




Building Accountability
through Communication & Aligned Relationships



Healthcare Case Study

Role & Relationship Realignment

& Re-Partnering



Board of Directors requires defined accountability to bring solutions to their long-term strained/dysfunctional working relationships between and among the Medical Staff, Board of Directors and Hospital Senior Management.

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Executive Summary

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Case Study Focus

1. Illustrates the process the Board of Directors of a 155 bed acute 501 (c) (3) community healthcare delivery system serving approximately 125,000 residents in central Georgia utilized to strengthen accountabilities and performance in renewing their strained relationships between and among the Medical Staff, Board of Directors and Hospital Senior Management.
2. Provides a proactive option in what other Board of Directors – Senior Management – Medical Staff Leadership can do to improve their strained and dysfunctional relationships with one another.

Identified Organizational Issues 2006

- Fractured / broken relationships
- Low morale and levels of trust
- Personal agendas – No shared vision
- Unclear role expectations and poor execution
- Accountability not assumed fully, which led to confusion
- Gossip communications – Finger pointing
- Damaged community image
- Decreasing market share

Physician Satisfaction Survey Conducted 2006

Areas Identified Needing Improvement Summary

29 out of 61 physicians responded – Survey Participation deadline extended twice.

1. Board tries to work with Medical Staff [- 50% unfavorable].
2. Medical Staff works together as a cohesive group [- 52% unfavorable].
3. Physician leadership responds to physician concerns [- 37% unfavorable].
4. Confidence/trust in Administration and/or responds to my needs [- 38% unfavorable].
5. Hospital Administration keeps physician informed of plans that affect them [- 45% unfavorable].
6. 69% of physicians that responded believed no action would be taken from this physician survey.

Path To Organizational Solutions

- Completion of Employee Opinion Survey – 2006
- Completion of Physician Satisfaction Survey – 2006
- Launched Stellar Customer Service Initiative – 2006
- Engagement of Mazzuca & Associates – 2007
 - Implementation of Re-Partnering & Relationship Realignment Assessment Recommendations
 - Organizational Achievements and their critical success factors – 2008

Engagement of Mazzuca & Associates 2007

Organizational Objective

Develop better ways to communicate between and among Board Members, Medical Staff Leadership and Hospital Senior Management.

Consultant Objectives

1. Validate the findings from the 2006 Physician Survey.
2. Ascertain what it will take to improve working relationships by improving one-to-one relationships and communications from Board members to: (1) Board Members, (2) Hospital Senior Management and (3) Physicians and vice versa.

Engagement of Mazzuca & Associates 2007

Consultant Deliverables

1. Provide assessment feedback to:

- Board of Directors
- Management Executives
- Medical Executives
- Medical Staff Members

Characterizing their: (1) subculture behaviors and beliefs, (2) interacting tendencies, (3) areas of strengths and (4) areas of conflict and tension.

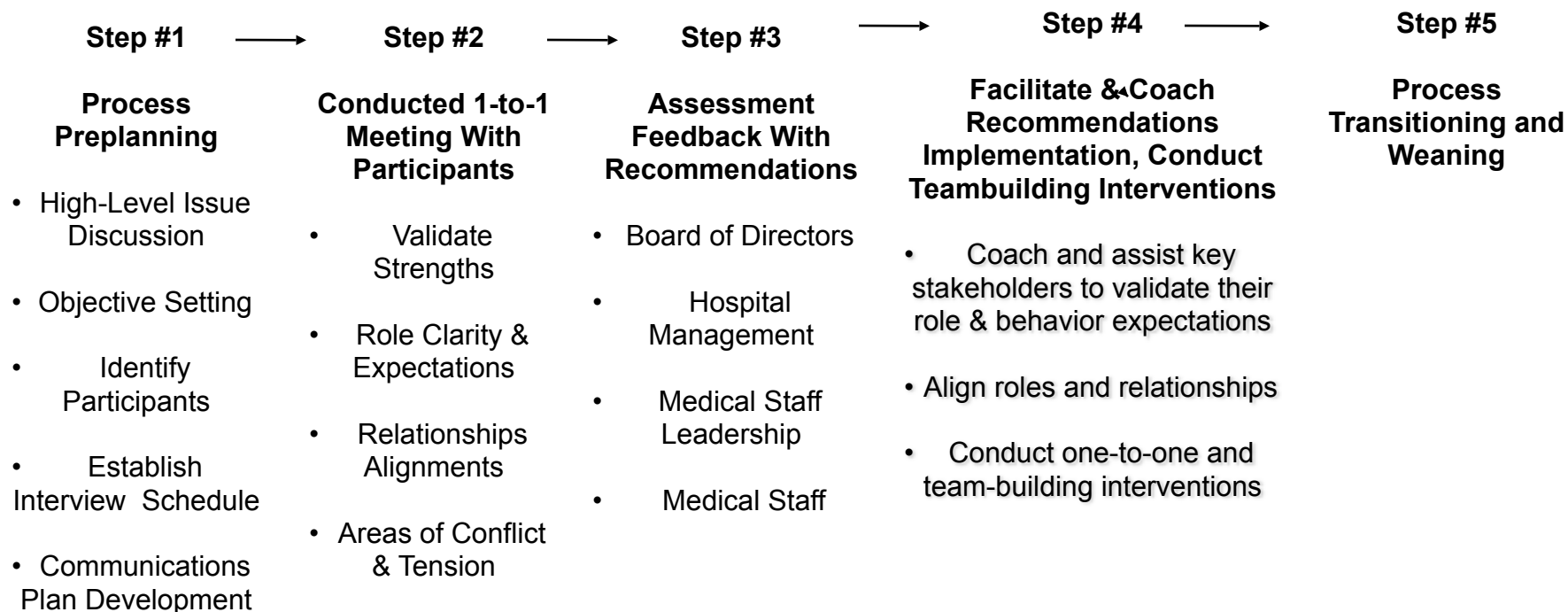
2. Recommend a plan for:

- a. Finding common ground within divisive issues.
- b. What is needed to develop functional working relationships between and among Board Members, Management and Medical Executives and Medical Staff.

3. Facilitate and coach Board of Directors, Medical Staff Leadership and Hospital Senior Management in implementing approved planned recommendations.

Process Steps

Relationship Assessment & Realignment



Assessment Feedback Sample

Board of Directors

Characteristics Needed to be Functional

1. Board (s) purpose and scope are clear.
2. Board members' roles and expectations are clear and agreed upon.
3. Medical Staff board members understand the issues and are liaisons to the Medical Staff.
4. Board committees have clear purpose and expectations.
5. Members understand the conflict-of-interest policy and do not violate it.
6. Agreement where governance begins and ends... Where management begins and ends.

Perceived Characteristics

1. Hospital and System Board purpose and scope are not clear.
2. Hospital vs. System Board membership roles and expectations are not clear.
3. Medical Staff board members provide no liaison to the Medical Staff.
4. Board committees structure is not clear.
5. Conflict of interest exists.
6. There is no agreement and the board is perceived to micro manage and go directly to the employees.

Assessment Feedback Sample Medical Staff

Characteristics Needed To Be Functional

1. Medical Staff, its leadership roles and committees are broad based to represent the majority, and are functionally cohesive and disciplined.
2. Medical Staff leadership has quality of representation, is capable, experienced and has had leadership training.
3. Role expectations are clear and agreed upon for the Chief of Staff, Medical Ex. Committee and Department/Committee Chairs.
4. Medical Committees are chartered, have purpose, scope, representation and active membership participation.

Perceived Characteristics

1. Medical Staff is polarized (not cohesive) and the Medical Staff Leadership does not assume accountability for its governance.
2. Medical Staff Leadership has insufficient leadership experience and fails to adequately represent the majority.
3. Medical Staff Leadership, Chief of Staff, Medical, Ex. Committee and Committee Chairs lack role clarity and a functional governance infrastructure to operate effectively.
4. Medical Committees lack effective leadership – usually dominated by one or two members. Perceived as “the good ole boys club,” ...more exclusive than inclusive.

Assessment Feedback Sample Hospital Senior Management

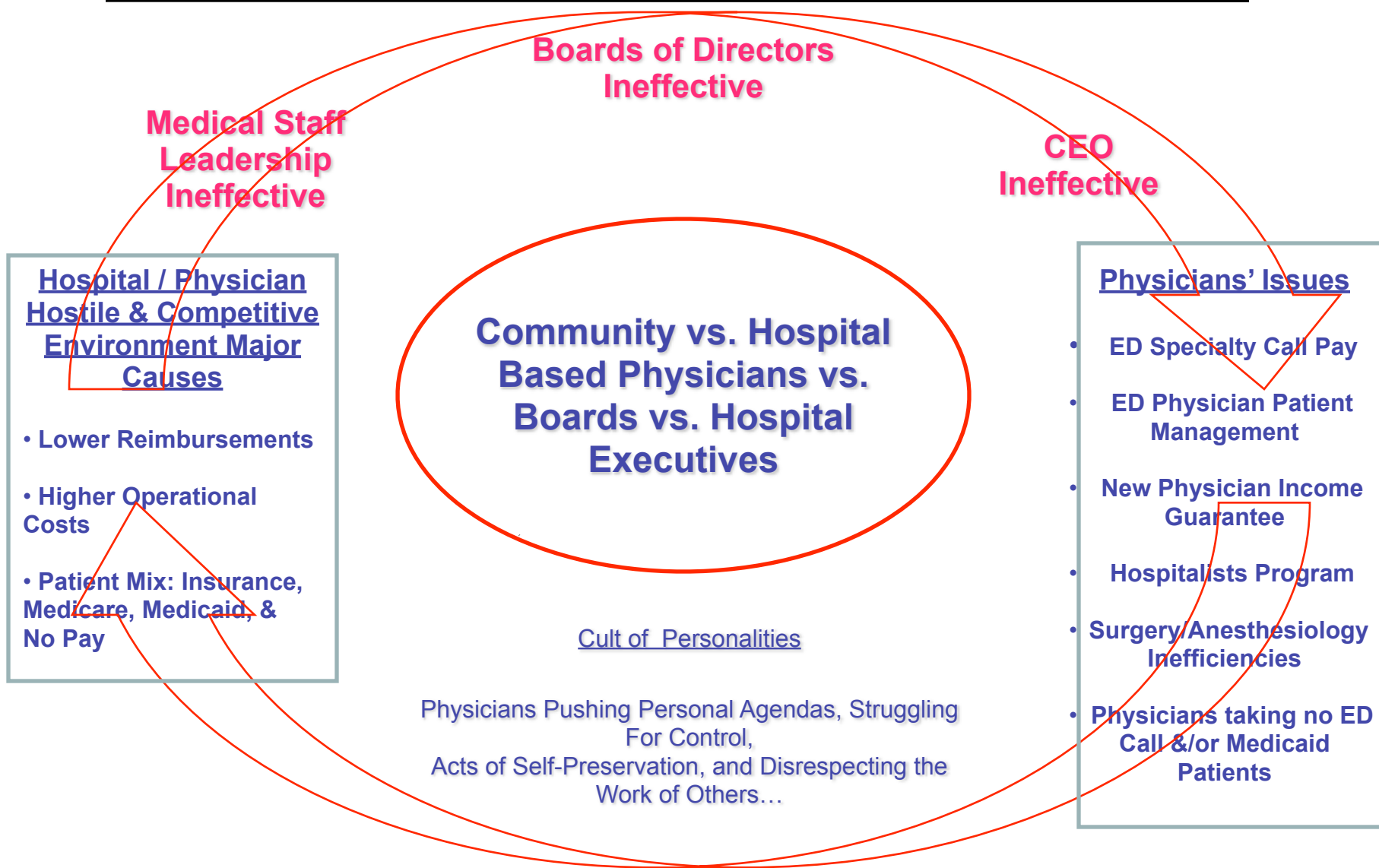
Characteristics Needed To Be Functional

1. Management philosophy and style that is empowering, inclusive, participative, and proactive.
2. Administration's role expectations are clear and agreed upon and aligned to the business strategies.
3. Clear and agreed upon role expectations and alignment between the Board Chair, Chief of Staff and CEO.
4. Communications are organized to assure consistent, accurate and timely communications with all constituents.
5. Management is inclusive and participative.

Perceived Characteristics

1. Frustration/dissatisfaction levels exist within some key stakeholders [Boards, Medical Staff] and with some of Senior Management's lack of execution, timely response or follow through on promises.
2. Administration's roles and expectations are not clear within their team.
3. There are no clear and agreed upon role expectations and alignment between the Board Chair, Chief of Staff, and CEO.
4. Communications is not timely and usually 2nd or 3rd handed.
5. Management is too participative and time consuming in search of solutions.

Assessment Areas of Conflict and Tension Perceived Overview



Primary Issues to Resolve

Board of Directors

1. Governance Model: System Board vs. Hospital Board.
2. Role clarity and expectations.
3. Conflict of Interest.

Medical Staff

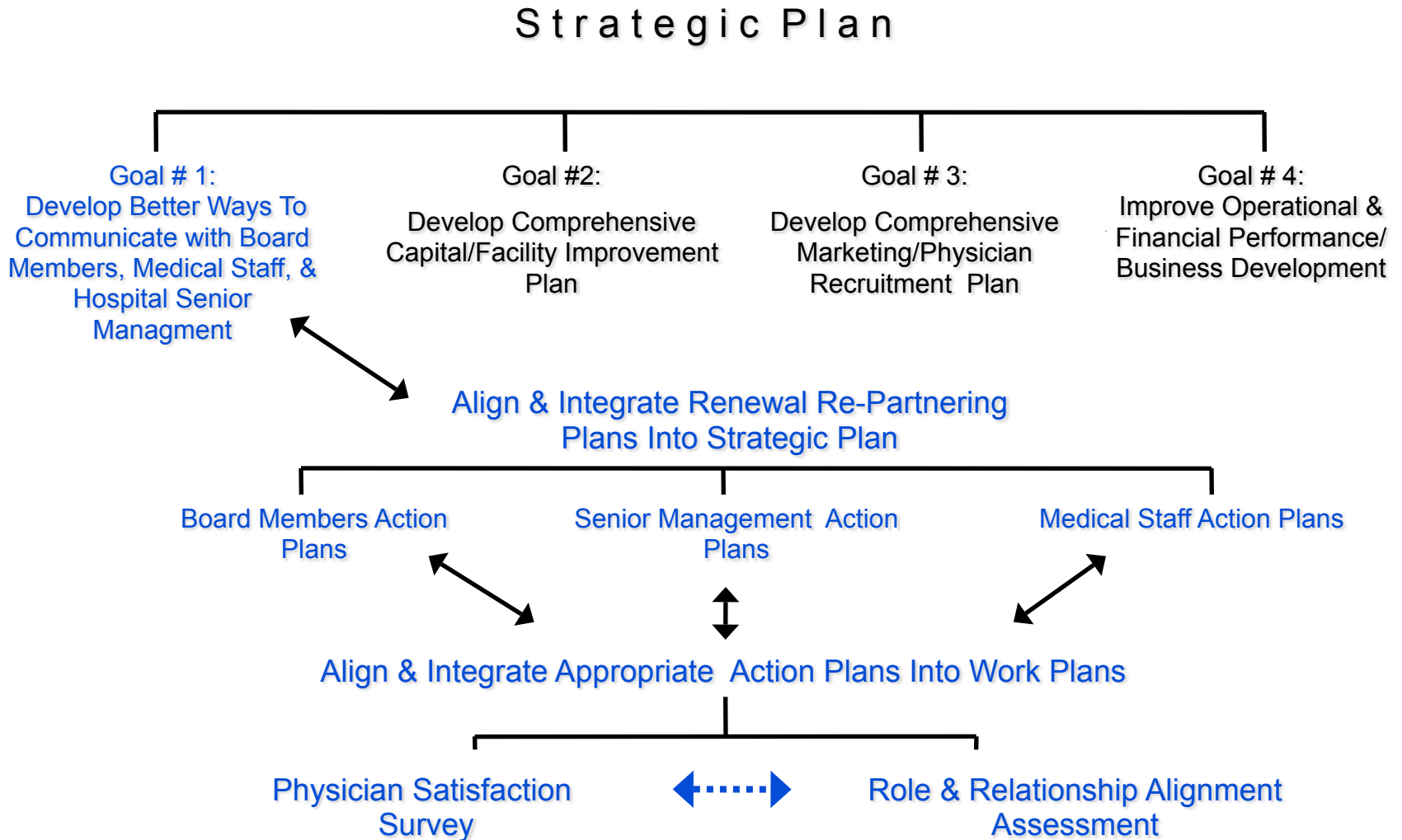
1. Implement broad base Medical Staff Governance infrastructure.
2. Establish medical Staff Leadership infrastructure and role accountabilities, which represents the physician majority, which includes: (1) role clarity and role expectations, (2) agreed upon medical bylaws, (3) code of conduct and (4) issue resolution process – clinical and administrative.

Senior Management

1. Organizational restructuring.
2. ED Specialty Call Policy development and implementation.
3. Hospitalists Program evaluation.
4. Radiologist contract renewal.
5. Chief Nurse recruitment.

Board Integrates Recommendations Into Strategic Plan

January 2007



Recommendations Into Project Management Plan

Board of Directors

1 Objective, 4 Strategies, 22 Action Plans

Sample

Objective #1: Increase Board Governance Effectiveness.

Strategy #2: Identify and agree on Board accountabilities.

Action Plans	Desired Outcome	Responsible	Date: Start	Date: End	Progress
1. <i>Agree on governance philosophy and infrastructure that is responsive to laws, ethical standards, competitors, quality requirements, community and Medical Staff needs.</i>	Establish a governance philosophy and style that is followed and practiced by each Board Member.	Board of Directors, CEO and Project Consultant.	Jan-07	Jul-07	Completed
2. Determine Board's roles and role expectations.	Agree-on Board's membership, roles and role expectations, and discussion protocols.	Board of Directors and Project Consultant.	Feb-07	Mar-07	Completed
3. Validate Board Committee's purpose, scope, leadership, and membership.	Ensure each committee has specific charter, qualified leadership and membership.	Board of Directors and Project Consultant.	Feb-07	Mar-07	Completed
4. Validate Mission and Value statements.	Agree-on, implements, and enforces the mission and value statements.	Board of Trustees, CEO and Chief of Staff.	Feb-07	Mar-07	Completed
5. Validate the current conflict of interest effectiveness.	Board members understand the conflict-of-interest policy and do not violate it.	Board of Trustees and Legal Counsel.	Jan-07	Feb-07	Completed

Recommendations Into Project Management Plan

Hospital Senior Management

1 Objective, 4 Strategies, 22 Action Plans

Sample

Objective #1: Develop a management philosophy/style, which will be proactive, participative, and consistent in directing and managing the overall operations of ORMC.

Strategy #1: Validate/redefine hospital administrative team reporting relationships, [organizational structure], which increase the timeliness of execution, coordination, and communications.

Action Plans	Desired Outcome	Responsible	Date: Start	Date: End	Progress
1. Agree on organizational chart that aligns and integrates business services.	Align the Executive Team membership into a responsive team with performance metrics that quarterly measure their key stakeholders satisfaction. [execution, responsiveness and Issue identification and resolution]		Jan-07	Mar-07	Completed
2. Establish role alignment and role clarity and expectations between the positions of CEO, Board Chair, and Chief of Staff... then with each direct report.	Ensure clear understanding and agreement on role performance expectations.	Hospital Executives and Project Consultant.	Jan-07	Mar-07	On going
3. Validate the purpose and scope of the Executive Team weekly meeting.	Ensure agenda-driven meetings that focus on operational execution and planning initiatives.		Jan-07	Mar-07	Completed
4. Conduct Ex. Team meetings to clarify management philosophy and style.	Establish agreement and alignment on management philosophy.	Hospital Executives and Project Consultant.	Jan-07	Feb-07	Completed

Recommendations Into Project Management Plan

Medical Staff Leadership

2 Objectives, 2 Strategies, 17 Action Plans

Objective #1: Develop broad base medical community leadership infrastructure.

Strategy #1: Establish Medical Staff Leadership infrastructure and accountabilities, which represents the physicians majority, which includes: (1) role clarity and expectations, (2) by-laws, (3) code of Conduct and (4) issue resolution process.

Action Plans	Desired Outcome	Responsible	Date: Start	Date: End	Progress
1. Establish the purpose, scope and membership of the Medical Executive Committee.	Improve individual and team working relationships and establish personal accountability and empowerment.	Medical Executive Committee, Project Consultant.	Jan-07	Feb-07	Completed
2. Establish role clarity and role expectations for the Medical Executive Committee members.	Roles and expectations are clear and agreed upon.	Medical Executive Committee, Project Consultant.	Feb-07	Jul-07	Completed
3. Validate each standing medical committee's purpose, scope and membership.	Medical Committees that have effective leadership, communications, representation and results.	Medical Executive Committee, Project Consultant.	Jan-07	Feb-07	Completed
4. Establish an issue resolution process.	Issue resolution process that is credible and acts timely on physician issues.	Medical Executive Committee, Project Consultant.	Jan-07	July-07	Completed
5. Establish Physician code of conduct.	Agree on code of conduct that enforces desired physician behaviors and has consequences.	Medical Executive Committee, Project Consultant.	Jan-07	July-07	Completed

Board of Directors Major Achievements

- Conducted Self Assessment and consolidated the System and Hospital Boards into one Board.
- Established positions of President/CEO & Chief of Staff as Ex-Officio Members of the Board.
- Determined Board's roles and role expectations.
- Validated the Board committee purpose, leadership and membership.
- Validated the Conflict of Interest Policy.
- Established role clarity and role expectations between Board Chair, President/CEO and Chief of Staff.
- Aligned Board of Directors with Medical Staff leadership and Senior Management.

Medical Staff Leadership Major Achievements

- Developed the purpose, scope and membership of the Medical Executive Committee.
- Established role clarity and role expectations for the Medical Executive Committee.
- Changed the Chief of Staff from one- to two-year term.
- Established appropriate dialogue between Physicians, Senior Management, and Board of Directors which improve communications and relationships.
- Improved accountability Peer Review Process.
- Validated the Code of Conduct Policy.
- Issue resolution process implementation.

Hospital Senior Management Major Achievements

- Management restructuring and alignment.
- Operational Issues prioritization and resolution.
- Chief Nurse Officer selection and recruitment.
- Addressed Employee Survey issues identified.
- ED Specialty Call Policy Development & Implementation.
- Completed EMS Spin-off.
- Radiology contract completion and PACS/CTC upgrades approval.
- Hospitalists Program Performance Survey & RFP development.
- Successfully completed JCAHO Survey.
- Launched Strategic Planning Process.
- Initiated relationship improvement action plans with Regional Hospitals.
- Implemented community image improvement strategies.

Process Critical Success Factors

- Board of Directors becoming **accountable** for their institution's work environment and its relationships.
- Strong desire by the Board to become transparent and grow their image of personal accountability.
- The Board of Directors, Medical Staff Leadership and Hospital Senior Management Team having the courage to confront chronic and polarizing issues with fresh thinking and new energy that was bold and unwavering toward a solution.
- Leveraging the organization's internal resources expertise within the Board of Directors, Medical Staff and Hospital Executives into the implementation of the relationship assessment recommendations .
- Allowing for the Relationship Renewal/Re-Partnering Process Recommendations to be fully implemented.