



Driving Culture Change at Main Line Health

BY PATRICIA SCHAEFFER

Why measure culture? Because, as Peter Drucker correctly observed, “Culture eats strategy for breakfast.” Then it has technology for lunch and products for dinner.

Main Line Health is an example of an organization that has not let its culture devour its strategy. Leadership there took proactive steps to measure the culture and ensure it supported the business strategy.

Main Line Health, founded in 1985, is a Philadelphia-region system of five hospitals — four acute care and one rehabilitation hospital — as well as a drug and alcohol treatment facility, a research facility and a home health service. These formerly independent entities came together to gain efficiencies from unified system management, combined buying power and more collaboration rather than competitive market tactics.

The organization has been highly successful in terms of patient care and satisfaction, as well as financial performance. But U.S. health care reform and market dynamics have increased pressure for the health system to foster more holistic attitudes about policies, protocols and practices across the hospitals to drive deeper improvements in quality, safety and financial performance.

In 2012, the revised business plan called for examination of the system’s culture and sub-cultures. The President and CEO Jack Lynch and the Senior Vice President of Human Resources Paul Yakulis knew that identifying and reinforcing the right behaviors was the key to creating a culture to support business strategy. In particular, they wanted to assess the alignment of their leadership competencies with the new

business plan. They also wanted to drive behavior change to ensure successful execution of a new strategic plan. With our help, they set out to understand the gaps, if any, between the behaviors underlying the current culture and the behaviors needed to change the culture to support the new strategy.

According to Yakulis, the CEO had three key behavioral changes he wanted to accomplish through this initiative.

1. To sustain its differentiation from its competitors, he wanted to see better collaboration among the Main Line Health hospitals and other entities
2. To be out ahead of the changing economics of health care

3. To see best practices shared across the health system, so that a person would feel and experience the same thing regardless of what Main Line Health facility they walked into.

This is where Talent Strategy Partners and our culture alignment assessment came in.

The primary outcome for Main Line Health was a customized leadership competency model. As the excerpt in *Figure 1* shows, the model defines – in clear behavioral terms — a blueprint of the expectations Main Line Health has of people throughout the organization, from individual contributors through top organizational leaders.

Manage the Business
System-wide Thinking

System-wide Thinking supports the *Strategic Initiatives* of Market Growth, Research and Financial Performance.

INDIVIDUAL CONTRIBUTOR	MANAGER	LEADER OF MANAGERS	ORGANIZATION LEADER
<p>MLH System Awareness</p> <p>Sees one’s role as a part of the MLH system. Has a sense of ownership for the health and success of the system.</p> <ul style="list-style-type: none"> • Can explain the different components, service lines, and capabilities of MLH • Knows MLH’s six strategic initiatives — Superior Patient Experience, Highly Engaged People, Market Growth, Research, Clinical Education, Financial Performance—and the intent behind each one • Expresses pride in the comprehensive services of MLH • Reaches out to colleagues to obtain and share information and advice • Follows up on issues that impact a part of the system even when it is outside of one’s own responsibility 	<p>Maintaining MLH System Consistency</p> <p>Fully utilizes established networks across the system to stay informed and ensure one’s group or function is aligned with the rest of the system.</p> <ul style="list-style-type: none"> • Knows who to call upon to get information • Knows and considers the goals of other units when making requests or decisions • Involves the right people in all initiatives and decisions • Ensures annual goals support MLH’s six strategic initiatives • Shares annual goals with peers to increase alignment, cooperation and opportunities to collaborate 	<p>Building MLH System Connections</p> <p>Takes a system-wide perspective, rather than just a functional or entity perspective, and aligns and integrates work to maximize quality and efficiency. Strives for consistency and standardization where possible.</p> <ul style="list-style-type: none"> • When in meetings with peers from across the system, recognizes opportunities to apply a successful practice across the system • Looks for opportunities to collaborate and contribute to the efforts of colleagues across the system • Recognizes when a practice or a solution in one’s area can benefit other entities in the system • Exercises the best possible judgment by considering the system implications of a local decision or initiative • Learns the unique elements of the culture of each part of the organization and how those differences impact the implementation of MLH’s strategic initiatives • Establishes relationships at each entity, building a network of connections across the entire system • Eliminates obstacles that prevent cross-entity collaboration 	<p>Promoting MLH System Collaboration</p> <p>Considers the entire organization picture. Establishes frameworks to enable cross-functional and cross-entity information sharing, decision making and results.</p> <ul style="list-style-type: none"> • Promotes and generates cooperation among one’s peers in leadership to achieve the goals under MLH’s strategic initiatives • Identifies opportunities to leverage the full capabilities of the system, not just those of one’s own area • Seeks opportunities to standardize functions or services across the system • Addresses structural issues that are obstacles to functioning as a system • Provides system-wide forums for networking, sharing achievements and solving problems • Considers how decisions will impact every line of business within the system • Reports results as a system (e.g., by service line) versus results by entity • Shares responsibility as a system for exceeding, meeting or falling short of goals; does not single out a particular entity

Figure 1: An excerpt from Main Line Health’s leadership competency model

Main Line Health quickly integrated these competencies into all the human resources (HR) management processes of the organization, including selection, assessment, performance expectations, rewards and development.

In the three years since the competency model was implemented and incorporated into all human resources management practices, the results are exactly what HR and C-suite executives had hoped for. According to Yakulis, “One example of cultural change driven by the assessment is ‘System-Wide Thinking.’ With a focus on this competency, localized thinking and behavior is receding and is being replaced with initiatives to standardize clinical protocols across all facilities with the goal to achieve clinically integrated networks. Job rotations among the facilities are now becoming the norm, and the sharing of best practices has become an organizational standard.”

Main Line Health has seen another important outcome, according to Yakulis: “The competency ‘Developing Others’ has driven the creation of the first-ever employee development process and has kick-started the creation of a succession planning process that manages the organization’s talent from a system perspective, using a common definition of leadership.”

Yakulis thinks the impetus behind the changes he’s observed was helping people understand the impact of their actions on outcomes. People rapidly accepted the changes they were being asked to make because they could connect the dots between the desired behaviors and the business plan.

The fact that Main Line Health acted quickly to imbed the competencies into selection and other HR programs also accelerated the transformation to the desired culture. Embedding the competencies was “a day-to-day reminder for how people were to behave, and there were actual rewards (and penalties) associated with the behavior.”

Our culture assessment operationalizes a research-based culture model called the *Competing Values Framework (CVF)*, developed by Kim Cameron and Robert Quinn. CVF looks at culture through the lens of organization effectiveness — a

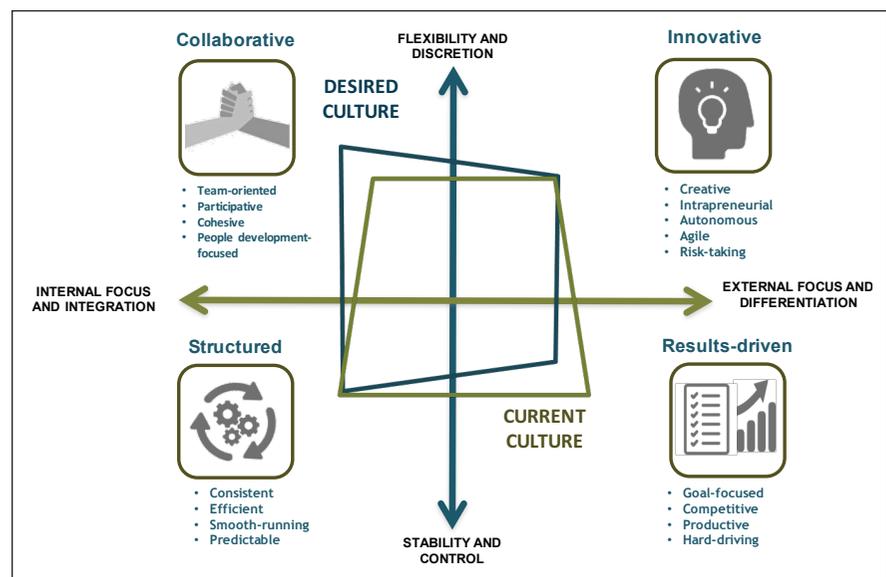


Figure 2: The Main Line Health culture profiles

concept executives embrace more readily than they do the concept of culture. CVF allows organizations to measure culture. Our process ensures actions are taken to move the culture in the right direction.

Leaders at Main Line Health completed the assessment by responding to a series of organization effectiveness statements. For each statement, the leaders indicated what best describes the organization as it is today and what best describes the desired future.

The technology translated survey responses about organization effectiveness into profiles of the current culture and the desired culture. The desired culture is what, in the opinion of the leadership, will best support the business plan.

Main Line Health’s culture profiles are shown in Figure 2. The slight pull toward flexibility and internal focus resulted in the most significant desired culture and behavioral change, to become more collaborative. Since Main Line Health already had a welcoming, collegial culture, collaboration meant thinking like a system rather than thinking like individual entities. The group was echoing one of the CEO’s primary objectives for starting this initiative.

Notice also the pull away from results driven. Main Line Health is goal-oriented, so this wasn’t about being

less focused on goal achievement. It was about delivering those results through enhanced collaboration.

A final interesting point about the Main Line Health profile is a slight pull away from structured and toward innovative. This desire for more innovation meant a desire to have people challenge the status quo, whether it’s suggesting a process improvement or questioning a clinical colleague to ensure the correct procedure is being done for a patient. It’s also about discovering new clinical pathways, and other quality improvement changes, that improve patient outcomes. The continuing emphasis on structure indicates an ongoing focus on quality, safety and efficiency.

Main Line Health developed a new strategic plan for 2016 through 2020 and has asked us to work with them to test alignment with the competency model and make necessary adjustments. As Yakulis said, “We want to be sure we recreate a powerful lever to use in supporting the accomplishment of another strategic plan.”

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Source:

Paul Yakulis, personal interviews, April and May of 2016.