

A Study of Organizational Culture in the Leadership Teams

prepared for



December 11, 2013

Table of Contents

Executive Summary	3
Study Objectives	4
Organizational Concept	5
Methodology	6 – 8
Research Findings	9 – 12
Summary of Key Findings	13
Recommendations	14
Guide for Implementation	15
References	16 – 17
About the Consultants	18

Executive Summary

The purpose of this study is to explore the communication experiences of members on Mercy's Leadership Teams. Specifically, this study is focused on the communication processes and content that exists within the Leadership Team as a whole, with a focus on communication between hospital and clinic Leadership Teams.

A total of 18 interviews were conducted with the members of the clinic and the hospital Leadership Teams. The interviews were then analyzed using Constant Comparative Analysis to identify the key themes that either facilitate or hinder the ability of teams to execute Mercy initiatives that involve both the hospital and clinic. First, our findings indicate six major communication processes impact the ability to execute initiatives. Specifically, three communication processes facilitate execution including ad hoc encounters, formal meetings, and convenient communication. However, findings also reveal role ambiguity, distractions during meetings, and improper use of email hinder the execution of initiatives. Finally, six themes emerged regarding the role of communication content in the execution of initiatives. While participants felt access to information facilitated execution, findings also indicate competing cultures, financial and budgetary management, lack of access to information, physician management, and affirmation of decisions hindered the execution process.

Three major conclusions can be drawn from the themes identified in the data. First, while technology-based communication, such as email, texting, etc., does provide a level of convenience, it is being used inappropriately for complex matters that require more face-to-face, personal communication. In place of technology-based communication, increased personal interaction and face-to-face meetings could alleviate some of the problems associated with too many emails and role ambiguity. Second, the themes of role ambiguity, financial and budgetary management, physician management, and affirmation of decisions further the existing perception of two competing cultures within the Mercy Leadership Teams. Lack of clarity regarding initiatives, such as who is involved, what the expectations are, and how the initiative will be carried out, creates division between the hospital and clinic teams. Finally, access to information is vital for the completion of Mercy initiatives. However, as indicated in the findings, a lack of access to necessary information for all members of the Leadership Teams is occurring.

Based on the findings of this study, we recommend six short-term and long-term solutions be implemented to address the problems discussed. The successful implementation of these recommendations offers the potential to alleviate some of the communication tension present within or between the Leadership Teams in order to accomplish Mercy's mission to "bring life to the healing ministry of Jesus through our compassionate care and exceptional service" (Mercy, 2013, para. 1).

Study Objectives

Purpose of Study:

The purpose of this study is to explore the communication experiences of members on Mercy's Leadership Teams. Specifically, this study is focused on the communication processes and content that exists within the Leadership Team as a whole, with a focus on communication between hospital and clinic Leadership Teams.

Research Questions:

RQ1: Aside from structural barriers, what communication processes facilitates and hinders the teams' abilities to execute Mercy initiatives involving both the hospital and clinic?

RQ2: Aside from structural barriers, what communication content facilitates and hinders the teams' abilities to execute Mercy initiatives involving both the hospital and clinic?

The Consulting Team:



Emily Dicus



Hannah Shirley



Jacy Shaw



Kate Elam



Taylor Curtis

Organizational Concept

Definitions of Organizational Culture

- Organizational culture is defined by Schein (1992) as “a pattern of shared basic assumptions that the group learned as it solved its problems of external adaptation and internal integration, that has worked well enough to be considered valid, and, therefore, to be taught to new members as the correct way to perceive, think and feel in relation to those problems” (p. 12).
- Within every organization there is a culture, but each of these cultures are unique, “Where the purpose is development of an imaginary, aspire, and desirable organizational culture... it is a symbolic management which has as its objective to create an exceptional and specific culture” (Kucinkas and Paulauskaite, 2005, p. 147).

Characteristics of Organizational Culture

- Cultures within organizations are complex and must be examined far beyond a first glance to effectively recognize the dynamics of the culture and distinguish what the strengths and weaknesses are.
- To understand an organization’s culture, one must consider the features that form the culture (Miller, 2012).
- Organizational culture is not created: an organization *has* a culture and that culture can change (Dixon and Dougherty, 2010).
- Organization *is* a culture, and these cultures are complicated, emergent, not unitary, and ambiguous (Miller, 2012).
- Individuals in an organization reflect the organizational culture and influence the image projected onto other organizations and outsiders (Miller, 2012)

Importance of Organizational Culture

- Impacts, such as the ones listed above as characteristics, need to be understood to function properly in a culture.
- “Decision making, team processes, and communication effectiveness are influenced by various organizational characteristics, including organizational structure, culture, information technology systems, and leadership style” (Berry, 2006).
- “The cultural element in team communication is plausible as communication is influenced by context, environment, and culture” (Rabol, 2012).
- Communication is important within an organizational culture, “Complicated linkages among organizational elements, including dynamic and uncertain social, political, and economic environments, ambiguous and incomplete information, and conflicting internal organizational interests, also contribute to less effective communication processes” (Berry, 2006).
- Technology is a predominant function in the workplace with an ever-changing society that has become surrounded by all technologies including: email, voicemail, conference call, video conference, the internet and many more.

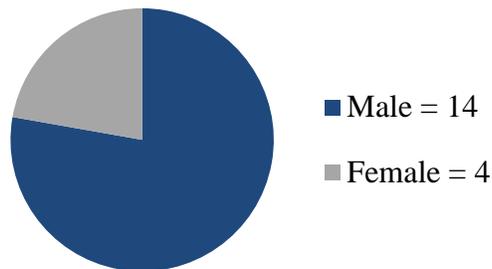
Methodology

Participants:

For this study, 18 participants were interviewed from the Mercy Leadership Teams.

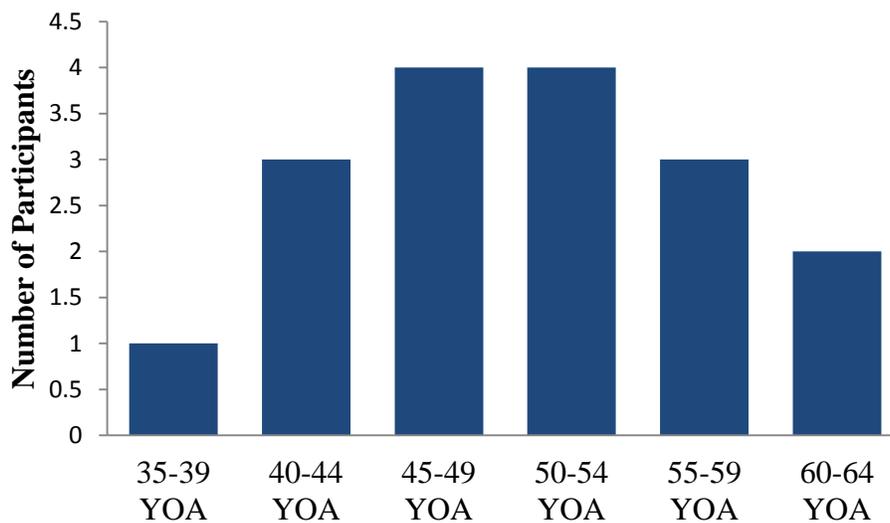
- 9 hospital team members
- 8 clinic team members
- 1 hospital & clinic team member

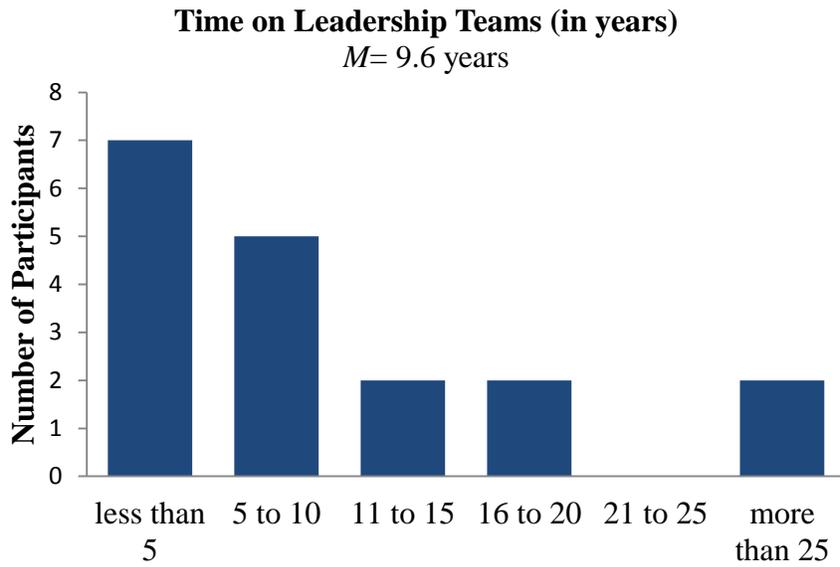
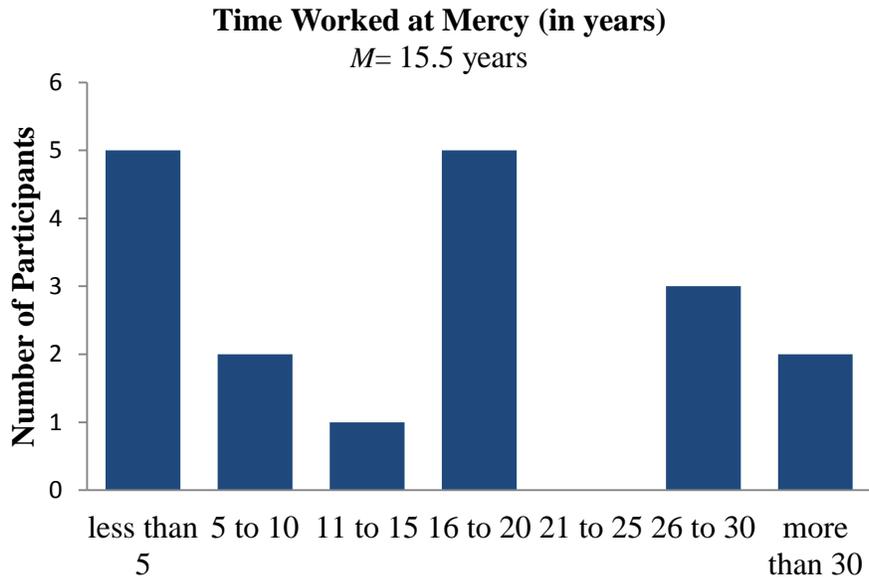
Sex of Participants



Participants' Years of Age (YOA)

M= 49.7 years





Ethnicity: All participants (100%) were White/Caucasian

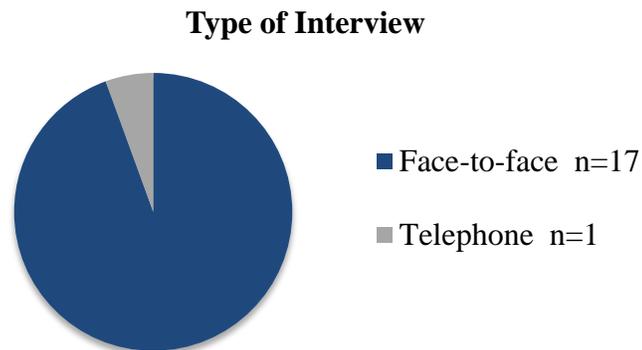
Research Procedure:

During the research procedure, semi-structured, in-depth interviews were conducted using an IRB-approved interview guide.

Two sections of the interview guide:

- Communication processes
- Communication content

How the interviews were conducted:



Length of interviews:

Range: 13.4 – 59.87 minutes

M = 26.03 minutes

Analysis:

Constant Comparative Analysis was used to identify major themes that were discussed in interviews (Glaser and Strauss, 1967). The following steps were taken to analyze the data:

1. All interviews were transcribed word-for-word from digital recording files.
2. Transcriptions were read multiple times to become familiarized with the data.
3. Initial themes were identified regarding: communication processes and communication content.
4. Initial themes were combined into larger categories based on similarities and differences.
5. Final themes emerged in terms of communication processes and content that facilitated or hindered members' abilities to execute Mercy initiatives.

Research Findings

RQ1: Aside from structural barriers, what communication processes facilitates and hinders the teams' abilities to execute Mercy initiatives involving both the hospital and clinic?

Facilitates

Ad-hoc Encounters

Informal encounters geared at getting a quick response to a problem among and/or within the teams.

- Follow-up about previous communication
- Reminders about up-coming meetings
- Increases accountability on progress of initiatives and decisions

Formal Meetings

Scheduled meetings with an agenda to address a wide range of issues.

- Meetings could consist of two or more people, such as meetings with counterparts or groups working on the same issue.
- Establishes a baseline of general knowledge about the current happenings on the team.
- Helps ensure that all team members are on task.

Convenient Communication

Technological convenience as a means of communication that allows quick and direct responses.

- Modes such as texting, emails, phone calls, and WebEx meetings
- These modes are most helpful when:
 - A basic, quick response is needed
 - Verification about decisions or previous communication is needed

Select Comments:

"... we can probably get sidewalk consults... with our Leadership Teams members and resolve a matter quickly."

"...I'm probably getting to the point where I just need to structure, to set up a routine, monthly meeting... because there's enough things happening... at this point, that it would be, it would be good just to have a formal sit down."

"If we didn't use email to fill each other in on what's going on each day and we waited for once each week then we'd be behind on communication."

Research Findings

Hinders

Role Ambiguity

Structural barriers that prevent clear, defined roles of responsibility.

- Lack of clearly defined counterparts
- Overlapping of job roles or tasks
- Uncertainty about to whom to report

Distractions during Meetings

Distractions could encompass anything from extraneous use of electronic devices to lack of full attention.

- Using cell phones, especially texting, during meetings
- Use of other distracting technologies such as laptops and tablets

Improper Use of Email

Relying on email to address problems that require more direct communication such as phone calls.

- “If it takes more than two responses to email, pick up the phone.”
- Excessive carbon copying (CCing) on emails
- Failure to properly screen incoming and outgoing emails

Select Comments:

“The clinic VP and the hospital VP have to be absolutely in sync as they communicate with that physician and as they make decisions and set the direction for their service line.”

“People are very wrapped up in their electronic devices, they’re not paying attention to what’s being said or shared.”

“Often the nature of the beast ends up being... email, which never works out well.”

“...I personally set aside time throughout my day to specifically look at email... I may not see it until later in the day, maybe even in the next day... so I think that’s the problem with email. And then sometimes also with email, it can lead to miscommunication.”

Research Findings

RQ2: Aside from structural barriers, what communication content facilitates and hinders the teams' abilities to execute Mercy initiatives involving both the hospital and clinic?

Facilitates

Access to Information

Sharing information relevant to the successful completion of Mercy initiatives from both sides. Individual access to information from a common source or central location.

- When working on a project, knowing the budgetary details is critical to the success of the project
- Obtaining data regarding patient satisfaction and coworker engagement when working with the team

Hinders

Competing Cultures

Conflicting perceptions of priorities and functionalities on the hospital and clinic sides of the Leadership Teams.

- Differing priorities regarding budgets and financials
- Differing opinions about physician management and engagement
- Differing approaches on how to solve issues within the hospital or clinic

Financial and Budgetary Management

Inability to distribute financial and budgetary information among or within the teams.

- Reduces the ability to make financial decisions regarding
 - Physician compensation
 - Project management
 - Clinic and hospital operations

Select Comments:

“And we do a good job...mutually respecting and mutually sharing information. How busy the clinics are, where the referrals go, and what happens when the patients gets to the emergency room, not just opinion, but, real data, and I think that’s important... I think we that we.. do a very good job of sharing information.”

“...mainly around clarity of the scope of the project... what the expectation is for improvement... and what’s the expectation for who is working on it. It’s really around clarity... of the work charter. If we don’t have clarity is when things tend to fall by the wayside.”

“Hospital cultures and the clinic cultures are very different. ...they feel we’re much more uptight over here. And I think their team over there,... there’s much more, I think, cohesive.”

“They hold onto physician compensation information, but yet, the hospital has responsibility for paying that compensation.”

Research Findings

Lack of Access to Information

Inability to obtain information from other team members that is vital to making key decisions within the operating team such as budgetary information and disciplinary issues.

- Misunderstandings about what information may or may not be withheld due to HIPAA violations
- Ensuring that information is not only accessible, but is also timely.
- Having to go through multiple resources to access basic healthcare information that should be available across the board, such as:
 - Length of patient stay
 - Diagnosis codes
 - Patient care level

Physician Management

Utilization of physician engagement and managing physician affairs including:

- Physician discipline
- Physician interactions
- Performance measures
- Physician compensation

Affirmation of Decisions

Ensuring that agreed-upon decisions are recorded, understood, and executed appropriately.

- Once initiatives are delegated to the appropriate team member or group, there is a lack of response about the progress of that initiative.
- Discussions during formal meetings are not documented.

Select Comments:

“[W]e can ask each other and inquire and we’re very open to send each other what we have, but it’s not the same as just being able to pull it up yourself or getting it regularly sent to you. It’s just not the same.”

“I think the most successful management style in the future is going to be the one that understands how important it is to have the physician, lead and engaged in making decisions”

“I mean, when you have a meeting out there for two weeks, and then an hour before, oh by the way we’ve got a conflict...Okay, well how long have you had that conflict?”

Summary of Key Findings

This organization cultural study revealed 12 key themes regarding communication processes and content. Each of these themes was classified as hindering or facilitating the processes and content on the Leadership Teams. This section will explain the consequences, whether positive or negative, of three of the most prominent themes of the study, including technology, direct communication, and clashing subcultures.

Overall, technology both enables and inhibits effective communication between the members of the Leadership Teams. The convenience of technology has allowed for quicker responses to straightforward issues that do not involve complex messages when face to face interaction is not possible; however, the technology processes of communication are not consistently being utilized effectively or in appropriate situations. Messages delivered using technology, which require more than one or two responses for a solution, validate a need for direct communication through face to face or phone interactions. Therefore, the complexity or ambiguity of the situation needs to be considered in order to select the best channel of communication.

The results of this study also demonstrate the benefits and disadvantages of direct communication through face-to-face meetings or phone calls. A common theme within interviews exposed the difficulty of direct contact among the Leadership Teams. The close proximity of members within a building reduces the difficulty of achieving direct communication between individuals that is necessary to solve issues. However, a lack of ad hoc encounters among individuals from the hospital and individuals from the clinic presents a need for more frequent meetings between counterparts or individuals working on similar issues. Scheduled, constructive meetings that allow face-to-face communication, along with proper use of technology when communicating, would achieve a balance in the quality and efficiency of the communication between the individuals of the Leadership Teams.

An important characteristic of organizational culture involves subcultures which reveal both positive and negative aspects. The geographical and structural separation of the Mercy Clinic and Hospital Leadership Team inadvertently produces two distinct subcultures, and therefore, varying perspectives on Mercy issues. These varying perspectives can provide valuable input when making decisions. Although both cultures share similar goals, individuals from both the clinic and the hospital reveal that the majority of confusion and miscommunication arises due to the different procedures followed by each team and perceived priorities. These two subcultures denote the concept of *competing cultures*. This concept may explain why the Mercy Leadership Teams is experiencing slower processes, a lack of mutual respect, and a preoccupation on problems within the team rather than problems and issues that Mercy, as a whole, encounters.

Recommendations

Recommendations	Benefits
<p>Building esprit de corps: Team-building is more purposeful when members spend time together, and this time spent together creates an openness and willingness to learn from each other (Thompson, 2009).</p>	<ul style="list-style-type: none"> • Establishes mutual respect and trust among team members • Increases team productivity and efficiency due to higher reliability and level of accountability • Boosts team morale and camaraderie
<p>Establish clearly defined cross-team contacts, particularly for projects that require large amounts of resources pertaining to that specific project. Productivity increases when leadership roles and responsibilities are shared (Erkutlu, 2012).</p>	<ul style="list-style-type: none"> • Shared roles and responsibilities allows for proactivity of the team • Increased recognition of individual and shared duties • Reduces confusion about who is doing what and how they are doing it
<p>Implement meeting minutes to be taken by an assigned individual or through a rotation of team members</p>	<ul style="list-style-type: none"> • Affirms decisions made during meetings • Increases accountability and quality participation within meetings
<p>Implement the Mercy Dashboard</p>	<ul style="list-style-type: none"> • Grants shared access to necessary information • Allows a place for imperative financial and budgetary documents needed to make decisions • Decreases inaccuracies and redundancies
<p>Utilize the elements of the Media Richness Model which argues communication channel selection (face-to-face, phone, email) based on message complexity and ambiguity.</p>	<ul style="list-style-type: none"> • Reduces the overuse and misuse of email • Encourages recognition of the complexity of a situation and the appropriate means of communication
<p>Utilize a neutral meeting location</p>	<ul style="list-style-type: none"> • Alleviates some of the tension created by the perception of hospital taking precedence over clinic • Increases unity as one Leadership Teams with one mission • Helps to limit distractions during meetings

Guide for Implementation

Recommendations	Guide for Implementation
Build esprit de corps	<ul style="list-style-type: none"> Continuing annual retreats and initiate frequent small gatherings throughout the year
Establish a clearly defined cross-team contact	<ul style="list-style-type: none"> Following evaluation of roles and responsibilities, determine a counterpart with whom you work mutually on Mercy initiatives and direct the majority of concerns
Implement meeting minutes	<ul style="list-style-type: none"> Establish a system for an individual to record meeting minutes and how to distribute them to members of the team Following the implementation of the Dashboard, meeting minutes should be archived for future use
Implement the Mercy Dashboard	<ul style="list-style-type: none"> Build out the dashboard with the necessary information <ul style="list-style-type: none"> Ex: Budgetary information, physician management, quality of care, patient satisfaction Encourage usage of dashboard for team members to address individual issues Actively update and maintain data included on the dashboard
Communication training for media usage	<ul style="list-style-type: none"> Learn the Media Richness Model through formal training Understand the appropriate means of communication depending upon the complexity of an issue Reduces improper use of and over-reliance on technology-based communication
Utilize a neutral meeting location	<ul style="list-style-type: none"> Find a neutral location at which to meet or alternate meeting location between the hospital and clinic

-  = Long-term
-  = Short-term

References

- Berry, G. R. (2006). Can Computer-Mediated Asynchronous Communication Improve Team Processes and Decision Making? *Journal of Business Communication*, 43, 344-366.
- Daft, R. L. & Lengel, R. H. (1984). Information to richness: A new approach to managerial information processing and organizational design. In B. Staw & L. L. Cummings (Eds.), *Research in Organizational Behavior*, Vol. 6 (pp. 191-233). Greenwich, CT: JAI Press.
- Dixon, M., & Dougherty, D. (2010). Managing the Multiple Meanings of Organizational Culture in Interdisciplinary Collaboration and Consulting. *Journal of Business Communication*, 47, 3-19.
- Erkutlu, H. (2012). The impact of organizational culture on the relationship between shared leadership and team proactivity. *Team Performance Management*, 18, 102-119.
- Kucinskas, V., & Paulauskaite, N. (2005). Organization culture and its development in private colleges. *Quality of Higher Education (Aukstojo Mokslo Kokybe)*, 2, 144-165.
- Mercy. (2013). *Mission vision values*. Retrieved from <http://www.mercy.net/about/mission-vision-values>
- Miller, K. (2012). *Organizational communication: Approaches and processes (6th ed.)*. Boston, MA: Cengage Learning.
- Rabol, L. I., McPhail, M. A., Ostergaard, D., Andersen, H. B., & Mogensen, T. (2012). Promoters and barriers in hospital team communication. A focus group study. *Journal of Communication in Healthcare*, 5, 129-139.
- Schein, E. H. (1985). *Organizational Culture and Leadership*. San Francisco: Jossey- Bass.

Thompson, J. L. (2009). Building collective communication competence in interdisciplinary research teams. *Journal of Applied Communication Research*, 37, 278-297.

About the Consultants



Emily Dicus is a junior double majoring in Multimedia Production and Writing, with a minor in Global Studies at Drury University. After graduation she wants to become a writer for television and film.



Hannah Shirley is a junior Advertising and Public Relations major at Drury University. She hopes to work in Public Relations specializing in Corporate Crisis Management.



Jacy Shaw is a junior pursuing majors in both Communication Studies and Spanish at Drury University. She later aspires to engage in international affairs through foreign correspondence or work for the U.S. Department of State.



Kate Elam is a senior Communication Studies, International Political Science, and German major at Drury University. In ten years, she aims to be working for the United Nations within the Public Information and External Relations network.



Taylor Curtis is a junior Communication Studies and History major with a minor in Law and Society at Drury University. He plans to attend law school following completion of undergraduate work, with a focus in Intellectual Property law.