A multi-institutional healthcare system attempting to articulate and integrate its mission into everything the organization does knows such a process is both imperative and challenging. In this mission integration process, mission education is necessary. Without education, mission fulfillment becomes a potentially intangible goal.

But education alone will not carry the day. What is essential to the future vitality and viability of a mission-driven organization is the integration of the mission into its programs, policies, practices, and accountability structures—only then will the mission endure with fidelity and integrity.

WHERE IS MISSION?
Committed to the necessity of mission integration, Holy Cross Health System (HCHS), South Bend, IN, first had to address the perception that mission fulfillment took place in a few functions or activities. When people spoke of “mission,” they often were referring to care of the poor, pastoral care, clinics, and outreach efforts. Thus it was important to launch an intensive educational effort with managers, staff members, and trustees to reinforce the basic belief that mission permeates all departments and aspects of the organization. HCHS has made a systematic effort over the past several years to raise consciousness among internal constituencies that every service rendered, every function performed, and every dollar budgeted is an expression of fidelity to the mission. This was achieved through employee orientation sessions, local board presentations, and a conscious effort to reiterate the message wherever possible.

MISSION STATEMENT: THE FOUNDATION
HCHS’s mission statement (see Box) was the keystone of this educational effort. The mission statement gave HCHS a foundational principle—fidelity to the spirit of the sponsoring congregation—and a three-part framework: excellence, empowerment, and stewardship. HCHS first identified those activities which operationalized these four key components. Fidelity, excellence, empowerment, and stewardship would have to be

Summary
Essential to the future vitality and viability of a mission-driven organization is the integration of the mission into the organization’s programs, policies, practices, and accountability. Holy Cross Health System (HCHS), South Bend, IN, launched an intensive educational effort with managers, staff members, and trustees to reinforce the basic belief that mission permeates all departments.

Using the mission statements principles of fidelity, excellence, empowerment, and stewardship, HCHS leaders initiated a systemwide mission assessment and development effort. During assessment, each facilities’ ad hoc team addressed and responded to the organization’s mission standards on the basis of availability of personnel, size, facility, and particular circumstances.

The assessment process called for interdisciplinary, institutional review teams to explore all aspects of mission activity. This process enabled HCHS to launch a systemwide educational effort about the importance and necessity of mission integration. HCHS then used the mission statement elements fidelity, excellence, empowerment, and stewardship to define new relationships of accountability.
translated into measurable criteria or key result areas, which HCHS would then use to define organizational integrity and institutional fidelity.

To ensure that mission embraces every aspect of organizational life, HCHS created a framework for accountability within the very infrastructure of the organization. This involved reviewing every aspect of accountability currently in place, such as surveys, audits, performance evaluations, and annual reports.

**MISSION ASSESSMENT AND DEVELOPMENT**

The educational effort coincided with a systemwide mission assessment and development effort that HCHS had initiated to provide its sponsoring congregation, the Sisters of the Holy Cross, with a consolidated accountability for mission.

In the mid-1980s, the Sisters of the Holy Cross requested that all its sponsored ministries document their fidelity to mission on the basis of a set of criteria the congregation had written. These were known as the CSC Criteria for Ministry. After completing the first assessment using the congregation’s criteria for ministry, the healthcare system staff expanded the assessment effort by creating 11 mission standards. The standards encompassed such areas as Catholic identity, community-based planning, care of the poor, excellence, human resource practices, relationships with the system and with the sponsors, and mission accountability.

The mission assessment and development process was conducted throughout the corporation over a period of 19 months, culminating in a consolidated report of accountability, which was approved by the corporate board of directors and the congregation’s voting members.

HCHS subsidiaries took a multifaceted approach to the mission assessment. Each facility’s mission services vice president invited a peer from another HCHS facility to serve on his or her facility’s site review team with the senior vice president for mission services from the corporate office.

The site review team presented an orientation to launch the facility’s mission assessment process. Local ad hoc teams were created to address and respond to the standards on the basis of availability of personnel, size, facility, and particular circumstances.

**MISSION ASSESSMENT IS A SUCCESS**

The mission assessment process had a greater impact on each local facility than anyone had envisioned at the outset. The process empowered individuals: The involvement, commitment, enthusiasm, creativity, and dedication of all those involved were edifying as well as infectious. They attended meetings on their days off; met after hours; designed informal survey instruments and questionnaires to solicit greater input; researched and analyzed minutes and meeting materials; and interviewed staff members, physicians, patients, and patients’ families, neighbors, and friends. The process generally involved the entire healthcare organization and the local community.

The most critical success factors were the subsidiary chief executive officers’ (CEOs’) public and active support and involvement, preparation and training of ad hoc team leaders, formation of local interdisciplinary ad hoc teams, sufficient understanding and interpretation of the standards, and sufficient time and ritual surrounding

**HCHS MISSION STATEMENT**

Faithful to the spirit of the Congregation of the Sisters of the Holy Cross, the Holy Cross Health System exists to witness Christ’s love through excellence in the delivery of health services motivated by respect for those we serve. We foster a climate that empowers those who serve with us while stewarding our human and financial resources.
both the orientation and the concluding sessions.

**ASSESSMENT RESULTS**
The mission standards were grounded in the belief that every dimension of organizational life, from planning and budgeting to ethical reflection, is an expression of mission fulfillment. The assessment process called for interdisciplinary, institutional review teams to explore all aspects of mission activity. This process enabled HCHS to launch a systemwide educational effort about the importance and necessity of mission integration, which ultimately involved thousands of employees, board members, physicians, and volunteers. Consequently, persons throughout the system achieved a greater understanding of what it means to be a mission-driven healthcare organization.

**A NEW ACCOUNTABILITY**
With this foundational effort in place, the next step was to take the mission elements—fidelity, excellence, empowerment, and stewardship—and define new relationships of accountability. This meant HCHS leaders had to revise the framework for accountability within the two principal mechanisms already in place: the facility annual reports and the CEO annual performance evaluation (see Figure).

Institutional annual reports had previously focused on accountability by functional areas such as mission, planning, human resources, and finance. HCHS leaders revised these annual reports to reflect the four mission elements. The revision encompassed all items captured in the previous institutional annual reports.

**Fidelity** Because 1991, the year this revised methodology was put into practice, was the 150th anniversary of the founding of the Sisters of the Holy Cross, the first mission element—"faithful to the spirit of the Congregation"—was used as the theme for the initial application of the revised mission accountability framework. All system facilities had celebrated the sesquicentennial, so evocation of the sponsor's history, tradition, and heritage was a natural starting point for the delivery of health services; system facilities reported the status of their strategic planning efforts, quality enhancement programs, Joint Commission on Accreditation of Healthcare Organizations survey action plans, and results of satisfaction surveys (e.g., patients, residents, and their families, medical staff, and employee climate surveys). Under excellence, all related, measurable criteria were identified and tested.

**Excellence** Under the heading "excellence in the delivery of health services," system facilities reported the status of their strategic planning efforts, quality enhancement programs, Joint Commission on Accreditation of Healthcare Organizations survey action plans, and results of satisfaction surveys (e.g., patients, residents, and their families, medical staff, and employee climate surveys). Under excellence, all related, measurable criteria were identified and tested.

**Empowerment** In the third component of the revised mission accountability framework—empowerment of those who serve with us while stewarding our human resources—system leaders looked for evidence of fidelity in human resource practices, productivity and quality of work life, recruitment practices, compensation planning, and mission education and development. In short, leaders tested and measured practices and policies that would enhance employee development and create an empowered work force.

**Stewardship** The final element—stewardship of financial resources—enabled HCHS leaders to examine financial factors and system and local performance targets, such as net income and net income ratios, growth in equity, asset turnover, and growth and development of service lines.

**MORE EFFECTIVE ACCOUNTABILITY**
In the process of refining and reshaping the mission-driven system of accountability within existing systems and processes of accountability, HCHS leaders reviewed and integrated two other processes: the CEO's performance planning and evaluation process and the annual strategic planning process (see related article, pp. 38-41).

Although these had been implicitly linked to mission accountability, in the implementation of
this effort they were explicitly tied into the process. In the end the integrated effort reduced duplicative reporting and linked all key components of operational effectiveness and accountability within a framework of mission fulfillment.

A Vital Mission
HCHS leaders are confident that these two complementary efforts—mission education and mission integration—provide the essential structures to ensure the fidelity and vitality of its mission. The systemwide mission assessment effort created opportunities for greater ownership of the mission and fostered personal responsibility for its fulfillment. Through the process, greater understanding of and appreciation for the contribution of other individuals to the fulfillment of the mission was manifest.

HCHS employees also found a renewed spirit of commitment to a living testament, not just a nice rhetorical statement. Through these two efforts, the system can thus be assured of a vital mission in the future, as the mission elements are embedded in the infrastructure of the organization through policies, practices, and accountability structures.