Defining a Shared Vision

Visioning is critical in both the operation of a successful healthcare organization and in the development of a strategic plan best suited to set the direction for the organization for some set period of time.

A vision is best defined by saying it paints a picture of a “future desired state for the healthcare organization”. It describes what the leader and his/her leadership team sees and what they want for the organization. So in some respects, visions are both descriptive as well as prescriptive because they help the organization organize itself to think and act differently.

A vision is different from a mission statement. Mission is about what the organization/team does, how it performs its work, to whom or for whom it does its work, and it represents the present function of the organization/team. A leader’s role is to define and articulate the vision for his/her organization/team and to help guide their efforts to work toward achieving the vision.

Leadership is the exercise of those competencies, skills, knowledge, and behaviors which guide and motivate others to actively pursue their work toward accomplishing a set of goals or objectives, and, to work toward achieving the vision for their organization. Leadership produces “group performance”. The relative degree of the quality of the leadership demonstrated will result in a commensurate level of organizational performance. To that end, therefore, great leadership produces outstanding results.

A vision is characteristically defined as a desired future state or picture of what the leader’s team or organization could become in some future timeframe. A vision is different from a mission statement. Mission is about what the organization/team does, how it performs its work, to whom or for whom it does its work, and it represents the present function of the organization/team. A leader’s role is to define and articulate the vision for his/her organization/team and to help guide their efforts to work toward achieving the vision.

Keywords: leadership, vision, values, competitive position, product development

Let’s get started!
Since vision statements embody a group’s common thinking about the desired outcome; they reflect what the healthcare organization wants to become. To achieve a shared vision, key players, the leaders of the organization will need to spend time together talking about their ideas and listening to each other. However, at this point in our discussion, let us clarify the various responsibilities of the key players in healthcare organizations and their roles relative to a shared vision for the organization. It is the responsibility of “the leader” of the group to create and set the vision...no one else. While he or she may solicit the thinking of his/her team about what they see as a desired future state for the organization, it is, in the final analysis, the sole responsibility of the leader to set forth the vision. There is a word of caution, however, for the “leaders” here. Visions are not rules, policies, regulations or something others in the organization are told what to do. Rather, visions are designed to be sold to the organization and to encourage buy in and commitment to meaning they are, by their very nature, written in terms which should inspire others to want to be part of the vision. For many organizations, this a new way of thinking and will require new ways of behaving in order for the vision to become a reality!

In addition, the vision statement covers the entire organization...all departments and for all of the staff. So, let us recap a bit and expand how a vision is used throughout the organization. Leaders create the vision at the top of the organization, the next level of leadership has the responsibility to ensure the vision is translated into daily practice within their areas of responsibility by ensuring their staff understand the vision and know how to put it into practice with their daily work life. There is a great deal more that could be said about this topic at this point, but for now we will focus on using the tool of a vision versus current reality.

Turning your community’s vision into a reality requires extraordinary understanding, commitment and collaborative participation by all stakeholders.

Outlining a future that everyone wants to work toward requires time spent considering “current reality”—that is, an honest, frank and open dialogue about the present situation. It is often referred to as “confronting the brutal facts.” In order to build a strategic plan with sufficient substance to change the future, communities need to have a clear sense of where they are now. The diagram which follows illustrates the relationship between a vision and current reality. The vision at the top is intended to illustrate how visions “pull” the organization toward it. However, visions must confront the “current reality” of the organization which is all about the where the organization is today which is a combination of forces which will help to achieve the vision and some forces which will create resistance to the vision.

Vision and current reality are separated by dynamic tension. One of the core principles of this tool and an exercise we will describe is that vision is the energy pulling current reality up to a better situation. Conversely, if the energy associated with the vision is not sufficient, then current reality pulls the vision down, hindering real progress.

The following brief exercise will provide a template for conducting a productive exploration of current reality, taking effective action to leverage the positives, and dealing with obstacles that can get in our way.

**Vision/Current Reality Exercise**

**Preparation:** Arrange the room so attendees can work at round tables, to encourage conversation and connection with one another. Place at least two flip charts in the front of the room with markers and masking tape. Distribute an adhesive note pad to each participant.

**Step 1**
On the left-hand side of a blank flip chart page, draw the pictured diagram. To the right of the word “VISION,” write the community partnership’s vision statement (paraphrase as necessary). Post the page where everyone can see it.

**Step 2**
Spend a few minutes clarifying and confirming the vision with the group. Don’t engage in discussion of what’s good or bad about it, but rather seek to reach clarity about what it means and what are the opportunities it suggests.

**Step 3**
Spend a few minutes describing what is meant by “CURRENT REALITY,” noting that it consists of both “positives” and “obstacles.” An example of a positive might include the community’s commitment to change, while an obstacle might be recent cuts in budgets.

**Step 4**
Using one adhesive note per idea, have participants write positives and obstacles. At this stage participants should not share their ideas with others. Have participants mark the slips of paper representing the positives with a “+” in the upper left hand corner and the obstacles with a “-.” Allow about 5–8 minutes to complete this step.

**Step 5**
Mark one flip chart with a large “+” and the other chart with a “-.” Ask participants to place each of their adhesive notes on the appropriate flip chart.
Step 6
Divide the attendees into two groups. Assign one group to work on the positives (+) and one to work on the obstacles (-).

Step 7
Ask the two groups to review the ideas on their respective flip charts and do the following:
- Group ideas into common themes.
- Review the various themes and set priorities for action using the following instructions:
  - **Positives group:** Develop and prioritize a list of actions that could be taken to build on the positives.
  - **Obstacles group:** Develop and prioritize a list of actions that would effectively overcome or work through the obstacles.
- Appoint a spokesperson for their group.

Step 8
Have the spokespersons report the results of each group. Allow enough time for questions from members of the other group.

Step 9
Facilitate the entire group to work collectively to reach consensus on the actions necessary to bridge the gap between vision and current reality.

Step 10
Solicit volunteer leaders and work-team members to continue the work begun at this meeting. These volunteers will gather additional information, and look further into the implications and costs of the actions that were decided on by consensus. Determine how and when the work team results will be reported back to all members of the community partnership.

Celebrate
Take time at the end of the session to celebrate your success.

Tips for Successful Vision/Current Reality Exercises

Start the session with a review and reminder of the community partnership ground rules. They will help set the right tone for the session. Use an outside facilitator to help foster an open opportunity for discussion. Encourage creative thinking when considering the opportunities of this time together.

Desired Outcomes of the Tool

The participants will learn more about what the vision is and what it means for the success of the entire healthcare organization. They will be better informed about what their colleagues and co-workers see as the value of the vision and the challenges to achieve the vision. Most importantly, they will be better equipped to help their team members understand the vision, their role in working toward achieving the vision, and how they really do contribute to the success of the healthcare organization. In the final analysis, everything else which follows is based on the vision.

Values
The best way to describe the values of the organization is that they are represented by the behaviors, customs, norms, and ideals demonstrated by the behaviors of the individuals and teams that make up the organization. As stated before in the first article, values are what individuals use to guide their behavior, decision-making and how they interact with others inside the organization and those with whom they come in contact outside the organization. Followers or members of organizations look toward leaders to demonstrate the behaviors they are expected to emulate.

Obviously, leaders who are good role models with respect to the values of the organization will create a work environment where others are more likely to do the same (i.e., Leading by example). Leaders who violate and/or ignore the values they have set forth for others to follow, will set up the organization for confusion and behavior counter to the best in of the organization.

Values either underscore the inspiration of the vision and encourage buy in or they can undermine and reduce the value of the vision...in other words, drag the vision down toward current reality. They are the DNA of the organization. The leader’s role and responsibility is to be able to have an effective dialogue with the team about what the values are, whether they reinforce the vision and desired direction of the organization, and how they as the leaders can help the organization learn which existing values or new values are needed to achieve the vision.

This is not easy. It requires leaders to create an environment for which their team is willing to openly share their perspectives of what the values are, in reality, and how they relate to either reinforce or create obstacles to achieving the vision. The bottom line for this next short exercise to work is trust and, there is no easy way to say this, but some leaders create places to work where trust is apparent while others create environments for which trust just does not exist. This is the time leaders need to face the mirror and ask “what have I created for my healthcare organization?” A place of trust or distrust. If the answer is trust, you are ready for the following. If not, there is a great deal of work to be done.

Let us assume, you answered “trust”. Here are a few simple steps to work toward a better understanding of the values and how your team can use the values to support the vision in your healthcare organization. To be sure, there may be instances where the organization will need to work toward some new values (behaviors) and different ways of thinking and interacting to achieve the right environment to inspire commitment to the vision. In reality, this is a great learning opportunity!

Let us begin!
**Step 1:**
Gather your leadership team together for a session to last about 1 ½ to 2 hours. Establish by brainstorming “group agreements”…that what we agree to do during the session to make it productive. This may include agreeing to be “open minded”, “to speak what is on your mind”, “to respect each other’s opinion” for example. Post the group agreements in the room and ask the group to live by these during their time together. The group may decide to keep the list for future meetings. Hint: This is a good way to set standards for the organization!

**Step 2:**
Using your vision statement as the frame of reference, ask the group to write down on pieces of paper what they believe are the “values” they see in the organization that support the vision, one value per slip of paper.

**Step 3:**
After allowing some time (only a minute or two) have the group submit their “values slips”. The leader or someone in the group now reads each one for the others to hear. As they are read, the group begins the process of “grouping” common values under major headings. For example, the group may find that “commitment to the community” is a common theme. Put all of the slips that match that value together.

**Step 4:**
After grouping the values, ask the group to select the top 4 – 6 values, or more if appropriate. The goal here is to find which of the values the group discovered seem to be the most important. As the group goes through this process, ask the group to determine if the values they listed truly support the vision. If so, keep those. For those that do not, the group must decide if those are important enough to keep because they are important in any event. Otherwise, discard the values.

**Step 5:**
Ask the group to reach consensus on the final set of values. Then brainstorm how the group wants to use these values with the rest of the organization as a way to reinforce the importance of these as “how we plan to interact” together to achieve our vision.

**Desired Outcomes of the Tool**
To create and agree on what the most important values are for the organization and how the leadership team agrees to reinforce and use the values to govern behavior across the healthcare organization.

**Competitive Positioning**
To repeat what we have said about competitive positioning before. In an open market place competitive positioning is about how the organization captures market share and differentiates itself from other similar organizations. That may sound strange to a healthcare environment for which competition is not the norm. However, we will argue that competitive positioning can be used to help to unique define and solidify the health organization’s role within the larger system.

In markets, organizations, healthcare included, compete for market share based upon one of three areas: product leadership, operational excellence, and/or customer intimacy. These areas are defined by the following. Product leadership is all about being the first in the market with a product or service, and having the capacity to control the market. Second, operational excellence is “high value and low cost”. That means the organization produces the best service or product at the lowest cost. And, third, customer intimacy means your healthcare organization has serving its community as its primary focus. The very best organizations have selected only one to be the one they will use to compete in the market.

But there is one other condition. Although you have selected one to be your advantage in the market, you must still meet industry standards in the other two. If you do not, you will undermine the very thing you say you best at competing with in the market.

In healthcare, one might argue that university-based hospitals are good examples of “product leadership” because they are focused on research…to create to products and/or services. Private hospitals may be good examples of “operational excellence” because they rely on private funds, not the central government, for patients and must be capable of providing high quality healthcare for a good price. And, third, community hospitals are good examples of “customer intimacy” because of their very close connection and commitment to the communities they serve.

To be the very best, you and your leadership team must decide which of these best represents the value your healthcare organization brings to the market. But you can only pick one to be your advantage in the market, but you must know and be able to meet healthcare standards in the other two. Use a brainstorming organization to identify your competitive advantage in the market. Then do everything you can to promote and reinforce how your organization practices this competitive advantage in your strategic planning, personnel selection and on-going educational practices, your business meetings, and public settings. Remember, leaders set the standards of behavior and emotional commitment for the rest of the organization.

**Live your competitive position and advantage!**
Product/service Development

In this area of leadership for healthcare, we will suggest that what services and/or products you offer your healthcare “customers” or patients will be driven by a variety of conditions building on your mission, vision, values and competitive position.

And, your product/service offerings will be determined by what you already provide and the health needs of the communities you serve.

This topic is a very broad area and will require more space than this second article will allow us to provide. We will plan on a special edition to devote to this process.

For now, it is important for healthcare providers and leaders to first be able to clearly identify what they provide now, to whom, and where there may be gaps in services/products for which there are opportunities to craft new services/products.

It will be this foundation for which we will begin our journey of product/service development.

Call to Leadership

The strength of organizations, and healthcare is no exception, comes from its leadership starting at the top and trickling down and through the entire organization. It cannot be said enough, the role of leadership in this new world of healthcare reform and the future it holds rests in the dedication, commitment, professional will, and personal humility of its leaders. For an industry, healthcare, which has as its central focus of compassionate care, leaders serve their institutions best when they also are compassionate in their resolve.

The “old” ways of leadership will not survive nor be successful in the world of tomorrow.

The journey begins with “ideas”…fresh, new, invigorating and worthy of greater opportunities to explore, expand and to drive toward excellence. Ideas and how you guide your team will differentiate your healthcare organization from the others. Is this a daunting challenge in a world facing even greater financial challenges, one for which it is difficult to find well qualified staff, and one for which so much change is at hand. Yes, but that is what leadership is all about. It is creating value and serving others.

We often hear the phrase that this is all about “servant leadership”…leadership guided by the needs and desires of others not oneself.

Challenge, yes…rewards, matched by none.

Are you ready?
Are you willing?
Are you committed to be the leader you need to be to create a healthcare organization whose vision, values, and competitive position are in line with what “needs to be”?

You can do it.
You must do it.

And, most importantly, ............ your healthcare organization is waiting with open arms for you to step up to the task!

Go for it, now!

Adapted from Leadership and the New Science by Margaret J. Wheatly.