

The Baldrige Foundation Institute for Performance Excellence

Presents:

Culture Mapping: Create a culture of resilience and long-term success

January 18, 2024







Mac Baldrige Society Members

























Opening Remarks/Agenda

Introduction Al Faber, President & CEO

Baldrige Foundation

Panelist Travis Lozier, Chief Culture and Quality Officer

Jordan Johnson, Inc.

Oanh Maroney-Omitade, Vice President of Organizational Excellence

Methodist Healthcare Ministries of South Texas

Audience

Questions

Moderator – Al Faber

Closing

Al Faber Remarks

Culture Mapping: Create a culture of resilience and long-term success

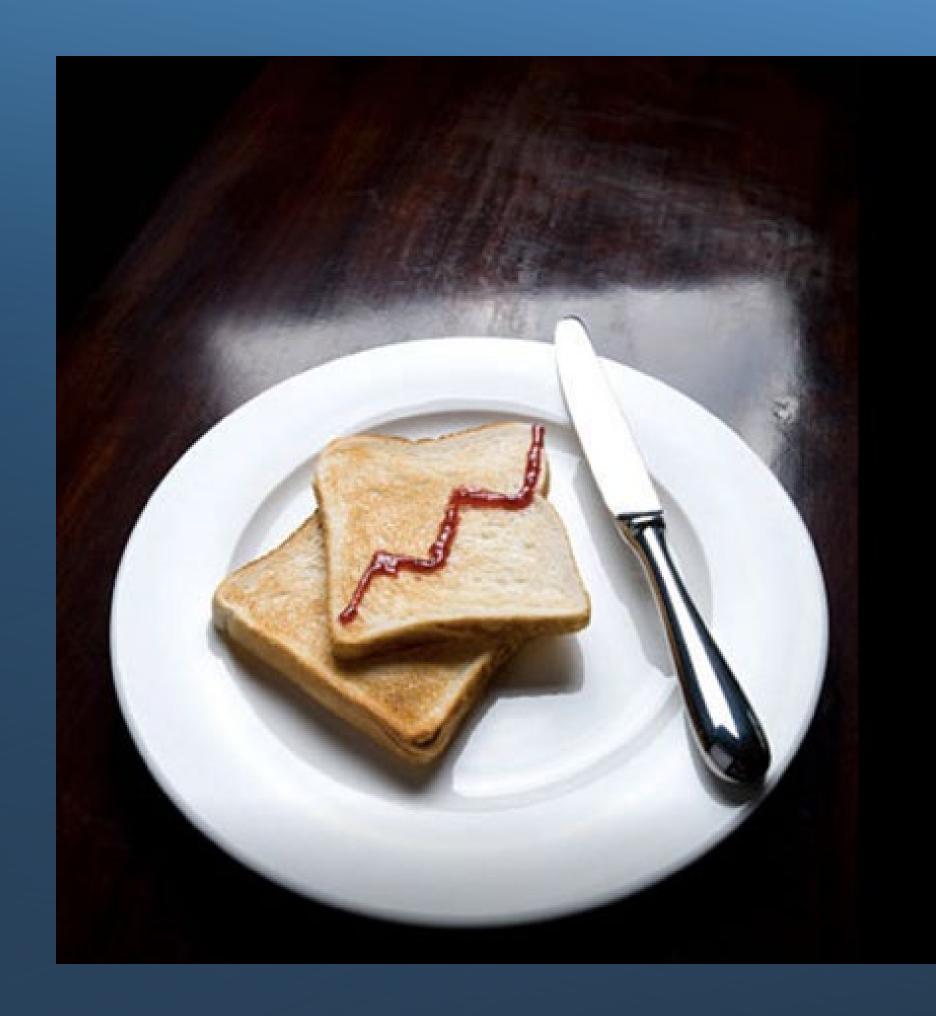
Travis Lozier
Chief Culture and Quality Officer
Jordan Johnson, Inc.

Oanh Maroney-Omitade
VP Organizational Excellence
Methodist Healthcare Ministries









Culture eats strategy for breakfast

- Peter Drucker

Culture Definition

CULTURE is the collection of behaviors of people in an organization.



OUTCOMES

- 1. Introduce the concept of Culture Mapping.
- 2. Provide a tool for Culture Mapping.
- 3. Share a case study of how Culture Mapping is transforming an organization Methodist Healthcare Ministries (MHM)
- 4. Create an understanding of how you can use Culture Mapping in your organization.



Culture Mapping

- All organizations have a unique culture.
- Leaders build culture whether intentionally or unintentionally
- In most organizations, culture has been unintentionally created. Culture is thought to be the "soft stuff" – not the "hard stuff" and many leaders never really address culture.
- Culture mapping is a tool that can help an organization understand its current culture and intentionally build its desired culture.



10 Behaviors and Cultural Issues that get in the way

Issues

- 1. We avoid tough conversations, including giving honest, productive feedback. More than 50% of leaders spoke about a cultural norm of "nice and polite" that is leveraged as an excuse to avoid tough conversations.
- 2. Rather than spending a reasonable amount of time proactively acknowledging and addressing the fears and feelings that show up during change and upheaval, we spend an unreasonable amount of time managing problematic behaviors.
- 3. Diminishing trust caused by a lack of connection and empathy.
- 4. Not enough people are taking smart risks or creating and sharing bold ideas to meet changing demands and the need for innovation.
- 5. We get stuck and defined by setbacks, disappointments, and failures, so we spend too much time and energy reassuring team members who are questioning their contribution and value.

Source: Dare to Lead, Brené Brown

10 Behaviors and Cultural Issues that get in the way

Issues

- 6. Too much shame and blame, and not enough accountability and learning.
- 7. People are opting out of vital conversations about diversity and inclusivity because they fear looking wrong, saying something wrong, or being wrong.
- 8. When something goes wrong, individuals and teams are rushing into ineffective or unsustainable solutions rather than staying with problem identification and solving.
- Organizational values are gauzy and assessed in terms of aspirations rather than actual behaviors that can be taught, measured, and evaluated.
- 10. Perfectionism and fear are keeping people from learning and growing.

Source: Dare to Lead, Brené Brown

Team Trust - Where is your team today?

Low Trust Teams	High Trust Teams
Conceal their weaknesses and mistakes from one another	Admit weaknesses and mistakes
Hesitate to ask for help or provide constructive feedback	Ask for help
Hesitate to offer help outside of their own areas of responsibility	Accept questions and input about their areas of responsibility
Jump to conclusions about the intentions and aptitudes of others without trying to clarify them	Give one another the benefit of the doubt before arriving at a negative conclusion
Hold grudges	Take risks in offering feedback and assistance
Dread meetings and find reasons to avoid spending time together	Look forward to meetings and working as a group
Spend time in villain/victim/helpless smaller stories	Focus time and energy on the bigger story
Struggle to apologize and let issues fester	Offer and accept apologies without hesitation

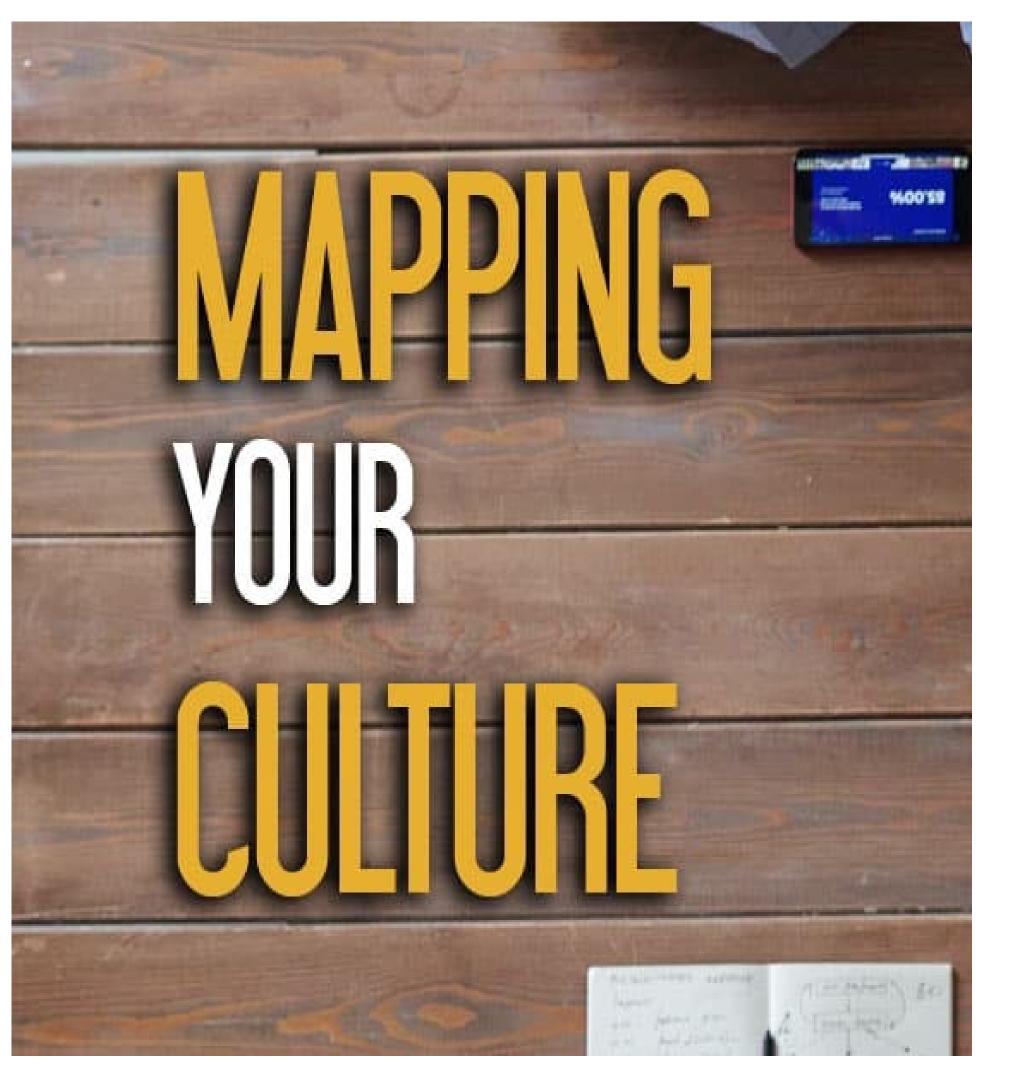






"Culture isn't the most important thing. Culture is the only thing."

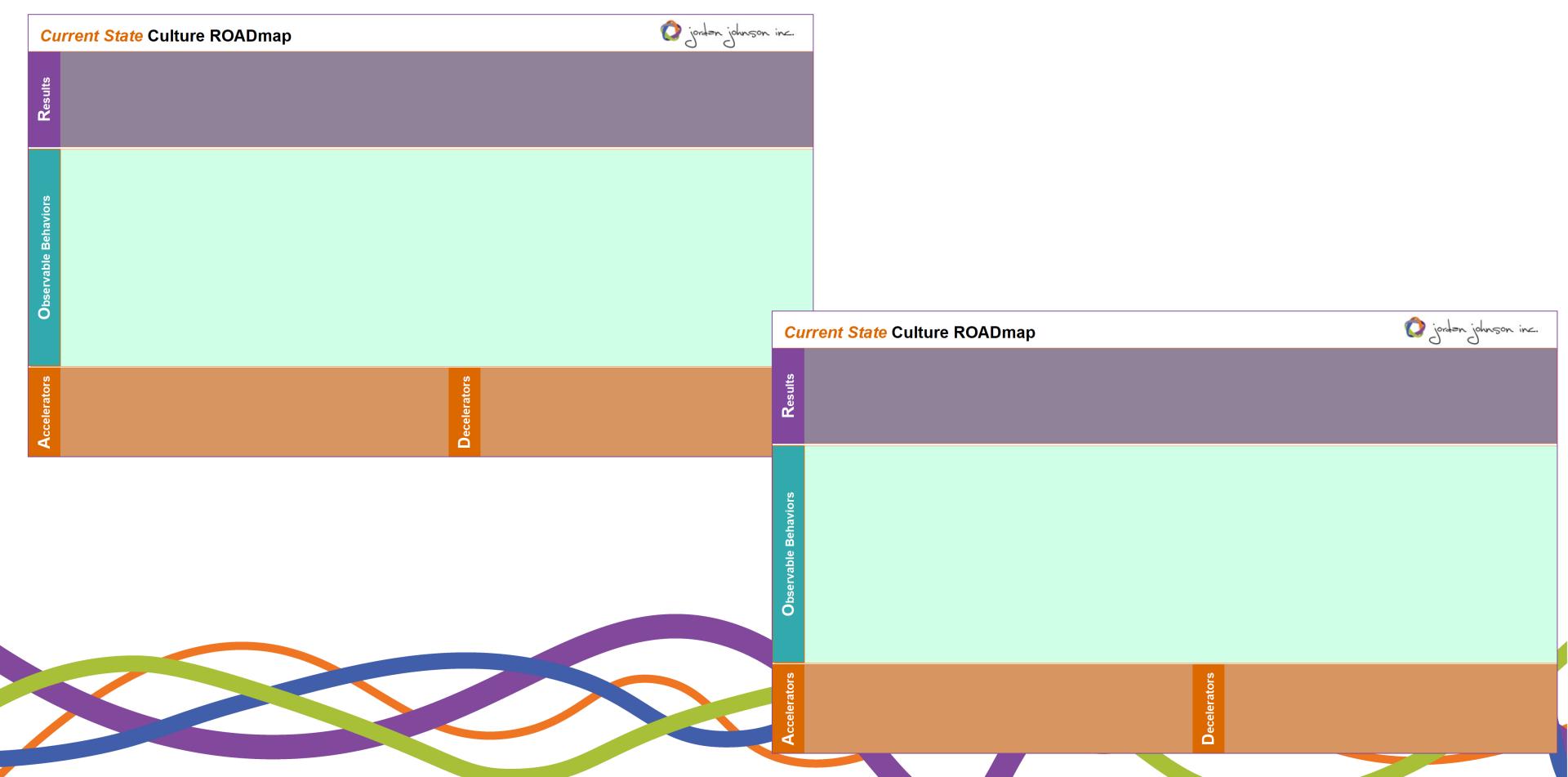
> –Jim Senigal, Former CEO Costco

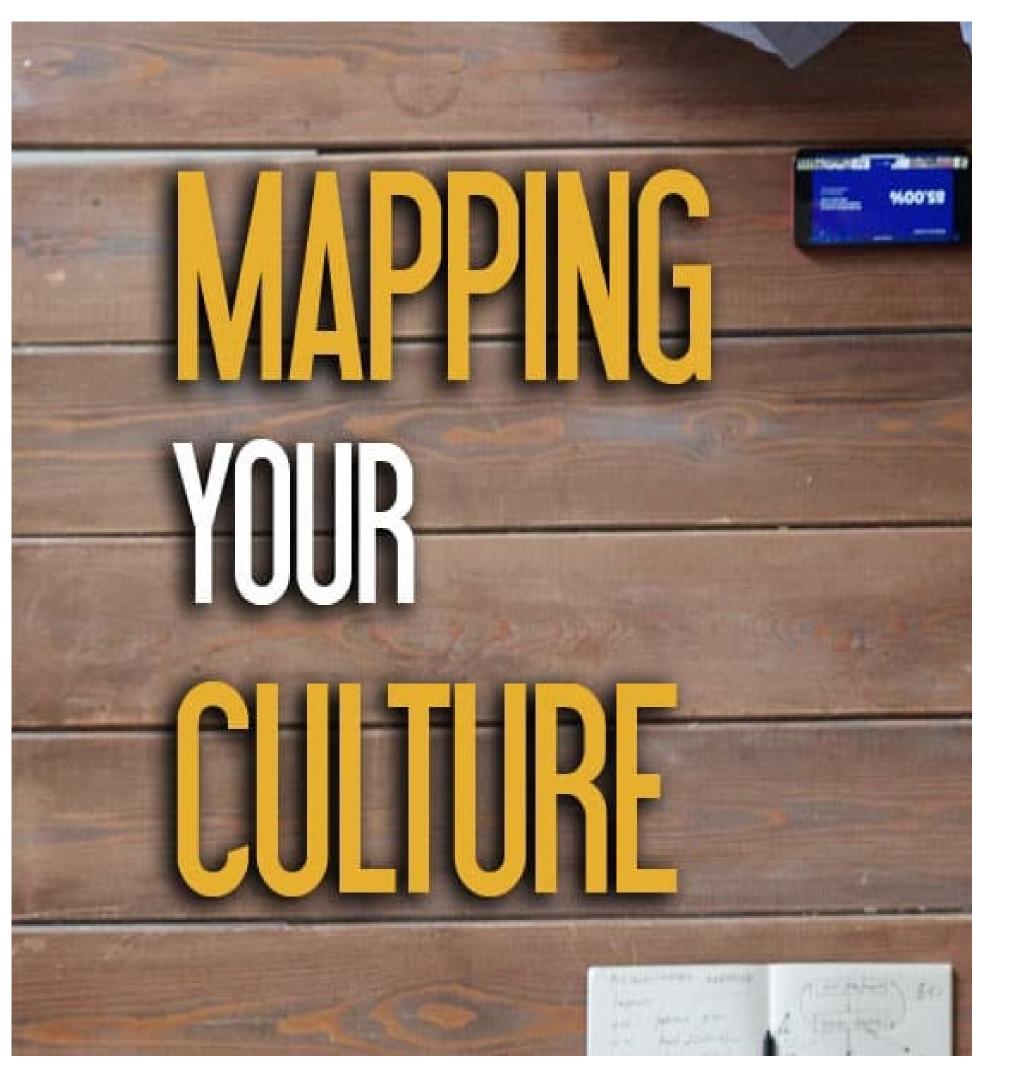


Culture Mapping

- Culture mapping starts by completing a card sort of words that are descriptive of the culture.
 This step helps the team to get comfortable articulating their current culture.
- Teams then complete the "culture roadmap" template for the current state culture

Culture ROADmap Templates





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- Teams then complete the "culture roadmap" template for the current state culture
- Teams agree on current state:
 - Results
 - Observable behaviors
 - Accelerators (what could accelerate a positive culture?)
 - Decelerators (what could impede a healthy culture?)

SAMPLE - Current State Culture ROADmap

FAVORABLE

- Achieved ISO 9001, vol. accreditations (add from Baldrige)
- Patients are still choosing to come to us
- Door to STEMI is top decile

IMPROVING

- 3 Star CMS (Improved)
- ER Throughput is improving
- Improved sepsis mortality
- Harm scores have improved
- Improving no-show rates in SJHP
- Physician engagement is above avg.

PRIDE and SUPPORT

- Pride in being the leading provider in the four corners
- Proud of the community connection
- Communication of values see people living those values
- Staff help people in hospital without being asked
- Peers support each other
- Employees are "recruiting other employees / providers

STAFF ENGAGEMENT

Observable Actions

Accelerators

- Pockets where caregivers provide exceptional care
- Examples of workforce going the extra mile to show care
- Involvement in process improvement teams
- Positive teamwork in pockets
- Some staff participate in volunteer activities
- Some leaders fill in and work overtime
- Some EEs talk about the things SJRMC is doing
- Staff has a sense of community
- Good levels of Quantros reporting

UNFAVORABLE

HEALTHCARE OUTCOMES

- Penalty phase on readmissions
- Risk adjusted mortality is unfavorable to expected

PATIENT SATISFACTION

Below average patient satisfaction

WORKFORCE

- EE & APP engagement average to below
- EE and Physician turnover is higher than desired
- Lack of diversity representative in workforce, leadership

UNCERTAINTY

- Some staff don't understand the "why" for changes
- Some complaining about priorities set by administration
- Staff are asking "what is going on and where are we going?"
- How does all this change affect me?
- Failure to provide feedback and follow-up is leading to uncertainty.

INCONSISTENCY

- Quality of care, service, teamwork
- Response to change

TECHNOLOGY

- Why are they making us use Cerner?
- Physician, patient and staff frustration with scheduling, results reporting, ordering, new work flows, etc.
- People feel everything is harder

SOCIAL RESPONSIBILITIES

CHNA indicates community health is not improving

FINANCIAL AND MARKET SHARE

- Overuse of resources for inpatient utilization management
- Poor financial performance
- Productivity is below benchmarks
- Lack of certain specialties affects volumes

OTHER

• Short-term inconsistencies / inefficiencies with new EMR

PATIENT CONCERNS

- Long wait times to see providers in some specialties
- Patients are exhibiting frustration
- Some patients are leaving to go to Durango

STRESS

- Stress levels are high fear for the future
- Workforce using EAP is higher than expected
- Chronic illness exception is at high levels
- People are short with each other
- Perception is that we can either "do the right thing" or focus on productivity – not both
- Seeing staff and clinician burnout
- Feeling the effects of the local economy
- Staff Share frustrations with co-workers, physicians, and patients

Medical staff involvement and buy-in

- Encouraging engagement
- Stable employee base

 Desition for all forms
- Positive feedback from patients, family, staffResponsiveness to individual needs
- New administration who care
- Living the values
- Community / Family
- Sole community provider
- Sense of pride about community
- Family connections
- HR Transformation
- Physician recruitmentAccountability where it exists
- Accurate documentation
- Conflict

ACCOUNTABILITY Not holding staff

- Not holding staff accountableOptionality
- Tolerating poor performance
- SUPPORTLack of leader support (training, other support)
- Not engaging in community
- Improvement projects get derailed

• Not holding each other up **COMMUNICATION**

- Communication of goals are not meaningful to staff - don't see how "I" fit
- Communication of priorities lacking

STAFFING

- Difficulties in recruiting
- Staff changes / false starts in improvement activities
- Having locums on staff who are not as invested in the core mission of the hospital
- Retention of physicians
- Staffing issues in general
- Ability to recruit with the appropriate skill sets

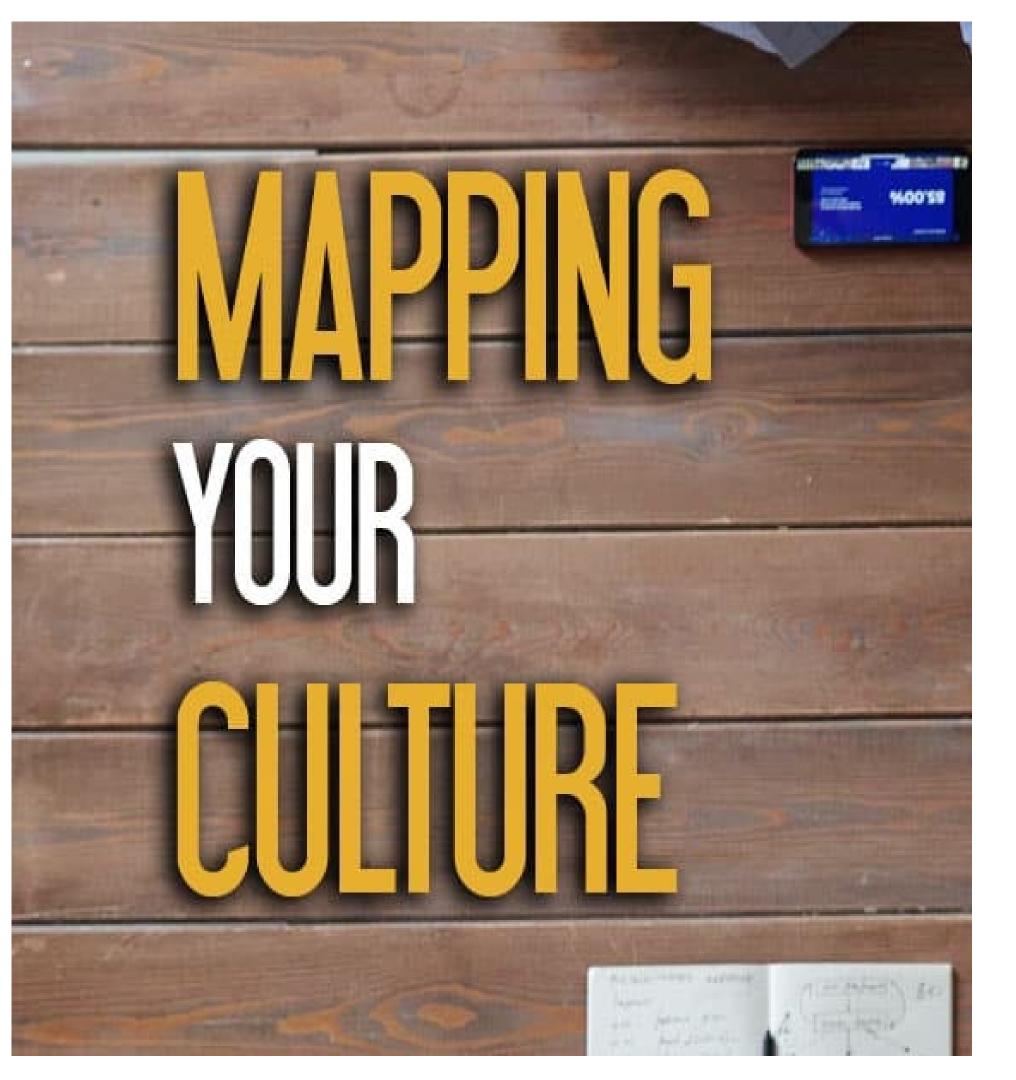
OTHER

- Changes in technology
- External forces disrupters, reimbursement, regulation, technology
- Community investment in the future –Financial problems

 changes that have been made to ensure financial
 viability

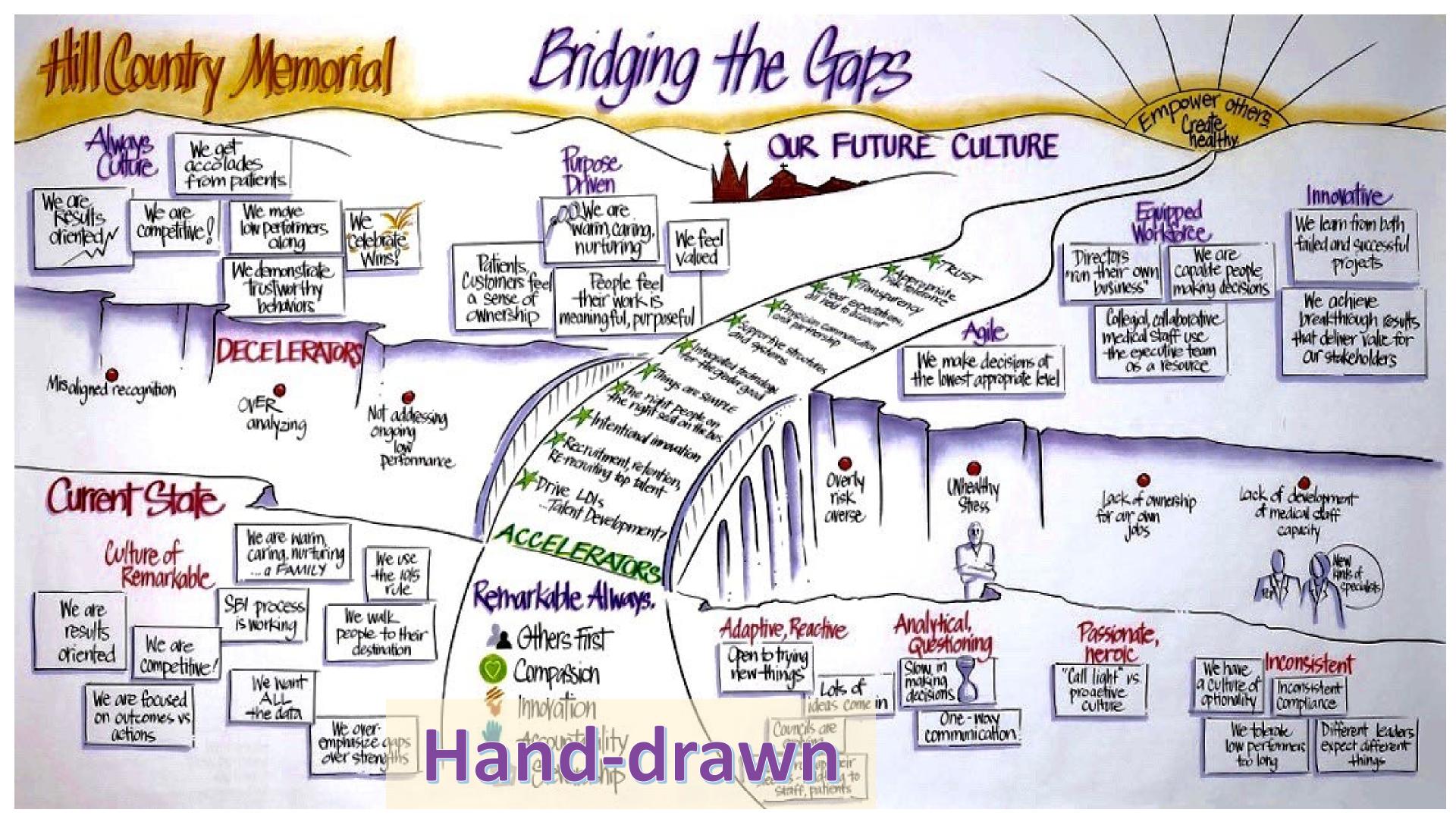
LEADERSHIP ISSUES

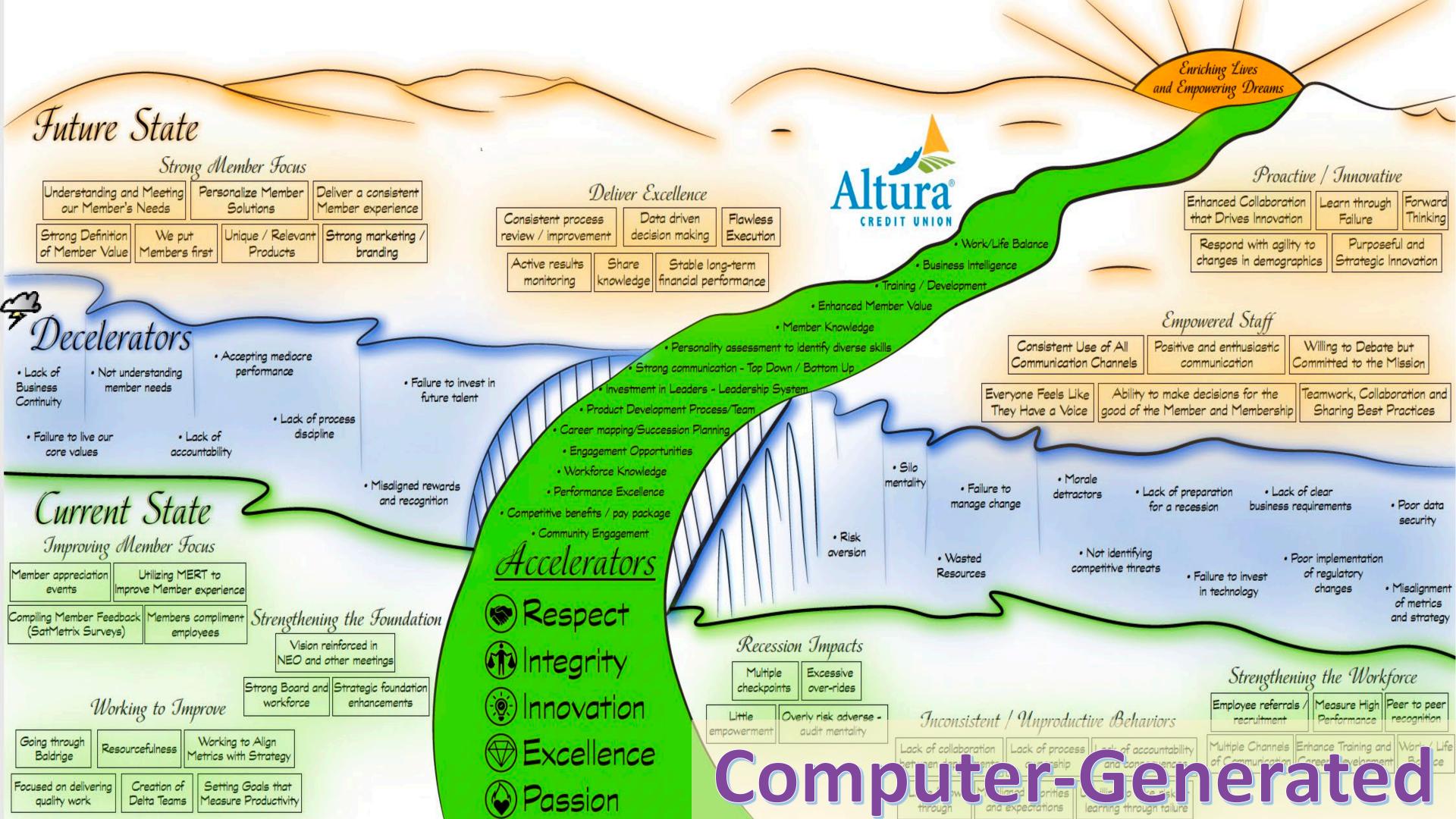
- Reactionary form of leaders
- Lack of trained leadership
- Sense of "false" transparency when decisions have already been made
- No voice at the table
- Us against them mentality -staff vs. medical staff, staff vs. admin,
- Lack of reward and recognition lack of appreciation
- Perceptions of chaos / conflict

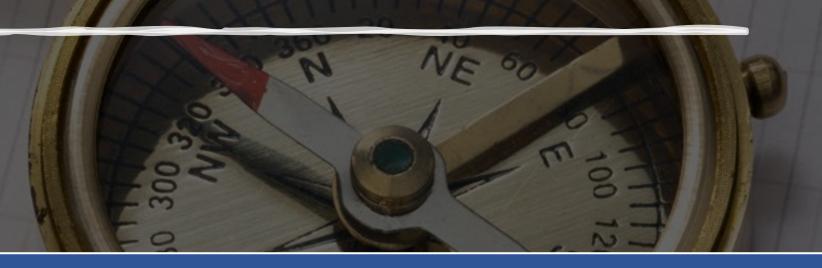


Culture Mapping

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 - Decelerators (what could impede a healthy culture?)
- Convert the team's Culture ROADmap to a graphic depiction of your current and desired state cultures







Managing the culture intentionally leads to stronger organizations that produce better results!

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Studies show that 60-70% of change initiatives fail to meet desired outcomes. A Deloitte study shows that the major cause of this is neglecting to understand organization culture around risk and change.

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Culture mapping can help leaders understand current culture and address the "soft stuff" that often derails change initiatives.

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Managing the culture intentionally leads to stronger organizations that produce better results!

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Culture mapping can help leaders understand current culture and address the "soft stuff" that often derails change initiatives.

Culture mapping can help ensure organizational resiliency.

What is Organizational Resilience?

 Organizational resilience is an organization's ability to withstand and adapt to disruptions, challenges, or crises. It involves an organization's capacity to respond effectively to unexpected events, recover from them, and even thrive. Organizational resilience encompasses various elements, including:

- Risk management
- Business continuity
- Crisis management
- Flexibility and adaptability
- Leadership and governance
- Employee well-being
- Technology and infrastructure
- Supply chain management
- Stakeholder engagement
- Learning and Improvement



How does Culture Impact Resiliency?

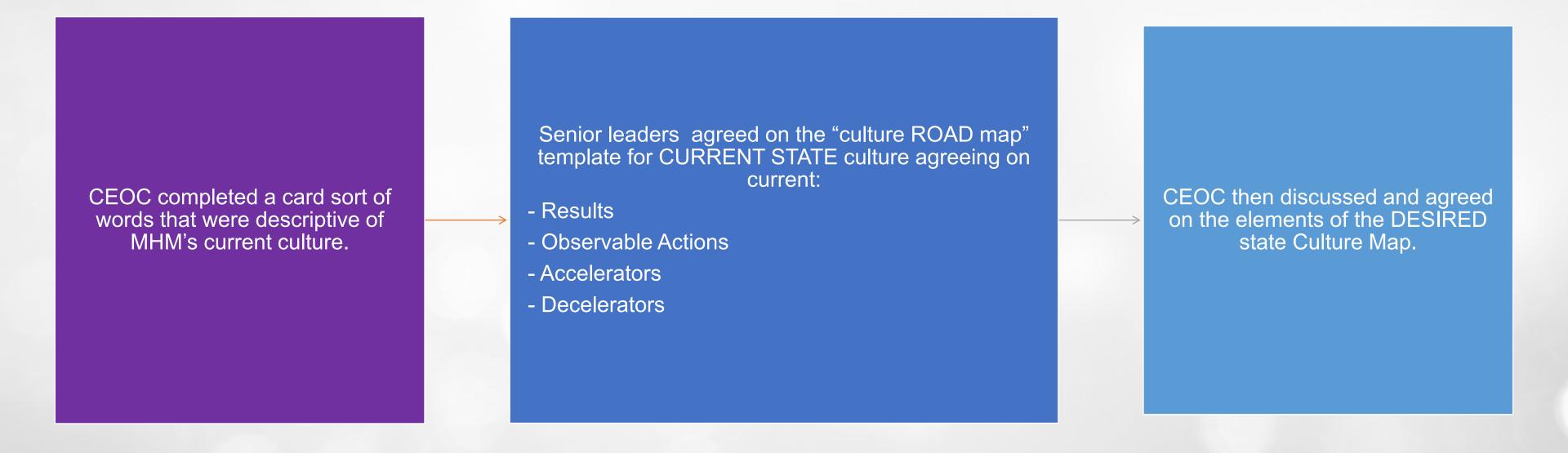
- The culture of an organization, including its values, beliefs, behaviors, and attitudes, can either enhance or hinder its ability to respond to disruptions and challenges effectively.
 - Leadership and decision-making
 - Communication
 - Adaptability and innovation
 - Employee engagement and well-being
 - Trust and collaboration
 - Learning and continuous improvement
 - Ethical behavior





"Serving Humanity to Honor God"





Observable behaviors:

Product and Service Results:

- Vaccine immunizations 70%ile
- Diabetic care A1C
- Ped sealants -
- Preventative appointments –
- Community Impact Results
- No shows
- Legislative agenda results 220 bills became state law of the 1400 in HC
- Improvement outcomes

Finance:

Silos

- Audit results
- Adherence to budget
- Expenses to budget

similar task)

(external)

and within MHM

external stakeholders

through COVID

Interpersonal relationships

Investment portfolio performance

easier to measure clinical care

We don't review organizational results across siloes

• It is difficult to create standards for all of our work – it is

We have parallel initiatives (e.g., WN and Psych doing a

We "own" things within departments rather than at the MHM

People become defensive / territorial about relationships

We make grants and contracts with external partners in a

We don't have a full view of what other departments are

an aligned way about our collective activities

doing, making it difficult to talk to external stakeholders in

We can't describe who we are as MHM to ourselves or to

behaviors and results – unable to constructively address

Emotions tied to not being involved in a meeting – may

Avoid addressing conflict that results in negative

Relationships in some departments have improved

feel exclusion was intentional or not feeling valued

siloed fashion which causes confusion for external partners

Days in accounts payable

Competitive

Everyone fights for the right to survive – we compete for

\$ funded to partners

Funded partner growth

Customer - Experience Results:

Grantee perception report

Growth:

Patient and Customer Satisfaction - %ile

Internal customer survey (Acct. / Communications)

WN relationship measures (internal measures)

Patient encounters - clinic and regional ops

· Subscription sites, social media results

- We want to be everything to everyone we don't have guardrails, so we are pushing against each other
- Lack of a coherent strategy results in lack of alignment so we "push each other around"
- Every person has to be in every meeting there is not trust that you will get the needed information
- Territorialism around office space, equipment, etc.

Bureaucratic

- We tend to want to make a policy for everything, so we don't have to deal with soft things
- Bureaucratic–We have approval policies where we ask good questions and resolve issues and yet, at times, the approvals get kicked back until things have to go to a senior officer. Processes get misused.
- Policies and processes are randomly applied
- People are not held accountable to work through processes – do workarounds that cause frustration
- We see things in black and white and don't hear what our partners are saying – we are inflexible
- We are bureaucratic in our processes that don't work for our partners – we don't hear our partners

Reactive/Impulsive

- Wait until something happens then we go to work
- Funding is still sometimes not aligned with strategy. We still make some impulsive decisions in funding because we are not disciplined around process,
- Senior leaders don't always stand up to the board or to other leaders – feels like the employees are not always supported in decisions that have been made.

How we are unique!

- Paid employees at 100% through COVID week off at Christmas
- Invest in social events mandatory fun.
- For 25 years have talked about MHM doing what no other organization does.
- Demonstrate ministry to the least served to make their
- No other organizations really do all that we do. 80 WNs, advocacy, community funding, clinical care, etc. -A non-profit that owns a for-profit entity that provides its income.
- Don't do collections take no public funding
- Bring people together in a way that no one else can convener and funder
- Committed to the social determinants of health catalyst in community development
- Provide health care that no one else does

People Results:

- · Employee Engagement %ile ranking
- Turnover
- Time to fill
- Workforce engagement in PI projects

Leadership Results:

- COVID relief funding and impacts
- Regulatory results (lab, pharmacy, etc.)
- Corporate sponsorships
- Lead the creation San Antonio State Hospital
- \$100M in community mental health grants
- Special initiatives (So. Texas Crisis Collaborative, Nursing School funding, etc.)
- Peer review results -
- Board review results

Mission-driven

- Passionate about their connection to missionverbally express their commitment to mission
- People say they stay at MHM because they get to serve the community in ways that make their lives better. We hear this through surveys and through rounding.
- Leaders may not always articulate their passion around the mission – may appear less passionate (head vs. heart)
- People work to find a way to contribute in any way we can – that is good enough for now

Spiritual

- Life events always result in leaders reaching out to them - being involved and engaged in their personal life
- Donating PTO to those in need
- Partner with Methodist church have our own pastors
- Express your spirituality in the workplace we are able to live our faith

- A meaningful, powerful mission
- Getting the right people in place to be part of decision making (POS team for example)
- Response to COVID have a key focus resulted in defining processes, pulling together
- Employee engagement improvement
- Communication world class
- Defined strategy

conflict.

- The resources we have (\$, opportunity, people)
- Regulatory freedom
- Legislative agenda ability to lobby
- Leaders identifying the need for tools and equipment
- Having Regional Ops, connections to churches in all 74 areas
- Effective prioritization that results in cross-functional collaboration

- Lack of clear understanding of who we are and what we want to be lack of cohesiveness
- · Lack of defined levels of empowerment in decision making
- · Lack of clear measures
- · Lack of reward and recognition systems that support our strategy and culture
- Lack of accountability
- Timelines that we are expected to work within sometimes limits us in do the best possible work –reduces learning and integration
- Lack of systematic processes
- · Data governance reliability, knowledge management
- Not having a forum to capture ideas and truly innovate
- Failure to effectively prioritize and collaborate

MHM- Desired State Culture ROADmap

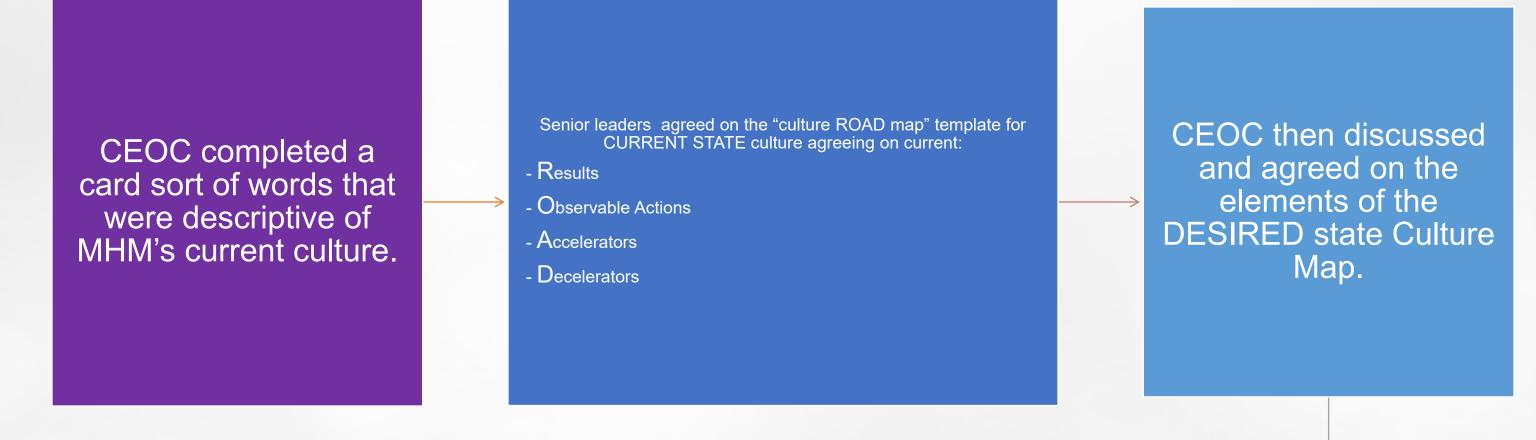
- Top Decile Product and Service Results:
- Top Decile Customer Satisfaction and Engagement
- Top Decile Workforce Retention, Satisfaction and Engagement
- · Outstanding performance on all leadership results
- Outstanding performance on indicators of Financial Stewardship
- Embracing our uniqueness and living the mission, vision, values
- Living our Spirituality
- Building and Maintaining Trusted Relationships
- Embracing the MHM mission, vision, values
- Building and maintaining trusted team relationships leading to collaborative work
- Working Collaboratively
- Delivering Organizational Excellence
- Building Strong Community Relationships
- Advancing our mission and vision through organizational excellence

- STAT projects
- · Focused organizational learning
- Quarterly Performance Reviews
- Highly Engaging front line team members to implement improvement
- Trained facilitators, PE methodology and Techniques
- · Clear strategic plan
- · Goal alignment to front-line employees
- · Clear articulation of the strategic plan as it continues to develop
- Resources (people, money, technology)
- SOS (Strategic Operating System)
- Leadership support
- Policy and advocacy work
- Board learning sessions
- HCA partnership
- EDI efforts
- Listening to our missional population (using the wisdom of the people we serve)
- Celebrating successes
- Asset-based community development
- Broad and deep communication
- Leveraging the MHM successes, legacy, track record
- Leveraging the faith foundation
- · Developing and leveraging partnerships that support the plan
- Authenticity leading to growing trust and collaboration

- Misaligned reward and recognition
- · Understanding or misalignment of goals
- · Failing to take the time to recognize the talent of MHM staff
- Failure to build a strong, cohesive leadership team -
- Not holding people accountability to highest standards
- Tolerating bad behavior
- Failure to invest in building trust
- Optionality allowing process to not be followed
- Fear of conflict

Decelerators:

- People failing to "let go' of the past accepting the status quo
- Failing to intentionally invest in building future leaders and team members of value (allowing time, \$, stretch assignments, etc.) aligned to organizational direction
- · Lack of innovation
 - Fear of risk taking –
 - Inability to recognize changes in our environment
- Too many competing priorities / failing to prioritize
- Scope creep in projects
- Not assuming the best of intentions (storytelling to ourselves in a negative way)
- Failure to delegate (bogs us down and prevents growth of others)
- Lack of Discipline around processes
 - Implementation
 - Training
 - Discipline
- Lack of change management



CEOC shared the current and desired state ROADmap templates with Leadership Excellence team and obtained input and suggestions for refinement

- Top Decile Product and Service Results:
- Top Decile Customer Satisfaction and Engagement
- Top Decile Workforce Retention, Satisfaction and Engagement
- Outstanding performance on all leadership results
- Outstanding performance on indicators of Financial Stewardship

Embracing the MHM mission, vision, core values

- Team members lead with our spirituality by supporting activities that nurture and enable the demonstration of spirituality.
- Team members ask themselves if the behaviors they are demonstrating at that moment align with the MHM mission and role model the core values in our interactions with each other.
- We value and celebrate the uniqueness of MHM that enables us to deliver on our mission.

Building and maintaining trusted team relationships leading to collaborative work

- Communication is open, transparent, and candid. Constructive conflict is encouraged, supported, and effective crucial conversations become the norm and not the exception.
- Team members are aware of and actively participate in activities that enhance diversity, equity and inclusion within MHM. We are recognized as a leader in this area.
- We embrace shared leadership and ownership of goals and initiatives. Leaders have established the expectation for collaboration as we work together to achieve collective decision-making.
- All team members have clarity in their roles and responsibilities in contributing to a collaborative strategy, project, and actions.
- Decisions and outcomes are widely communicated through multiple forums (operational rhythm), platforms and media.
- Team members at all levels perform effectively because they are informed/aware of key decisions as well as things related to day-to-day work and understand how this impacts them.
- Team members are informed about team member-inspired improvement and innovation. Cross-departmental recognition is evident and serves as a reflection of mission/vision/values. (WE CELEBRATE WINS!)

• Have a specific, focused, building block strategy

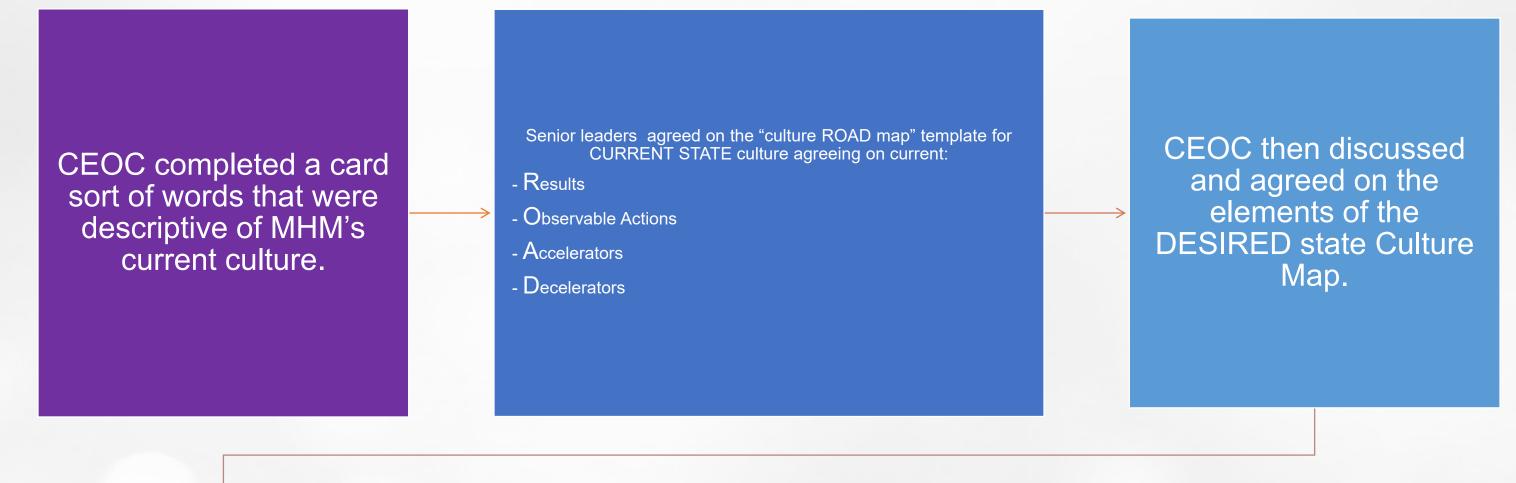
- Nurture and reward/encourage a culture of shared leadership
- Listen to those we are charged to serve and respect their voice
- Align goals from the strategy to front-line employees to create shared ownership
- Communicate broadly and deeply delivering consistent messages
- Leaders role model MHM Core Values as defined
- Fully engage all team members
- Intentionally build trust and collaboration
- Celebrate successes and learn from failures
- Build internal capabilities, capacity, and process discipline

Building Strong Community Relationships

- We prioritize actively listening to the communities we serve to encourage transparency by:
 Convening partners through multiple touchpoints including collaboratives working across sectors.
 We explain our purpose, listen, show enthusiasm for inputs, and ensure all voices are heard.
 We engage with current UMC in Rio Texas Conference by actively listening to challenges and stories around their journey in ministry, then solicit and respond to their ideas.
- Team members identify the barriers to community partners working with MHM and work organizationally to remove those.
- We regularly analyze and focus on stakeholder requirements and determine how we will effectively collaborate with them and with each other.
- MHM and our community are adept at implementing best practices and innovation to achieve equity.

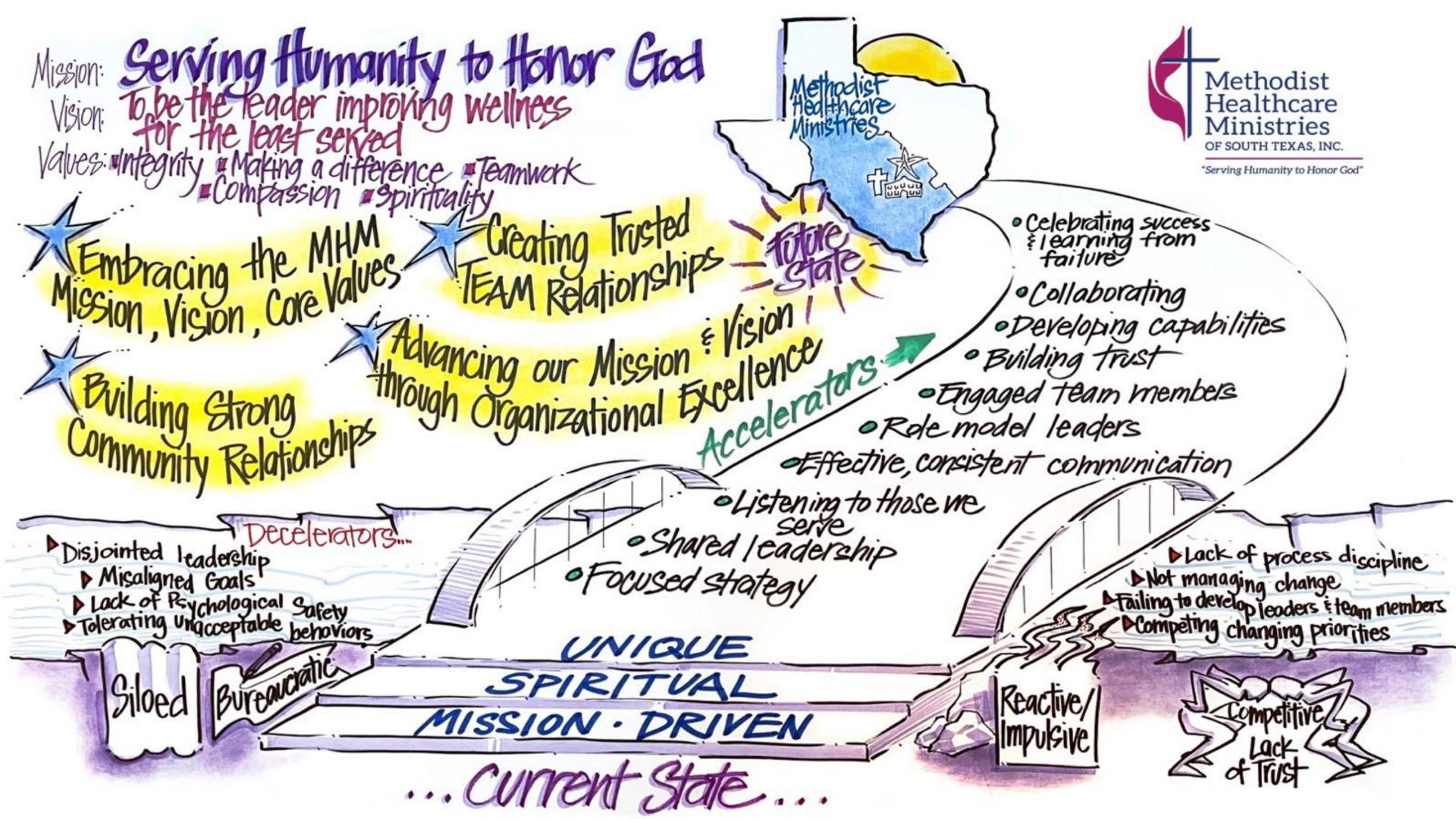
Advancing our mission and vision through organizational excellence

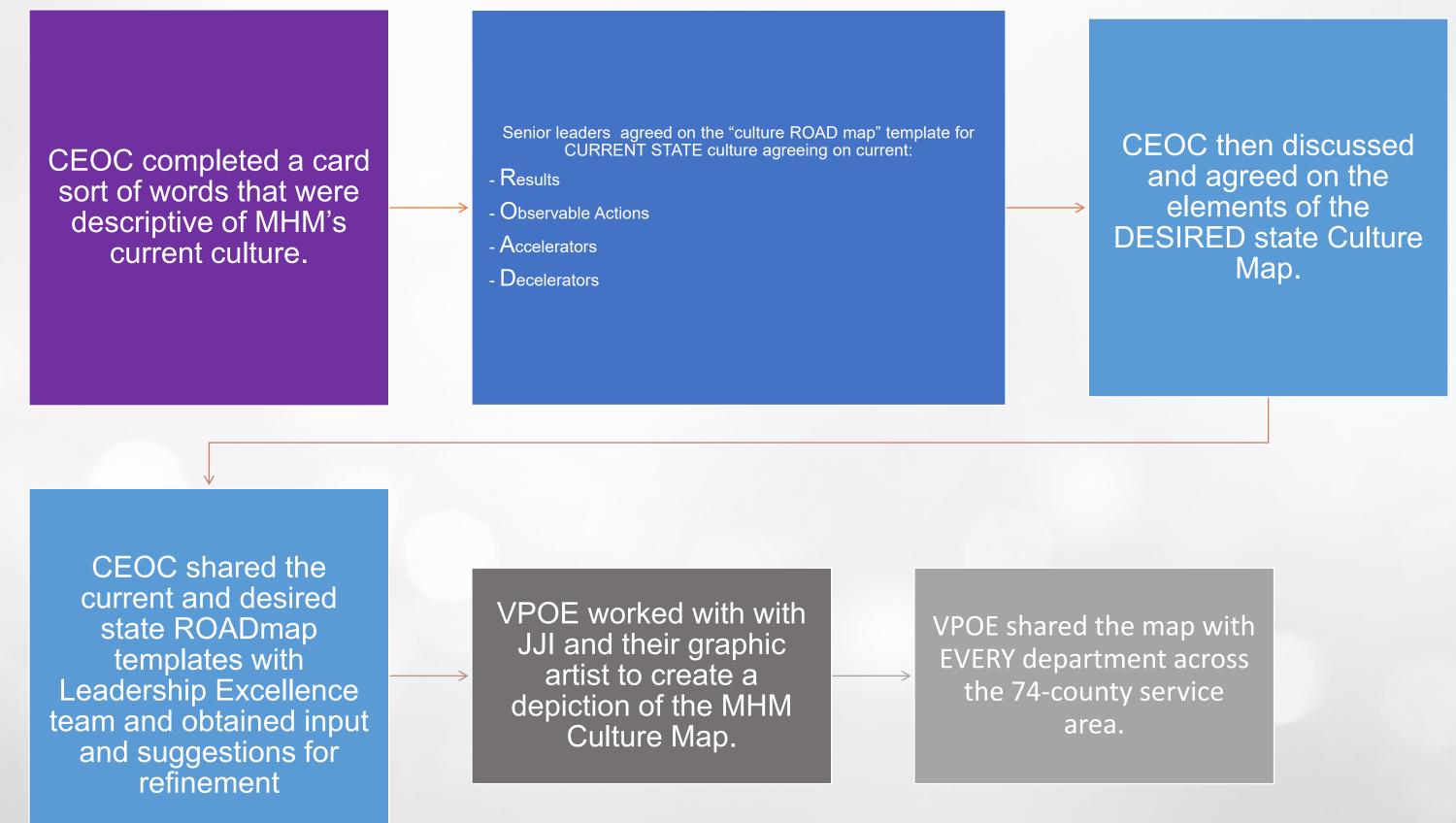
- A learning environment is modeled, encouraged and supported. Team members receive training and development to be successful in their current position and prepare them for their next role.
- We are a process-focused organization as evidenced by:
 - Design, measurement and improvement of key processes
 - Disciplined execution of processes, systems, and structures
 - Reporting of missed goals, errors, and barriers without fear of retribution
- Team members demonstrate continuous improvement it is the expectation and the reality. Team members recognize, evaluate, and are empowered to implement changes to processes impacting their own areas of work.
- Team members are encouraged, enabled, and involved in identifying and driving improvements and innovations impacting the larger organizational processes through involvement of key stakeholders.
- Team members recognize each other through both internal and external approaches. People feel recognized and valued for the work they do.
- Failing to build cohesive leadership
- Misalignment or misunderstanding of goals
- Failing to establish trusting relationships and the creating a safe psychological space
- Creating an environment where team members fear retaliation for addressing conflict
- Not holding people accountable—tolerating bad behavior or optionality
- Failing to take time to recognize and reward contributions and value team members
- Not investing in building future leaders and valued team members aligned to organizational direction
- Not being disciplined around processes, implementation, and development
- Ignoring change management principles
- Competing priorities/failing to prioritize—Shiny object syndrome—shifting attention to new ideas without accounting for the impact on existing commitments



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VPOE worked with with JJI and their graphic artist to create a depiction of the MHM Culture Map.











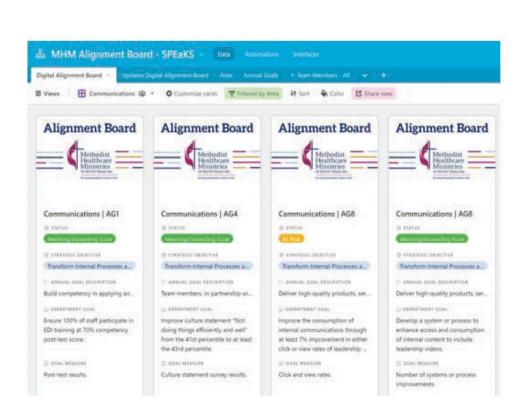
Action Planning – how to move from current to desired state

- Brainstorm ways to transition the culture
 - Be specific
 - Be innovative
 - Follow the rules of brainstorming
 - Give people time to think individually
 - Allow everyone to talk openly without restrictions
 - ✓ Use roundtable to ensure everyone offers an idea – people can pass after round one
 - ✓ Focus on QUANTITY of ideas
 - Record ALL ideas
 - ✓ Do multiple rounds until everyone passes
- Create an affinity chart grouping similar ideas
- Allow people to "vote" on ideas
- Prioritize ideas and define timing

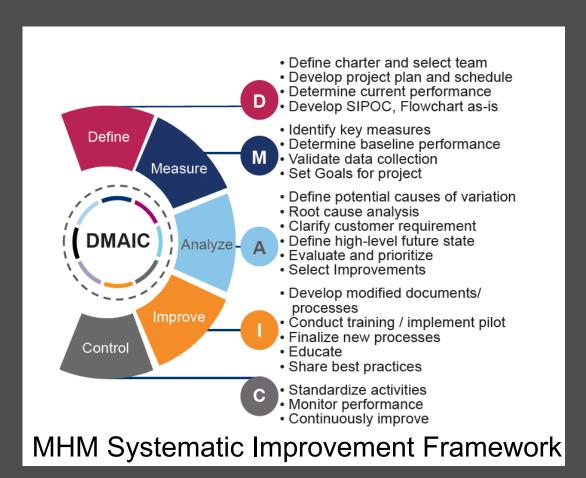
Action Planning Brainstorming

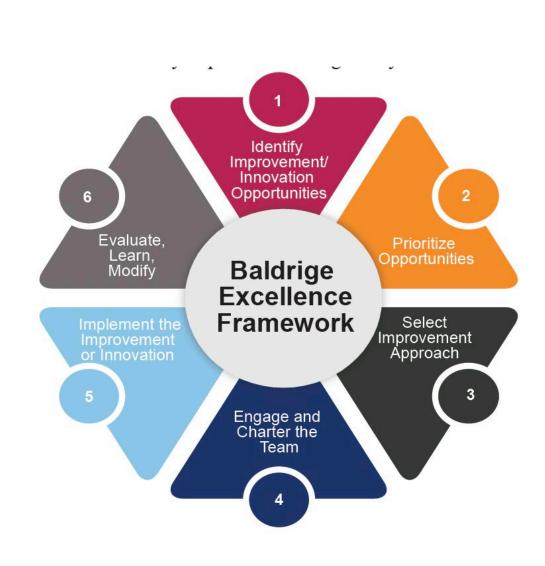
- Leaders communicate Board activity at CEO's Council so that information can be cascaded. JDI Jaime
- Schedule Board learning sessions on regular basis JDI Diane
- Start meetings with recognition both functional and cross-functional
 JDI Jan/David add to the MHM meeting agenda
- Listen to and consider the unique needs of our staff when creating policies and procedure to support them in the work they do to carry out the mission. RIE Q2
- We intentionally teach Crucial Conversations across the organization through our learning programs JDI Bridget (in person work, Q3)
- MHM invests in improvement and innovation ideas through resource allocation to enable implementation. Oanh JDI
- Ensure these Innovations and improvements are deployed and shared widely both inside and outside MHM. JDI – Jessica and JJ team
- We operationalize our diversity plan and highlight activities internally/externally through annual reports, PR campaigns, and regularly track and report on performance compared to benchmarks that demonstrate DEI (e.g., board data collection, % of budget spent on SWMB, etc.). We Intentionally make team members and community aware of our efforts (e.g., announcing efforts that support our goals such as activating a DEI policy.) Oanh JDI
- Be honest and authentic in all conversations (promote open dialogue)
- Dream big and celebrate the learnings from failure
- Develop the top 3 priorities for 2021 for MHM
- Encourage team members to share work improvements and then support them as they evaluate them.
- Fully implement and embrace the project management process
- Fully implement and embrace the operational rhythm
- Define the roles and responsibilities as we launch initiatives under the strategic plan

- Create and implement an idea program and a way for team members to suggest ideas (STAT team)
- Agreeing upon and consolidating our data repositories
- Celebrate the reward and recognition of the team members on those projects (re: STAT teams)
- To sustain the gains that emerge from improvement projects
- Communicate our goals and Q1 strategic implementation actions across MHM
- Share the action plan around the EDI work to Board and all MHM team members and begin the implementation.
- Revamping the Excellence Achievers program by implementing a formal reward/recognition platform (e.g., Terryberry) that will allow for regular and consistent reward/recognition efforts.
- Streamline priorities with feasible timelines
- In the next 90 days, we use the facilitators as well as we possibly can to weave them into the fabric of MHM
 - Make sure we try to drive team members from all areas and levels of MHM to make our improvement as effective as possible
- Develop and use a criteria to prioritize urgent vs. important projects/ actions/ activities, evaluate resource capacity, and focus on the essential.
- Find a way for our leaders to identify an accountability partner to practice challenging conversations with each other.
- Figure out how we can leverage the power of discomfort to sit in the discomfort as we process new information and experiences. We need to be okay moving through that or risk losing out on honest discussion.
 (Comfortable in sitting there with ambiguity rather than find a solution.)



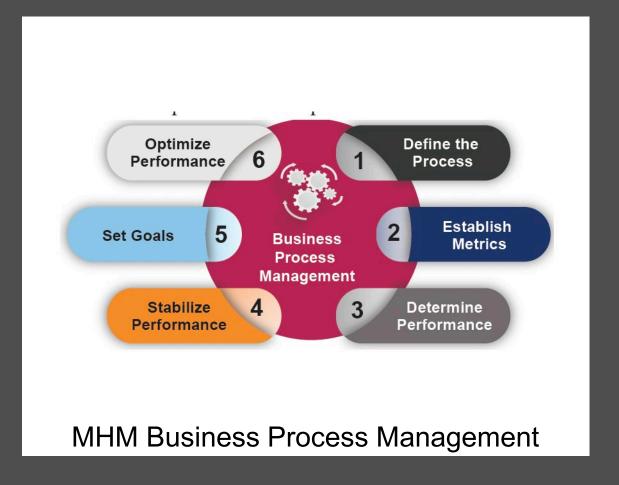
MHM SPEaKS Virtual Alignment Boards

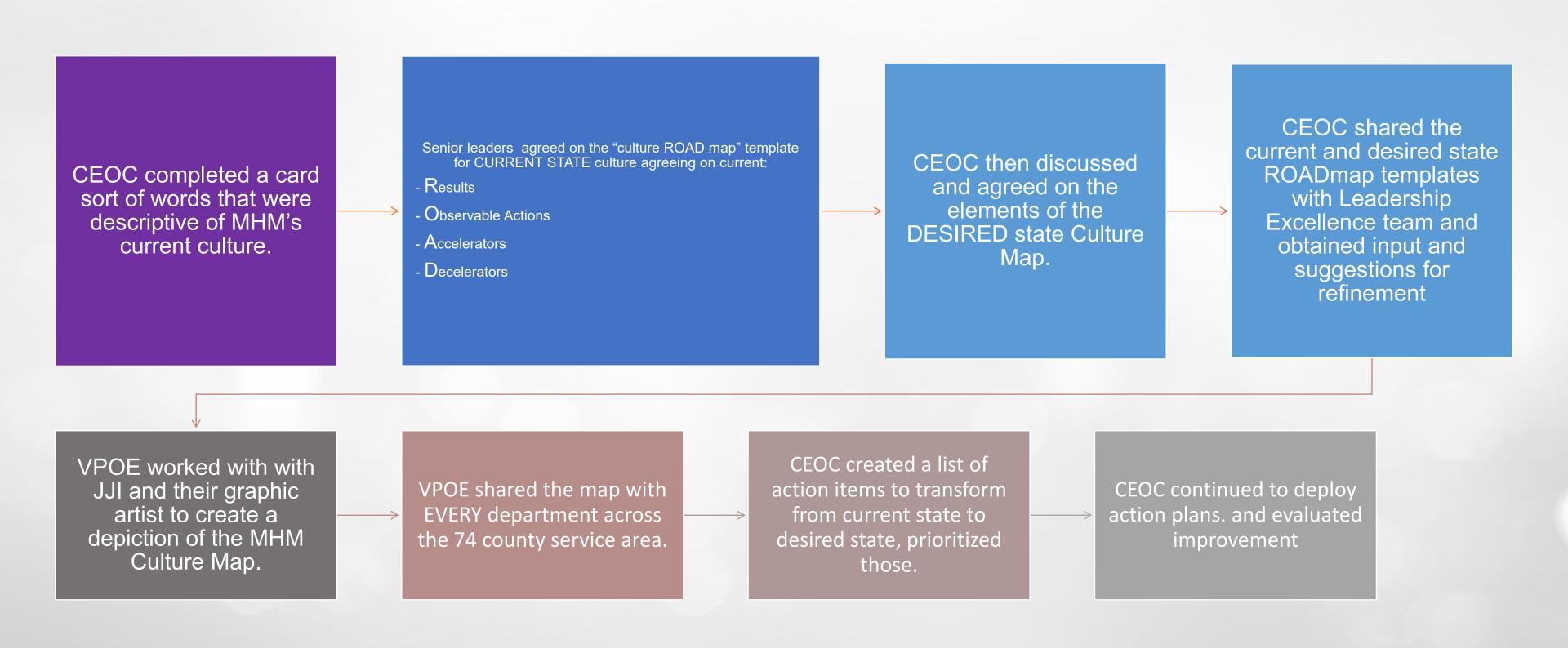




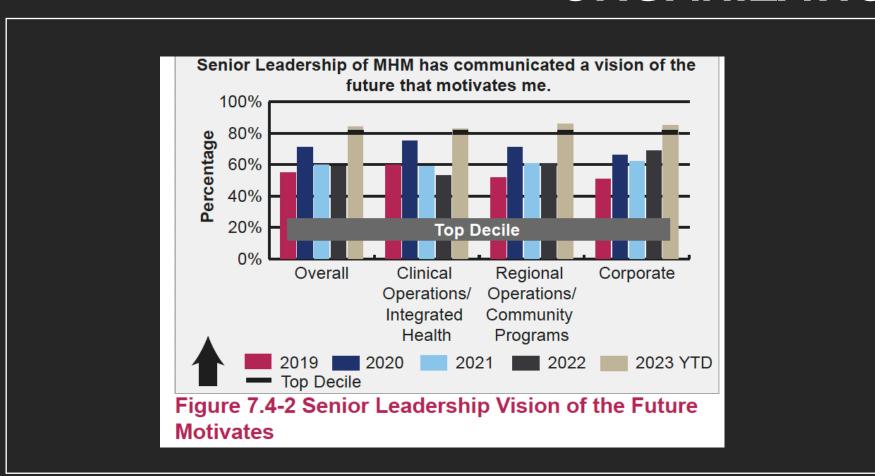
MHM Organizational Excellence Framework

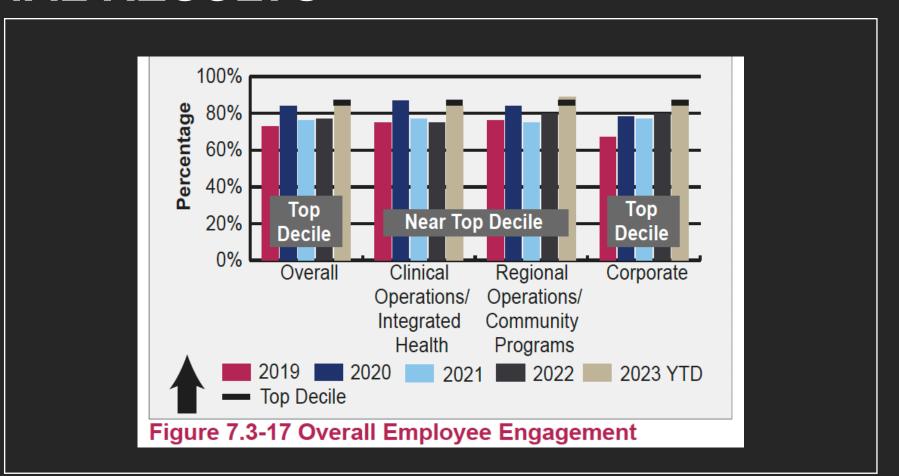


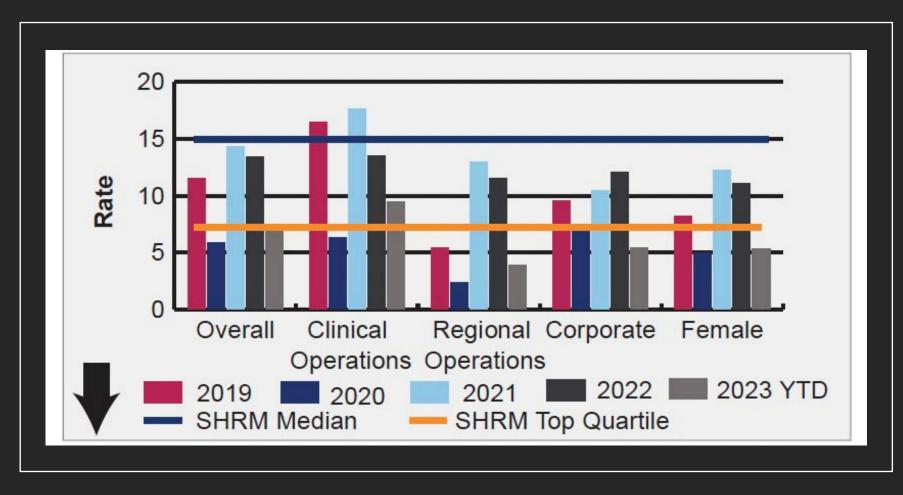


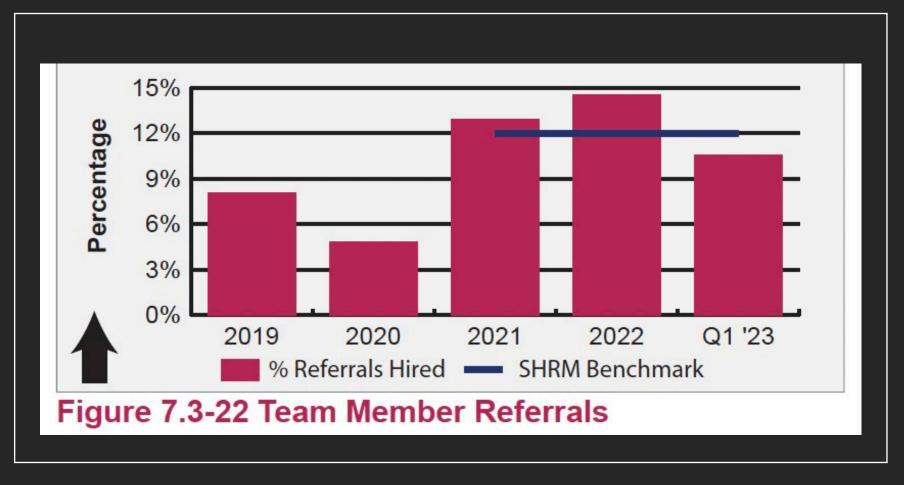


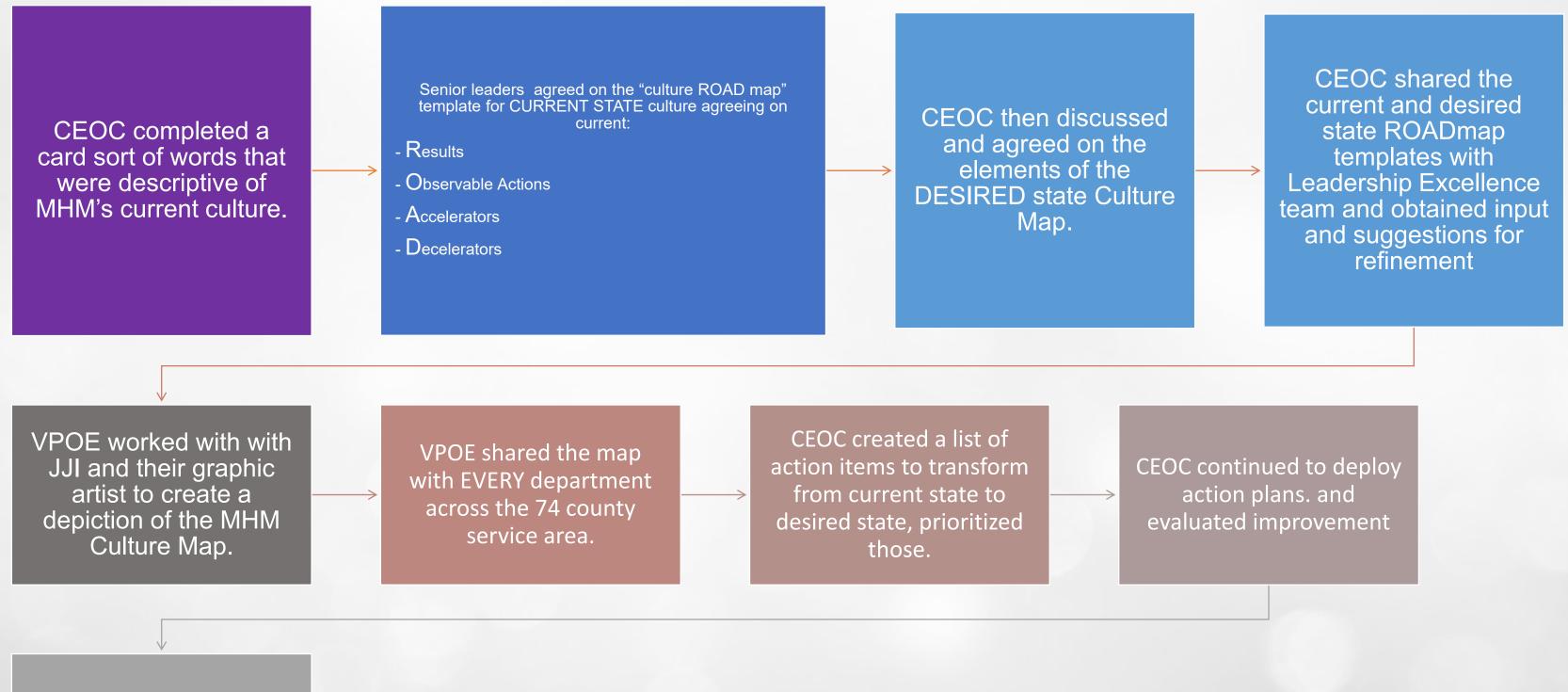
ORGANIZATIONAL RESULTS





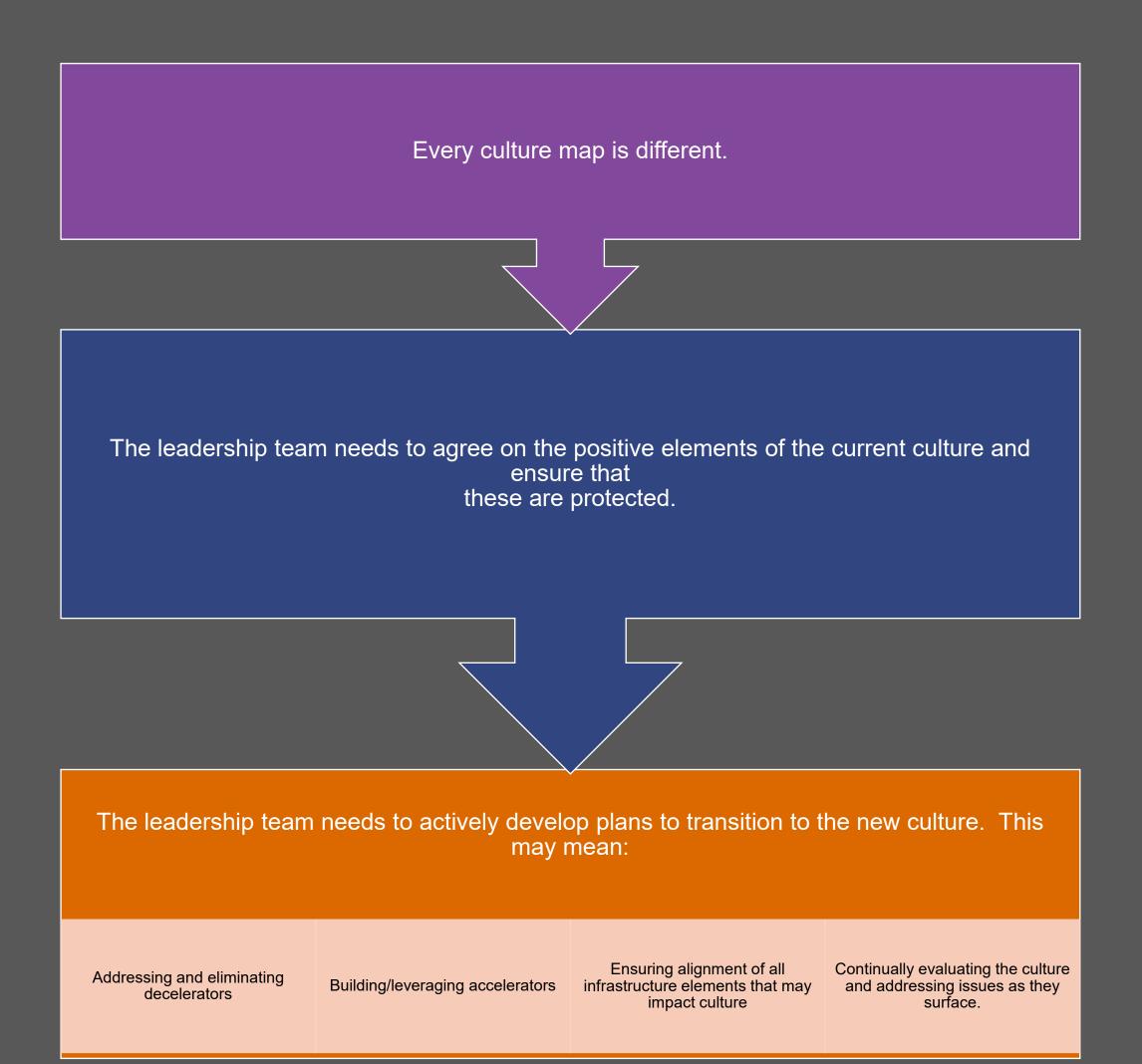






Given the improvement that has been achieved, in 2024 the CEOC will create an updated culture map.

Using the Culture Map...





Panelist Questions and Discussion



Oanh Maroney-Omitade
Vice President of Organizational Excellence
Methodist Healthcare Ministries of South Texas



Al Faber
President and CEO
Baldrige Foundation
(Moderator)



Travis Lozier
Chief Culture and Quality Officer
Jordan Johnson, Inc.



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Quality and Culture

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