

airiti

Consultation on Organizational Core Values

Rick Singleton

BA, MDiv, DMin, CT

Regional Director, Pastoral Care and Ethics Dept., Eastern Health, Canada

Professor, Queen's College Faculty of Theology, NL, Canada

Eastern Health (EH) came into existence in 2005. The ethics service of EH carried out an extensive consultation to articulate the Core Values of the organization. This consultation has stimulated discussion, allowed for education, and provided a substantial foundation for the ongoing ethics education, policy review and development, and case consultations. This article provides background to EH. It describes the consultation process to discern the Core Values and the efforts made to respond to the request from participants to articulate outcomes and behaviours for each Core Value.

The Context of Eastern Health

Newfoundland and Labrador joined the Canadian confederation in 1949. It is the country's easternmost and youngest province, but also the poorest. Its landmass is three times larger than the other three Atlantic Provinces combined. It is approximately 10% larger than the landmass of Germany. Although rich in natural resources, Newfoundland and Labrador's history has been one of economic hardship and disappointment. Historically the fishing industry has been the backbone of the provincial economy. However, the collapse of the cod fishery in the early 1990s dealt the province a devastating economic blow from which it has yet to recover. There have been some encouraging economic signs of late, with the development of the offshore oil industry and mineral discoveries in the north. 2008 was a particularly positive year as the high oil prices provided the provincial government with significant surplus to the provincial economy. The oil industry had great promise for expansion and secondary processing. Other resources and industries show signs of drawing on the positive business environment and announced planned developments. Unfortunately, the world wide down turn in the economy has slowed and stalled some of the momentum. The provincial unemployment rate continues to hover around 17% in rural areas. For many years, the population was shrinking as people left the province to find employment. The present population is just over 500,000. Many from rural areas who want to stay in the province often move to St. John's, the provinces single metropolitan area. Forty per cent of

the province's population now resides in metropolitan St. John's and in the immediate surrounding areas.

The delivery of health services in Canada is governed under the terms of the **Canada Health Act (CHA)** of 1984.¹ The **CHA** enumerates the five fundamental principles (universality, accessibility, portability, comprehensiveness, and public administration) to which all provincial health insurance plans must adhere. While the **CHA** specifies that the provision of health care is a provincial responsibility, it aims to preserve a single tiered system by setting conditions that the provinces must meet in order to receive their full share of federal funding under the **Canada Health and Social Transfer (CHST)**² program. The **CHST** transfers tax monies from the federal coffers to the provincial governments to offset the expenditures associated with the delivery of health care and other social services.

Like most other provinces, Newfoundland and Labrador has devolved some of the responsibility for the delivery of health care to regional health authorities established throughout the province. Initially, the province accomplished this by creating two parallel structures – one for institutional health and the other for community health. Six Institutional Health Boards were established in the 1990s to provide hospital and long-term residential services. These institutional boards were complemented by four Health and Community Service Boards responsible for addiction services, child and youth services, mental health services, continuing care, family and rehabilitation services, and health protection and health promotion. Initially, two Integrated Boards served the more remote northern regions of the province. In 2005, the province enacted another major restructure to reduce the twelve institutional and community health care boards to four large integrated regional health authorities that provide comprehensive coverage of services.

Eastern Region Integrated Health Authority, known as Easter Health (EH), is the largest of the regional authorities. It provides health services for over 60% of the population, and has a workforce of 12,000 employees. The budget (which is over a billion dollars), represents over 25% of the provincial budget.

Establishing an Ethical Corporate Culture

The genesis of our organization's ethical corporate culture can be traced to key administrative decisions made over a decade ago when some of the legacy organizations

¹ Canada, *Canada Health Act*, 1984, c. 6, s. 1.

² Canada, *Federal-Provincial Fiscal Arrangements Act*, 1985, c. F-8.

were being formed. The largest of the legacy organizations, the HCCSJ, was first formed from six autonomous hospital boards; four public and two with religious affiliations to the Sisters of Mercy (Roman Catholic) and the Salvation Army respectively. While the corporate and administrative consolidation of these distinct corporate entities presented some challenges at the outset, the manner in which this initial process was facilitated set the tone for the values based organization that has emerged.

The original CEO and Executive Team of HCCSJ were sensitive to the need for collaboration and compromise when a number of distinct cultures were to be melded together. Individuals with an interest and involvement in ethics were asked to develop and lead an organizational values discernment process. The process was designed to be sensitive to the faith based values of the two religious groups represented, while at the same time recognizing the need to recognize and honour broader secular values. The discernment process involved the utilization of questionnaires, focus groups, and interviews with individuals from across the various organizations represented and at every level in the institutional hierarchy, from senior management to support staff. Patients, families, and members of the community were invited to participate. Respondents were asked to identify both the strengths and weaknesses of the organizations for which they had worked previously, and to discuss the kind of organization and the organizational values they would like to see in the new structure. Out of this discernment process, five core corporate values were identified: respect for persons; caring community; justice and fairness; collaboration; and, pursuit of excellence. The facilitators for the values discernment process not only identified the core values, they also drafted a definition for the value and one paragraph descriptors for each value. As an example

Respect for Persons

We respect the dignity of all persons

We, the members of the Health Care Corporation of St. John's, respect the needs and rights of clients/patients and their families, staff members including physicians, volunteers and others. We value keeping client information confidential. We believe that providing information to clients so they may make informed choices is of primary importance. We strive to maintain privacy for clients and their families and we respect cultural, religious and ethnic differences. We believe that clients should be supported in maintaining their independence as much as possible. We value health care that addresses the needs of the whole person and places clients and their families at the centre of our service.

airiti

Many organizations produce mission statements with accompanying corporate values. However, if this articulation of values is to have impact beyond the mission statement that adorns the wall of the corporate board room, steps must be taken to operationalize those values in the day to day activities of the institution. Ethics committees were established and supported as a resource to clinical programs, an Administrative Ethics Committee was established, and an ethics consultation service was created.

Throughout the life the HCCSJ the Core Values came to be used as real measures in planning, decision making, and ethics consultations. Over the life of that organization staff, managers, patients, families, and critics came to refer to the Core Values to comment of services. Other legacy organizations of EH underwent similar processes to discern their Values; they had similar experiences.

The Consultation: Core Values Exploration

When EH was created in 2005, it was expected to hit the road running. It was expected to generate a full strategic plan for 2005 to 2008. Values are essential to a strategic plan and the prior experiences had led people to appreciate the place of Core Values. EH was created from six previously separate health care boards. This was the second major restructuring in less than a decade. Many lessons had been learned in the previous restructuring. We knew that we could not simply cut and paste from the core values of the legacy organizations. We knew it would take time to discern our values, and we knew that some articulation of values were needed for the initial strategic plan.

In the organizational structure of EH, the ethics services were formally placed in the Regional Pastoral Care and Ethics Department. Pastoral care professional had played a strong role in advancing ethics activities in all the legacy organizations. A plan was developed to draft a set of Values for the strategic plan by referring to the articulations of core values from the six legacy boards. The plan also committed to a consultative process to articulate the Core Values for EH prior to the second round of strategic planning which would commence in 2007.

Our ethics consultation process originated as a service to assist with individual clinical cases. Over time we found that the process worked well to deal with systemic issues that seemed to give rise to some clinical cases. We had further discovered the process and format to be effective in dealing with issues and challenges of an administrative nature such as

fundraising, smoke free policy, and products available in the cafeterias. Two features of our ethics consultations that we needed to sustain in this bigger undertaking were the "right mix of participants" and "safe environment for open discussion". We knew the right mix was broad representation from within EH and the community. The safe environment for discussion had to ensure that employees and the public could make comments, and in some cases use examples of negative experiences, without fear of reprisal.

The Pastoral Care and Ethics Department organized the values consultation. The venture was named the "Core Values Exploration", which was carried out through the spring and summer of 2007. This consultative process used a variety of activities to identify what employees and clients deemed important for EH. Feedback was collected on the content, understanding, and recommendations for the Core Values.

The consultation process included development of materials for interviews, surveys, agenda item on staff meetings, coffee break discussions with staff, and facilitated focus groups with consumers.

The following description of values was developed and distributed to give focus in meetings, interviews, and surveys.

Values are basic convictions that give meaning and direction to the things that are important. We might say that it is because of values we can identify what is important to us as individuals, groups and society. Values are based upon beliefs and attitudes. They involve what is desirable, and help us know whether we are working in the right direction to bring about what we really want.

The consultations were carried out in all portfolios of EH. We had feedback from nearly 200 staff meetings where managers had facilitated the discussion. There were 17 focus groups which consisted of staff and clients, over 400 interviews completed by Pastoral Care and Ethics staff and pastoral care interns, and over 1100 electronic surveys completed through the e-mail distribution and an on-line site.

airiti

Dr. Fern Brunger, a bioethicist with Memorial University and EH was a tremendous resource to the Pastoral Care and Ethics Department working group as they distilled the thousands of pieces of feedback and endeavoured to craft a draft of the Core Values.

Working group members reported that the vast majority of participants in sessions indicated that they wanted more than broad based statements. They wanted some specific outcomes and behaviours identified along with the beliefs and attitudes. The working group did undertake to respond to this request. The initial drafts included the values, a definition, and related outcomes and behaviours. Feedback on the initial drafts was very positive. Without too much delay, a final draft was prepared for the Executive Team in October. The draft was accepted and approved for use in the Strategic Planning Retreat in November 2007 (Appendix A).

As EH continues to evolve, processes are being in place to enhance performance, efficiency and accountability. The Core Values have been integrated to performance appraisals for all staff. They are a component of management accountability framework, and the ethics service has drafted a values based ethics framework for resource allocation decision-making.

To enhance the awareness of the Core Values, the Corporate Communications Department has drafted a communications strategy to promote the Core Values over the next three years.

The Core Values are used as a point of reference in ethics consultations regarding policy development and review, as well as clinical case consultations. Finally, it is worthy to note the Chief Executive Office used each of the Core Values as the major headings for the presentation of the Annual Report at the Annual General Meeting in 2008.

As EH continues to evolve, we know we will face new challenges. We will continue to use our Core Values to help us navigate the course towards the ***EH Vision: Healthy People, Healthy Communities.***

Appendix A Eastern Health Core Values

In 2007 Eastern Health underwent a values exploration activity. The Core Values identified are not new nor are they a radical departure from those of the legacy organizations. They are a reflection of our evolution as an organization and culture.

Core Values are basic convictions that give meaning and direction to the things that are important. We might say that because of values we can identify what is important to us as individuals, groups and society. Values are based upon beliefs and attitudes. They involve what is desirable, and help us know whether we are working in the right direction to bring about what we really want.

I. RESPECT

Recognizing, celebrating, and valuing the uniqueness of each patient/client/resident, employee, discipline, workplace, and community that together are Eastern Health

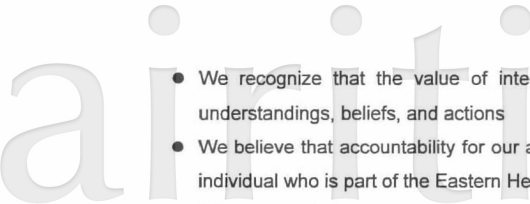
Outcome: WELLNESS

- We show consideration and appreciation for all people who are part of Eastern Health
- We treat our patients/clients/residents and each other with dignity
- We adhere to rigorous standards of privacy and confidentiality
- We show caring through consideration, compassion, and good will toward each individual who is part of Eastern Health
- We know that the wellness of patients/clients/residents, employees and communities is dependent on feeling respected and valued, and we act according to that knowledge
- We encourage and facilitate the balance of work and personal life, knowing that respect for self is as important as respect for others
- We recognize that in an integrated and holistic health care system, the individual components (people, disciplines, work places, and communities) are unique and valuable; we do not encourage a one-size fits all approach

II. INTEGRITY

Valuing and facilitating honesty and open communication across employee groups and communities as well as with patients/clients/residents of Eastern Health

Outcome: OPENNESS AND ACCOUNTABILITY

- 
- We recognize that the value of integrity requires being open and honest about our understandings, beliefs, and actions
 - We believe that accountability for our actions is key to integrity because any action by an individual who is part of the Eastern Health system will affect the rest of the system.
 - We value and demonstrate honesty in our interactions with patients/clients/residents and employees and in our communications with the general public, political leaders and the media
 - We consult with other team members, disciplines, and communities to encourage positive change in planning and policy development
 - We listen to others and demonstrate that we have heard by taking action
 - We take an approach of collaborative partnership across patient/client/resident groups, employee groups and communities
 - We are honest about our strengths and our limitations
 - We welcome discussion with the general public through our engagement with our political leaders and the media; we listen, we inform, and we learn through those discussions
 - We recognize and celebrate the fact that we are accountable to each other, to those in other employee groups, to our patients/clients/residents, and to our communities

III. FAIRNESS

Valuing and facilitating equity and justice in the allocation of our resources

Outcome: STEWARDSHIP

- We are responsible in our management of our resources
- We value and facilitate the just allocation of resources across patient/client/resident groups, employee groups, and communities
- We encourage excellence in best practices for using our resources wisely
- We act with the interests of future generations in mind
- We believe individuals and communities are empowered to articulate their own best interest

IV. CONNECTEDNESS

Recognizing and celebrating the strength of each part, both within and beyond the structure, that creates the whole of Eastern Health

Outcome: STRENGTH THROUGH DIVERSITY

- We respect the distinct knowledge and contribution of different aspects of the Eastern Health system

- We encourage and facilitate team work and collaboration across employee groups and communities
- We promote a spirit of open communication with the general public through active and positive engagement with our political leaders and the media
- We work to promote the integration of various parts of our system through communication and collaboration
- We facilitate communication and sharing of information and ideas within parts of the system
- We facilitate and promote internal and external communication, consultation and collaboration
- We recognize that the cultural, social, economic and environmental contexts of our various geographical communities affect, and are affected by, the work of Eastern Health, and we act with this in mind
- We feel connected with the system of Eastern Health in a broad and holistic sense
- We recognize that Eastern Health is its patients/clients/residents, employees, work places, and communities, and we are loyal to this whole

V. EXCELLENCE

Valuing and promoting the pursuit of excellence in Eastern Health

Outcome: DYNAMIC GROWTH

- We encourage and facilitate the ongoing professional and personal development of each individual who is part of Eastern Health
- We provide opportunities to students and facilitate continuing professional development across employee groups and communities
- Our growth is collaborative in intent: We continually expand our knowledge by learning from different perspectives across patient/client/resident groups, disciplines, and communities
- We recognize that employee competency is essential to excellence in performance and client satisfaction
- We promote safety for all
- We encourage capacity building within our communities to facilitate health and wellness
- We provide feedback to each other in order to refine best practices in health care
- We recognize that our goal is optimal wellness for patients/clients/residents, employees and communities and we act according to that goal

Correspondence

Rick Singleton

Regional Director, Pastoral Care and Ethics Dept.

Eastern Health

HSC, 300 Prince Philip Dr., St. John's, NL, A1B 3V6

tele: (709) 777-6959

fax: (709) 777-7612

e-mail: rick.singleton@easternhealth.ca