

DEMYSTIFYING VALUES ASSESSMENT

A System Develops a Tool for Assessing Values Integration

BY RITA RAFFAELE



Ms. Raffaele is corporate director—mission values, SSM Health Care System, St. Louis.

Today's healthcare ministry is a study in dynamic relationships. Mergers, acquisitions, cosponsorships, and other types of institutional affiliations define the changing healthcare environment in which Catholic providers are full participants. These activities raise serious concerns and important questions: Given the rapid pace of change today, how do leaders of Catholic healthcare organizations ensure that Catholic identity is maintained? How do Catholic facilities incorporate mission and values in emerging integrated delivery networks which involve partners that may not share the same values perspective—particularly when faced with major changes such as downsizing, budget reductions, mergers and acquisitions, or functional and clinical integration among network members?

The need to address questions like these led SSM Health Care System (SSMHCS), St. Louis, to develop a resource guide and practical tool for assessing values integration. The tool was

designed to be applicable to SSMHCS entities, to be easily understood, and to contain criteria (key indicators) for evaluating an effort that is difficult to quantify.

The document, titled *A Guide to Assessing Values Integration: Key Indicators* (1995), underwent a careful planning process and several stages of development involving consultation with SSMHCS presidents, system executives, and mission leaders.

For institutions considering or beginning the process of affiliation, it serves as a survey document to assess the compatibility of potential partners' values. Within organizations it can help management teams chart progress toward integrating mission and values, form part of a leader's self-evaluation, and provide a framework for group consensus building.

PROCESS AND PARAMETERS

The most obvious place to begin to examine the values of one's own or another organization is

Summary The current climate of networking and restructuring among healthcare providers calls for measurable methods to assess an organization's adherence to its fundamental values. In response to that need, the SSM Health Care System (SSMHCS) prepared a guide to assessing values integration. This innovative tool has proven to be adaptable for many uses: It helps organizations examine the compatibility of potential partners' values, as well as their own progress toward integration of their stated mission, values, and philosophy.

The guide outlines 10 key areas that serve to focus and define the values assessment:

- Vision
- Serving the poor

- Serving the community
- Continuous quality improvement
- Employment practices
- Role of leaders
- Stewardship
- Advocacy
- Wellness
- Church

The guide includes a discussion of the significance of each of these key areas; the implications of including each area; and key indicators, or standards statements, for assessment.

Users' response to the guide has been overwhelmingly positive. This guide should provide valuable systemwide data and identify areas of strength or needed growth.

SERVING THE COMMUNITY

It is the mission of every SSMHCS entity to meet the basic healthcare needs of people in the community by providing access to healthcare as well as to education about health issues. This means not only providing direct services, but also working to address the underlying causes of poor health in a given community, such as violence, inadequate housing, or chemical dependence. It also means listening and recognizing that the community has much to teach and give in return.

Implications

An organization cannot serve the community without a means of understanding what its true needs are, as well

as understanding and appreciating the cultural makeup of the community. Having gained this understanding, education and communication play key roles in serving the community.

Serving the Community—Key Indicators

Consider the following key indicator statements. With 1 being low and 5 being high, choose a ranking that best describes how well your entity reflects each key indicator. Be ready to give specific examples to support your rating.

Key Indicator	Low					High
1. Formal assessment tools or processes exist to assess true community needs as well as to document what exists in the community in order to avoid duplicating services and wasting resources.	1	2	3	4	5	5
2. There is ongoing evaluation to determine if and how well the community's needs are being met.	1	2	3	4	5	5
3. Cultural diversity within the community is recognized and welcomed (there are a variety of ways this could happen in mixed ethnic areas; for example, there could be multi-lingual medical personnel in the emergency room).	1	2	3	4	5	5
4. The organization employs a comprehensive process in order to understand and be sensitive to cultural diversity among its workforce so that it can develop an environment that works for everyone.	1	2	3	4	5	5
5. An attempt is made to staff community outreach programs with culturally sensitive staff members.	1	2	3	4	5	5
6. Efforts are made to identify cultural barriers to communication.	1	2	3	4	5	5
7. The organization provides opportunities to celebrate cultural differences within the community and the staff.	1	2	3	4	5	5
8. The organization has programs or efforts to educate the community on its healing mission and values.	1	2	3	4	5	5
9. There are also efforts to educate the community on issues such as staying healthy, how to access services, etc.	1	2	3	4	5	5
10. The community's perception of the organization is consistent with the organization's self-image.	1	2	3	4	5	5
11. The organization's advisory board includes representatives from the community.	1	2	3	4	5	5
12. Employees are intimately involved in diversity assessment and program development in the entity.	1	2	3	4	5	5
Total Score for Section:						
Possible High: 60 Possible Low: 12						

Required Comment Section

Take a moment to write down ideas or reflections on any of the key indicators above. For any score that was **very high** or

very low, give specific examples of how this statement has or has not been accomplished within your entity.

From SSM Health Care System, *A Guide to Assessing Values Integration: Key Indicators*, St. Louis, 1995, pp. 8-9 (footnotes omitted).

with written values, mission, and philosophy statements. Even though these values may not conform exactly to practiced values (which can only be determined by exploring the organization's history, the perceptions of individuals within the organization and community, and the organization's other activities), they do provide a point from which to start the assessment.

SCORING GUIDELINES FOR KEY INDICATORS

Score	Guidelines
1	<ul style="list-style-type: none"> • No systematic approach is evident; anecdotal information. • No results or poor results relating to indicator.
2	<ul style="list-style-type: none"> • Beginning of a systematic approach to address this key indicator. • Early stages of transition from reacting to identified issues or concerns to preventing and planning for problems. • Major gaps still exist in communication and deployment of plans that would prevent progress with this indicator. • Some improvements have been made in relation to this indicator.
3	<ul style="list-style-type: none"> • Existence of a stable, systematic approach that responds to the purpose of the key indicator. • Planning approach is taken to address problems, concerns, or areas of growth related to the indicator. • Early stages of communication and deployment of actions, but no major gaps exist. • Overall, good performance levels in relation to the indicator, especially when evaluated against meaningful benchmarks.
4	<ul style="list-style-type: none"> • Existence of a stable, systematic approach to the indicator. • This indicator is fairly well planned, developed, communicated, and deployed and no major gaps exist. • Performance in relation to the indicator is considered excellent, especially when evaluated against meaningful benchmarks.
5	<ul style="list-style-type: none"> • Existence of a stable systematic approach to the indicator. • This indicator is thoroughly developed, communicated, and deployed and no major gaps exist. • Performance in relation to the indicator is considered excellent, especially when evaluated against meaningful benchmarks. • Strong evidence of leadership demonstrated in relation to the indicator.

From SSM Health Care System, *A Guide to Assessing Values Integration: Key Indicators*, St. Louis, 1995, p. x.

In developing the guide's key indicators for assessing values integration, SSMHCS revisited its own mission, values, and vision statements to ensure that the system's most fundamental values would be included. For example, the SSMHCS vision statement reads, in part:

Our concern is for all people, but the vulnerable and disadvantaged have a special claim on us. We endeavor to be a voice with the voiceless—the economically poor, the medically uninsurable, children, the homeless, and the dying.

Other values that emerged during the process of developing the assessment tool were respect for the sacredness of life; respect for individual dignity and freedom; justice; fairness; competent, caring service; service to the community; creation of a growth-oriented climate; and integration of physical, mental, and spiritual health. The entire document was written with a view toward inclusivity and an appreciation of diverse cultures.

The guide's 79 key indicators were refined and grouped into the following 10 areas:

- Vision
- Serving the poor
- Serving the community
- Continuous quality improvement
- Employment practices
- Role of leaders
- Stewardship
- Advocacy
- Wellness
- Church

The guide presents each of these areas with an introductory discussion; implications of including each area; and key indicators, or standards statements, which allow users to score their organizations. The **Box** on p. 49 provides a sample section for the key area "serving the community."

DEVELOPING THE STANDARDS, EXTENDING THEIR USE

In the process of developing the assessment guide, SSMHCS acknowledged that many Catholic healthcare organizations have found it difficult to define and measure mission and values implementation. Given that understanding, every effort was made to formulate standards that provide a tangible and practical method of assessment. Guidelines for scoring were adapted from the Malcolm O. Baldrige quality award judging criteria and from the JCAHO scoring guidelines. For ease of use, the guide includes a scoring matrix (see **Box**, left) and a bibliography with additional resources.

Although the values assessment guide will help

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Coming in the
Next Issue of
**Health
Progress**

LONG-TERM CARE

Healthcare organizations are trying new approaches to help the elderly and their caregivers. The November-December issue looks at a creative volunteer program that facilitates elderly independence, a nursing home's efforts to involve family members in care, and a retirement community's successful fitness program.

EUTHANASIA

Sidney Callahan makes a provocative case against self-determined dying in assisted suicide and euthanasia. Her insights come from a feminist perspective and have a message for all of society.

NEW COVENANT

In the context of the New Covenant process for facilitating networking among Catholic organizations, Alan M. Zuckerman addresses collaboration from the perspective of the small city, which typically has only two or three hospitals, one of which is Catholic.

**BONE MARROW
DONOR**

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Data Processing Volunteers The owners of a Honolulu data processing firm donated the use of office space and computers for the campaign. Hundreds of volunteers worked rotating four-hour shifts, seven days a week, to process data concerning the thousands of blood samples and potential donors.

Other Volunteers Meanwhile, St. Francis's public relations staff turned out news releases and publicity fliers about the campaign. Musicians and other entertainers put on a free concert. Other volunteers made and distributed orange bows, which Hawaiians wore to show their support for Alana and the HBMRD's efforts in her behalf. By the end of the campaign, Angie Wyss, a St. Francis public relations representative, was saying, "I'd be surprised if there was a single person in Hawaii who didn't know about Alana's plight."

OTHER BENEFITS OF THE CAMPAIGN

Known as the "Transplant Center of the Pacific," St. Francis is the region's leader in organ transplantation. As a result of the search for a bone marrow donor for Alana, physicians located organ donors for other sick persons.

St. Francis is, moreover, the only Hawaiian medical center that has federal certification to collect bone marrow donations and to perform bone marrow transplants. The campaign to help Alana brought a great deal of attention to St. Francis's HBMDR and its efforts to help persons with bone marrow illnesses. "Before the campaign, fewer than a dozen preliminary matches were found each month on the registry," said Paik. "Since the campaign, the preliminary matches have increased tenfold." □

VALUES MANAGEMENT

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organizations structure evaluation, the process will retain a subjective component. Similarly, issues will vary in their importance from one organization to another. Therefore the guide to assessing values integration was not intended as a series of checklists but rather as a flexible tool that can be applied as appropriate for each organization.

A SYSTEMWIDE BENCHMARK

A Guide to Assessing Values Integration: Key Indicators has helped SSMHCS obtain systemwide data that can serve as a benchmark for comparison and can identify areas of strength or needed growth within its entities. The system sent the instrument to each of its entities in March 1995, and then compiled summaries of the key indicator profiles for each entity, comparing their scores with the midrange scores for the system overall.

The system asked its members to set up a Values Assessment Task Force to look at the profiles, discuss areas needing improvement, contact other system members for collaboration and replication of best practices, develop a plan for improvement, and oversee the changes. The task force also filled out an Opportunity for Improvement worksheet, outlining the goal and plan for achieving it. These worksheets will be used by the Corporate Mission Values Department for ongoing support of the opportunities identified.

As the tremendous pace of change in healthcare continues, it is more important than ever that leaders in Catholic healthcare take time not only to evaluate their own mission and values integration, but also to assess that of potential partners. As leaders of organizations founded on Jesus' healing mission and on the Gospel values, it is crucial to ask whether "who we say we are" is in harmony with "what our actions and activities" say we value. □

 For more information or to obtain a copy of *A Guide to Assessing Values Integration: Key Indicators*, call Rita Raffaele at 314-994-7752.