid Valley Comprehensive Health Center	Van Nuys	CA
Miller Children's Hospital Long Beach	Long Beach	CA
Mills Health Center Campus of Mills-Peninsula Health Services	San Mateo	CA
Mills-Peninsula Health Services	Burlingame	CA
Mills-Peninsula Health Services Senior Focus	Burlingame	CA
Mills-Peninsula Medical Center Campus of Mills-Peninsula Health Services	Burlingame	CA
Mission Heritage Medical Group	Mission Viejo	CA
Mission Hospital	Mission Viejo	CA
Modoc Medical Center	Alturas	CA
Montclair Hospital Medical Center	Montclair	CA
Monterey Park Hospital	Monterey Park	CA
Natividad Medical Center	Salinas	CA
NorthBay Healthcare Corporation	Fairfield	CA
NorthBay Medical Center	Fairfield	CA
NorthBay VacaValley Hospital	Vacaville	CA
Northern Inyo Hospital	Bishop	CA
Northridge Hospital Medical Center	Northridge	CA
Novato Community Hospital	Novato	CA
Ojai Valley Community Hospital	Ojai	CA
Olive View – UCLA Medical Center	Sylmar	CA
Olympia Medical Center	Los Angeles	CA
Orange Coast Memorial Medical Center	Fountain Valley	CA
Orange County Global Medical Center	Santa Ana	CA
Orchard Hospital	Gridley	CA
Oroville Hospital	Oroville	CA
Orthopaedic Medical Group – Chino	Chino	CA
Orthopaedic Medical Group – Glendora	Glendora	CA



Member	City	State
Orthopaedic Medical Group – West Covina	West Covina	CA
Ose Adams Medical Pavilion	Sacramento	CA
Ose Adams Medical Pavilion	Sacramento	CA
Our Lady of Fatima Hospital	North Providence	RI
Pacific Central Coast Health Centers	San Francisco	CA
Pacific Diagnostic Laboratories	Santa Barbara	CA
Palmdale Regional Medical Center	Palmdale	CA
Palo Alto Medical Foundation	Palo Alto	CA
Palomar Health	Escondido	CA
Palomar Medical Center Downtown Escondido	Escondido	CA
Palomar Medical Center Escondido	Escondido	CA
Palomar Medical Center Poway	Poway	CA
Paradise Valley Hospital	National City	CA
Paradise Valley Hospital – Bayview Behavioral Health Campus	Chula Vista	CA
Parkview Community Hospital Medical Center	Riverside	CA
Petaluma Valley Hospital	Petaluma	CA
PIH Health Good Samaritan Hospital	Los Angeles	CA
PIH Health Hospital – Downey	Downey	CA
PIH Health Hospital – Whittier	Whittier	CA
Pioneers Memorial Healthcare District	Brawley	CA
Pipeline Health	El Segundo	CA
Plumas District Hospital	Quincy	CA
Pomona Valley Hospital Medical Center	Pomona	CA
Prebys Cardiovascular Institute	La Jolla	CA
Providence Cedars-Sinai Tarzana Medical Center	Tarzana	CA
Providence Health & Services — Southern California	Torrance	CA
Providence Holy Cross Medical Center	Mission Hills	CA
Providence Little Company of Mary Medical Center — San Pedro	San Pedro	CA
Providence Little Company of Mary Medical Center — Torrance	Torrance	CA
Providence Little Company Of Mary Subacute Care Center	San Pedro	CA
Providence Little Company Of Mary Transitional Care Center (DP/SNF)	Torrance	CA
Providence Mission Hospital	Laguna Beach	CA
Providence Mission Hospital – Laguna Beach	Laguna Beach	CA
Providence Queen of the Valley Medical Center	Napa	CA
Providence Redwood Memorial Hospital	Fortuna	CA
Providence Saint Joseph Medical Center	Burbank	CA
Providence Saint John's Health Center	Santa Monica	CA
Providence Santa Rosa Memorial Hospital	Santa Rosa	CA
Providence Santa Rosa Memorial Hospital – Sotoyome	Santa Rosa	CA
Providence St. Joseph Hospital – Eureka	Eureka	CA
Providence St. Joseph Hospital – Orange	Orange	CA
Providence St. Jude Medical Center	Fullerton	CA
Providence St. Mary Medical Center	Apple Valley	CA
Rady Children's Hospital — San Diego	San Diego	CA
Rancho Los Amigos National Rehabilitation Center	Downey	CA
Redlands Community Hospital	Redlands	CA
Riverside University Health System – Medical Center	Moreno Valley	CA
Roger Williams Medical Center	Providence	RI
Saddleback Memorial Medical Center – Laguna Hills	Laguna Hills	CA
Saint Agnes Medical Center	Fresno	CA
Saint Francis Memorial Hospital	San Francisco	CA
Saint Joseph Brea	Brea	KY
Saint Joseph East	Lexington	KY
Saint Joseph Hospital	Lexington	KY
Saint Joseph London	London	KY
Saint Joseph Mt. Sterling	Mount Sterling	KY
Saint Louise Regional Hospital	Gilroy	CA
Salinas Valley Memorial Healthcare System	Salinas	CA
San Antonio Regional Hospital	Upland	CA
San Bernardino Mountains Community Hospital District	Lake Arrowhead	CA
San Dimas Community Hospital	San Dimas	CA
San Fernando Health Center	San Fernando	CA
San Gabriel Valley Medical Center	San Gabriel	CA
San Geronio Memorial Hospital	Banning	CA
San Leandro Hospital	San Leandro	CA
San Mateo Medical Center	San Mateo	CA
Santa Barbara Cottage Hospital	Santa Barbara	CA
Santa Clara Valley Medical Center	San Jose	CA
Santa Paula Hospital	Santa Paula	CA
Santa Ynez Valley Cottage Hospital	Solvang	CA
Scripps Green Hospital	La Jolla	CA
Scripps Health	San Diego	CA
Scripps Memorial Hospital East County	El Cajon	CA
Scripps Memorial Hospital Encinitas	Encinitas	CA

Member	City	State
Scripps Memorial Hospital La Jolla	La Jolla	CA
Scripps Mercy Hospital	San Diego	CA
Scripps Mercy Hospital Chula Vista Campus of Scripps Mercy Hospital	Chula Vista	CA
Sequoia Hospital	Redwood City	CA
Seton Medical Center	Daly City	CA
Seton Medical Center Coastsides	Moss Beach	CA
Sharp Chula Vista Medical Center	Chula Vista	CA
Sharp Coronado Hospital and Healthcare Center	Coronado	CA
Sharp Grossmont Hospital	La Mesa	CA
Sharp HealthCare	San Diego	CA
Sharp Mary Birch Hospital for Women & Newborns Campus of Sharp Memorial Hospital	San Diego	CA
Sharp McDonald Center Campus of Sharp Mesa Vista Hospital	San Diego	CA
Sharp Memorial Hospital	San Diego	CA
Sharp Mesa Vista Hospital	San Diego	CA
Sharp Rees – Stealy Medical Group	San Diego	CA
Shasta Regional Medical Center	Redding	CA
Sherman Oaks Hospital	Sherman Oaks	CA
Shriners Hospitals for Children Northern California	Sacramento	CA
Sierra Nevada Memorial Hospital	Grass Valley	CA
Sierra View Medical Center	Porterville	CA
Sonoma Valley Hospital	Sonoma	CA
South Coast Global Medical Center	Santa Ana	CA
South Valley Health Center	Palmdale	CA
Springfield Hospital	Springfield	PA
St. Anthony Hospital	Pendleton	OR
St. Anthony Hospital	Gig Harbor	WA
St. Bernardine Medical Center	San Bernardino	CA
St. Clare Hospital	Lakewood	WA
St. Elizabeth Community Hospital	Red Bluff	CA
St. Elizabeth Hospital	Enumclaw	WA
St. Francis Hospital	Federal Way	WA
St. Francis Medical Center	Lynwood	CA
St. John's Pleasant Valley Hospital	Camarillo	CA
St. John's Regional Medical Center	Oxnard	CA
St. Joseph Assisted Living	Bryan	TX
St. Joseph Health	Irvine	CA
St. Joseph Health Center – College Station	College Station	TX
St. Joseph Heritage Medical Group	Irvine	CA
St. Joseph Home Care Network	Sonoma	CA
St. Joseph Home Health Network	Irvine	CA
St. Joseph Hospital Acute Rehabilitation Unit	Eureka	CA
St. Joseph Manor – Bryan	Bryan	TX
St. Joseph Medical Center	Tacoma	WA
St. Joseph Regional Health Center – Bryan	Bryan	TX
St. Joseph's Behavioral Health Center	Stockton	CA
St. Joseph's Hospital and Medical Center	Phoenix	AZ
St. Joseph's Medical Center	Stockton	CA
St. Luke's Hospital at the Vintage	Houston	TX
St. Luke's Lakeside Hospital – Woodlands	The Woodlands	TX
St. Luke's Patients Medical Center – Pasadena	Pasadena	TX
St. Luke's Sugar Land	Sugar Land	TX
St. Luke's Woodlands Hospital	The Woodlands	TX
St. Mary High Desert Medical Group	Victorville	CA
St. Mary Medical Center	Long Beach	CA
St. Mary Medical Center	Apple Valley	CA
St. Mary's Medical Center	San Francisco	CA
St. Rose Dominican Hospitals — Rose de Lima	Henderson	NV
St. Rose Dominican Hospitals — San Martin	Las Vegas	NV
St. Rose Dominican Hospitals — Siena	Henderson	NV
St. Vincent – Hot Springs	Hot Springs	AK
St. Vincent Medical Center	Los Angeles	CA
Stanford Health Care	Palo Alto	CA
Stanford Health Care – ValleyCare-Livermore	Livermore	CA
Stanford Health Care Tri-Valley	Pleasanton	CA
Stanford Health Care Tri-Valley	Livermore	CA
Stewart and Lynda Resnick Neuropsychiatric Hospital at UCLA	Los Angeles	CA
Sulpizio Cardiovascular Center	La Jolla	CA
Sutter Amador Hospital	Jackson	CA
Sutter Auburn Faith Hospital	Auburn	CA
Sutter Care at Home	Emeryville	CA
Sutter Center for Psychiatry	Sacramento	CA
Sutter Coast Hospital	Crescent City	CA
Sutter Davis Hospital	Davis	CA
Sutter Delta Medical Center	Antioch	CA

Member	City	State
Sutter East Bay Medical Foundation	Lafayette	CA
Sutter Gould Medical Foundation	Modesto	CA
Sutter Lakeside Hospital	Lakeport	CA
Sutter Maternity and Surgery Center of Santa Cruz	Santa Cruz	CA
Sutter Medical Center — Sacramento	Sacramento	CA
Sutter Medical Center – Sacramento Sutter Center for Psychiatry	Sacramento	CA
Sutter Medical Foundation	Sacramento	CA
Sutter Memorial Hospital Campus of Sutter Medical Center — Sacramento	Sacramento	CA
Sutter Pacific Heart Centers	San Francisco	CA
Sutter Physician Services	Sacramento	CA
Sutter Roseville Medical Center	Roseville	CA
Sutter Santa Rosa Regional Hospital	Santa Rosa	CA
Sutter Santa Rosa Regional Hospital — Warrack Campus	Santa Rosa	CA
Sutter Solano Cancer Center Campus of Sutter Solano Medical Center	Vallejo	CA
Sutter Solano Medical Center	Vallejo	CA
Sutter Surgery Center Division	Sacramento	CA
Sutter Surgical Hospital	Yuba City	CA
Sutter Tracy Community Hospital	Tracy	CA
Tahoe Forest Hospital District	Truckee	CA
Taylor Hospital	Ridley Park	PA
Torrance Memorial Medical Center	Torrance	CA
Tri-City Healthcare District	Oceanside	CA
Trinity Health System dba Trinity Hospital Holding Co	Steubenville	OH
Trinity Hospital	Weaverville	CA
Trinity Hospital Twin City	Dennison	OH
UC Davis Medical Center, Sacramento	Sacramento	CA
UC Irvine Health, Orange	Orange	CA
UC San Diego Health – Ambulatory	San Diego	CA
UC San Diego Thornton Hospital	La Jolla	CA
UCLA Medical Center, Santa Monica, Santa Monica	Santa Monica	CA
UCLA, Ronald Reagan UCLA Medical Center, Los Angeles	Los Angeles	CA

Member	City	State
UCSD Health – Hillcrest Medical Center, San Diego	San Diego	CA
UCSD Health– Jacobs Medical Center, La Jolla	La Jolla	CA
UCSD Health, San Diego	San Diego	CA
UCSF Benioff Children's Hospital	Oakland	CA
UCSF Children's Hospital, San Francisco	San Francisco	CA
UCSF Medical Center at Mission Bay, San Francisco	San Francisco	CA
UCSF Medical Center at Mount Zion, San Francisco	San Francisco	CA
UCSF Medical Center, San Francisco	San Francisco	CA
University of California, Oakland	Oakland	CA
USC Arcadia Hospital	Arcadia	CA
Valley Children's Healthcare	Madera	CA
Valley Presbyterian Hospital	Van Nuys	CA
Vaughn School Based Health Center	San Fernando	CA
Ventura County Health Care Agency	Ventura	CA
Ventura County Medical Center	Ventura	CA
Verity Health System	Redwood City	CA
Vibra Hospital of Sacramento	Folsom	CA
Vibra Hospital of San Diego	San Diego	CA
Victor Valley Global Medical Center	Victorville	CA
Virginia Mason Medical Center	Seattle	WA
Washington Hospital Healthcare System	Fremont	CA
Waterbury Hospital	Waterbury	CT
Watsonville Community Hospital	Watsonville	CA
West Anaheim Medical Center	Anaheim	CA
Whittier Hospital Medical Center	Whittier	CA
Wilmington Health Center	Wilmington	CA
Woodland Healthcare	Woodland	CA
Yvapai Regional Medical Center East	Prescott Valley	AZ
Yvapai Regional Medical Center West	Prescott	AZ
Zuckerberg San Francisco General Hospital and Trauma Center	San Francisco	CA



**Join us** in Lake Tahoe for the HQI and Hospital Council Annual Conference, the premier patient safety event in the West. This year's conference features nurse RaDonda Vaught and other nationally acclaimed experts who will address the hottest topics in health care. This is a great opportunity to network and learn from peers. World-class speakers will share insights, innovations, and best practices to help hospitals.

**2023**

**HQI and Hospital Council  
Annual Conference**

- October 15 & 16, 2023
- The Everline Resort & Spa, Lake Tahoe

**REGISTER NOW**



**Contact:** [info@chpsso.org](mailto:info@chpsso.org)

**Visit:** [www.chpsso.org](http://www.chpsso.org)

1215 K Street, Suite 1915  
Sacramento, CA 95814  
(916) 552-2600