



**Southeast Texas Regional Healthcare Partnership**

Texas Healthcare Transformation and Quality Improvement Program ☆ Medicaid 1115 Waiver

# **CERTIFICATE OF ATTENDANCE**

**THIS CERTIFIES THAT**

**STEPHANIE KING**

**FROM**

**ST. LUKE'S MEDICAL CENTER**

**PARTICIPATED IN THE SEMI-ANNUAL LEARNING COLLABORATIVE  
HOSTED BY REGION 3  
ON**

**DECEMBER 4, 2013**

*Beth Cloyd*

12/4/2013

BETH CLOYD, PHD EXECUTIVE VP CLINICAL OPERATIONS, CNE  
HARRIS HEALTH SYSTEM, REGION 3 ANCHOR

DATE

Certificate #:

12042013116

Approved by:  
Harris Health System



**Southeast Texas Regional Healthcare Partnership**

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# **CERTIFICATE OF ATTENDANCE**

THIS CERTIFIES THAT

**RICHELLE DIXON**

FROM

**ST. LUKE'S MEDICAL CENTER**

**PARTICIPATED IN THE SEMI-ANNUAL LEARNING COLLABORATIVE  
HOSTED BY REGION 3  
ON**

**DECEMBER 4, 2013**

*Beth Cloyd*

12/4/2013

BETH CLOYD, PHD EXECUTIVE VP CLINICAL OPERATIONS, CNE  
HARRIS HEALTH SYSTEM, REGION 3 ANCHOR

DATE

Certificate #:

12042013060

Approved by:  
Harris Health System